

Mrs Gail Smith and Russell Smith

Benamy Care

Inspection report

25 Candlish Terrace Seaham County Durham SR7 7BA

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Ratings

Overall rating for this service	Inadequate •
Is the service safe?	Requires Improvement •
Is the service effective?	Requires Improvement •
Is the service caring?	Requires Improvement •
Is the service responsive?	Inadequate •
Is the service well-led?	Inadequate •

Summary of findings

Overall summary

This inspection took place on 13 September 2016 and was unannounced. This meant the staff or registered provider did not know we would be coming.

The service was last inspected on 12 February 2016 at which time we found the registered provider had failed to implement the majority of an action plan they told us was intended to address a range of breaches of the Health and Social Care Act 2008, identified in a previous inspection of 19 and 20 August 2015. These breaches of legislation were:

- •□Regulation 9 Person-centred care
- •□Regulation 11 Consent
- ☐ Regulation 12 Safe care and treatment
- •□Regulation 17 Good governance
- •□Regulation 18 Staffing

We took enforcement action following the inspection of 19 and 20 August 2015 and the service was put into 'Special Measures'. This meant the service was kept under review and a return inspection planned within six months, with the expectation that significant improvements should have been made within this timeframe. At the inspection of 12 February 2016 we found the registered provider had failed to make any significant improvements and remained in breach of these regulations. The service therefore remained in 'Special Measures.'

On this inspection of 13 September 2016 the inspection team were unable to undertake a full inspection of the service due to the obstruction of the registered providers and the registered manager (who is also one of the registered providers). The registered providers confirmed they had made no changes or improvements since the last inspection and did not intend to do so.

The obstruction of an inspection is a criminal offence under Section 63 (7) of the Health and Social Care Act 2008. CQC has considered the appropriate regulatory response to this obstructed inspection and has shared information regarding the conduct of the registered providers with local authority commissioning professionals.

The service therefore remains in Special Measures.

Benamy Care is a small residential care home in Seaham providing accommodation and personal care for up to five adults with learning disabilities. There were five people using the service when we attempted to inspect the service.

The home had a registered manager in place. A registered manager is a person who has registered with the

Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Of the documentation we saw, as per the comments by the registered providers, we saw care files had not been reviewed since the last inspection and there was no evidence of quality assurance work being undertaken.

The registered providers confirmed they had put in place no action plan since the last inspection. The registered providers obstructed the inspection by way of refusing to answer further questions and requesting that we leave the premises and we were unable to complete a comprehensive inspection of the service at this time.

During our inspection we found no evidence to indicate that the previous breaches of the Health and Social Care Act 2008 Regulated Activities Regulations 2014 (as identified in previous inspections) had been addressed, or that any improvements had been made.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not always safe.

We were unable to assess whether the service had made any significant improvements since the last inspection due to the registered providers obstructing the inspection. We saw evidence to indicate risk assessments had not been reviewed or improved.

The rating therefore remains as Requires Improvement.

Is the service effective?

The service was not always effective.

We were unable to assess whether the service had made any significant improvements since the last inspection due to the registered providers obstructing the inspection. We saw evidence in one care file that no capacity assessments or best interests decisions had been undertaken and that there had been no attempts to improve the deficiencies in care planning identified at the last inspection.

The rating therefore remains as Requires Improvement.

Is the service caring?

The service was not always caring

We were unable to assess whether the service had made any significant improvements since the last inspection due to the registered providers obstructing the inspection.

The rating therefore remains as Requires Improvement.

Is the service responsive?

The service was not responsive.

We were unable to assess whether the service had made any significant improvements since the last inspection due to the registered providers obstructing the inspection. We did see in

Requires Improvement

requires improvement

Requires Improvement

Requires Improvement

Inadequate

two care files the activities plans were based on group activities rather than individual preferences and had not been amended or reviewed since September 2015.

The rating therefore remains as Inadequate.

Is the service well-led?

Inadequate •



The service was not well led.

We were unable to assess whether the service had made any significant improvements since the last inspection due to the registered providers obstructing the inspection. The registered providers confirmed they had made no changes or improvements since the last inspection and did not intend to do SO.

The rating therefore remains as Inadequate.



Benamy Care

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the registered provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 13 September 2016 and was unannounced. We arrived at 8:45am and left at 10:15am, the registered providers having obstructed the inspection and refusing to engage in the inspection process.

The inspection team consisted of one adult social care inspector and one Specialist Advisor. A Specialist Advisor is someone who has professional experience of this type of care service, in this case learning disabilities.

We spoke with the registered providers and the registered manager (who was one of the registered providers). We briefly spoke with all five people who used the service and the handyman. During the inspection visit we looked at two people's care plans, a staff supervision file, a quality assurance file and a file of surveys.

Before our inspection we reviewed all the information we held about the service, including previous inspection reports, enforcement action and previous action plans. We liaised with the local authority and they updated us on meetings they had held with the registered provider. Commissioning and safeguarding professionals at the local authority expressed ongoing concerns about the ability of the registered providers to sustain the service.

Requires Improvement

Is the service safe?

Our findings

At the previous inspections of 19 and 20 August 2015 and 12 February 2016 we identified concerns regarding the lack of clear instructions in risk assessments and the administration of medicines. At this inspection we saw in one person's care file that risk assessments still lacked detail. We were unable to pursue these lines of enquiry fully as the registered providers obstructed the inspection and asked us to leave. Through our observations, brief conversations with people who used the service, prior inspection experiences and feedback from local authority safeguarding professionals we saw that nobody using the service appeared to be at imminent risk of significant harm.

The registered providers confirmed on numerous occasions that they had not made any changes since the last inspection, nor did they intend to. One of the registered providers stated, "We've changed nothing. What's the point? Care is care and everything else around that is jargon."

The registered providers obstructed our attempts to undertake the inspection and we were unable to establish any improvements with regard to this aspect of the service. The rating therefore remains as Requires Improvement.

Requires Improvement

Is the service effective?

Our findings

At the previous inspections of 19 and 20 August 2015 and 12 February 2016 we identified concerns regarding the registered providers' understanding of consent, choice, capacity assessments, best interests decision-making and Deprivation of Liberty Safeguards (DoLS).

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We were unable to check whether the service was working within the principles of the MCA. At previous inspections we identified that the registered manager and registered provider had not effectively implemented training in this area and that their knowledge was poor. These concerns were shared by a local authority safeguarding professional.

We saw that in two people's files we were able to look at briefly, no capacity assessments or best interests decisions had been undertaken since the last inspection. We also saw, as per the last inspection, that people deemed to lack capacity to consent to care and treatment had been asked to sign their consent for this care and treatment. We were unable to pursue these lines of inquiry with the registered providers as they refused to answer questions and engage in the inspection process. We were unable to identify any improvements with regard to this aspect of the service and the registered providers confirmed they had not made any.

The rating therefore remains as Requires Improvement.

Requires Improvement

Is the service caring?

Our findings

At the previous inspections of 19 and 20 August 2015 and 12 February 2016 we identified concerns regarding the accessibility of care plan information and the extent to which people who used the service were involved in their own care planning and delivery. We also raised concerns at these previous inspections regarding the failure to support and empower people's independence. On 12 February 2016 we found the registered provider had failed to put in place actions set out in their own action plan to address these concerns.

During this inspection the registered providers confirmed on numerous occasions that they had not made any changes since the last inspection, nor did they intend to. They obstructed our attempts to undertake the inspection and we were unable to establish any improvements with regard to this aspect of the service. The rating therefore remains as Requires Improvement.



Is the service responsive?

Our findings

At the previous inspections of 19 and 20 August 2015 and 12 February 2016 we identified concerns regarding the lack of person-centred planning of activities and the lack of meaningful in house activities. We also identified concerns regarding the lack of involvement of people who used the service and their relatives in the reviewing of care plans. On 12 February 2016 we found the registered provider had failed to put in place actions set out in their own action plan to address these concerns.

During this inspection the registered providers confirmed on numerous occasions that they had not made any changes since the last inspection, nor did they intend to. They obstructed our attempts to undertake the inspection and we were unable to establish any improvements with regard to this aspect of the service. The rating therefore remains as Inadequate.

Is the service well-led?

Our findings

At the previous inspections of 19 and 20 August 2015 and 12 February 2016 we identified concerns regarding governance and leadership at the service, including repeated failures to implement action plans, the content of which were intended to address a range of breaches of the Health and Social Care Act 2008.

Our previous concerns regarding the leadership of the service were heightened due to the conduct of the registered providers at this inspection. The refusal to assist or engage with the inspection follows previous inspections whereby no significant improvements had been made despite the support of a consultancy firm, the support of local authority safeguarding officers and the framework of action plans.

During this inspection the registered providers confirmed on numerous occasions that they had not made any changes since the last inspection, nor did they intend to. They obstructed our attempts to undertake the inspection and we were unable to establish any improvements with regard to this aspect of the service. The rating therefore remains as Inadequate.