Accomplish Group Limited

Warmley Court

Inspection report

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Ratings

Overall rating for this service	Good

Is the service safe?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

We undertook an unannounced focused inspection of Warmley Court on 19 June 2018. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on11 October 2017 had been made.

One inspector inspected the service against two of the five questions we ask about services. These were; is the service safe? and is it well led? This was because the service was not meeting a legal requirement at our last inspection. Specifically the provider's system of quality auditing was not effective. It had not identified a medicines recording shortfall that could have put a person at risk.

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Warmly Court is a care home. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. Warmly Court care home accommodates 10 people with an acquired brain injury in one adapted building.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion.

There was a registered manager for the service 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.

People told us staff were caring towards them. We also saw that the staff we met were kind caring and respectful towards everyone who lived at the home. This conveyed that people felt safe at the home and with the staff who supported them. People were protected from abuse and the risks from avoidable harm. This was because staff were properly trained and knew how to keep people safe.

The provider's system for the management of people's medicines ensured they were looked after properly. Where people wanted to they were supported to be responsible for their own medicines.

There was a quality system in place to properly monitor and check the quality of the service. Audits demonstrated that regular quality checks were completed in relation to the safety and quality of the service. Audits identified medicines recording shortfalls and these were promptly addressed.

The quality checking system in place for auditing and monitoring quality and safety was now being used much more effectively. Failing and shortfalls in the service in relation to medicines, and other areas were swiftly picked up and addressed.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good

The service remains good

Is the service well-led?

Good

The service has improved to good

There was a quality checking system in place to monitor the service and to drive improvements. This was now effective and it picked up shortfalls in the service when identified

Staff were made aware of the values of the organisation they worked for and how to put them into practice.

Warmley Court

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 checked whether the 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 19 June 2018 and was unannounced. One inspector carried out the inspection.

Before the inspection, we looked at all the information we had about the service. This information included the statutory notifications that the provider had sent to CQC. A notification is information about important events which the service is required to send us by law.

We read the Provider Information Record (PIR) and previous inspection reports before our visit The PIR was information about how the service is run, given to us by the provider. This enabled us to ensure we looked closely at any potential areas of concern. The PIR was detailed and gave us information about how the service ensured it was safe, effective, caring, responsive and well led.

We met three people who were living in the home. The staff we spoke with included the registered manager, a senior support worker and two support staff. We saw how staff engaged with people they supported.

We viewed one person's medicine risk assessment records, as well as five people's medicine records and risk assessments. We checked staff training and employment information, and staff duty rosters. We also viewed a number of other records relating to the way the home was managed. These included a range of quality audits.

Good

Is the service safe?

Our findings

Medicines were managed safely in line with up to date national guidance by well trained staff. People were supported to manage their medicines safely. Staff told us and records showed they received training and had checks to ensure they managed medicines safely. Staff knew what action to take if they identified a medicines error. There were checks in place to ensure any issues were identified quickly and action taken as a result. The provider had up to date guidance which was accessible for staff who dealt with medicines. Staff took time to explain to people what their medicines were for, and checked that people were happy to take their medicines. All medicines were stored, documented, administered and disposed of in accordance with current guidance and legislation. This meant people received their medicines as prescribed.

There were systems in place to minimise the risk to people of abuse. Staff understood about the different types of abuse that could happen to people. Staff told us they had received training about recognising harm and abuse and were able to give us examples of what they would look out for, the actions they would take and who they would report their concerns to.
Staff we spoke with also understood the laws in place to protect people's rights and how to keep them safe from the risk of abuse. There were copies of the procedure for reporting abuse on display on notice boards in several parts of the home. The procedure was written in an easy to understand way. This was to help to make it easy for people to use. There was also information from the local authority advising people how to report abuse if they were concerned about someone.

Staff knew what whistleblowing at work was and how they could do this. Staff understood they were protected in law if they reported possible wrongdoing at work. Staff had also attended training to help them understand this subject. There was a whistleblowing procedure on display in the home. The procedure had the contact details of the organisations people could safely contact. Staff told us safeguarding was discussed during staff supervision sessions.

The manager reported all concerns of possible abuse to the local authority and told us when they needed to. The registered manager carried out full investigations and promptly reported incidents to the relevant authorities. These included the safeguarding adult's team and CQC. This was if and when risks to people's safety and wellbeing had been identified.

People continued to be supported with their needs by enough suitably competent and qualified staff to keep them safe. This was evident in a number of ways. Staff offered attentive one to one support to people who needed extra support with their care needs , Staff also supported people with other aspects of daily living .This included supporting people discreetly with personal care , support with nutritional needs and support to attend therapeutic community activities.

People were protected from the risks of unsuitable staff being employed at the home. Checks were completed on the suitability of all potential new staff before they were able to commence work for the service. These included references, employment history checks and Disclosure and Barring Service (DBS) checks. The DBS is an organisation that helps employers make safer recruitment decisions and prevent

unsuitable people from working with vulnerable groups, including children. These had been undertaken on all staff to ensure only suitable employees were recruited

Good

Is the service well-led?

Our findings

At out last inspection we had found that the system for checking the quality and safety of the service people received was not effective. It had failed to fully pick up shortfalls in how medicines were managed. At this inspection we found that the quality checking system was being used effectively. The quality checking system to monitor medicines management had been fully reviewed and updated. We saw that the quality checking process now easily picked up shortfalls in the service. We saw that suitable action was then taken to ensure the management of medicines arrangements were safe. This also meant the system for auditing the quality and safety of the service was fully effective

Quality audits were also completed to ensure that all care plans and risk assessments were up to date and regularly reviewed.

The registered manager acted when any accidents and incidents occurred that involved people living at the home. Information was analysed and learning took place. Trends and patterns were identified and we saw that actions were then put in place if needed to reduce the risks of reoccurrence. For example, we read about one person who could become really anxious about certain daily living tasks. Actions were put in place to keep the person safe and ensure they were properly supported.

People were relaxed and comfortable to approach the registered manager and senior staff at any time. The registered manager and team leader were attentive and warm and friendly with people. There were frequent warm and positive interactions between them. The staff were also comfortable to speak to the registered manager and team leader.

The provider's values included being respectful of each person rights to live their life in the way they chose. Another value was to always engage with people in a way that was totally person centred in approach. The staff were able to explain how they put these values into practice when they supported people at the home. The staff on duty clearly followed these values in the ways they supported people.

Staff meetings were held regularly. Staff meeting minutes showed that a range of matters including safeguarding people, the management of the home and how to care for people more effectively were raised as topics for discussion. Staff told us that they felt they could make their views known to the registered manager and the team leader. Staff also told us there was a handover at each shift and a communication book in use to record important information. This meant that staff could quickly gain access to information when needed.