

# Mr & Mrs P Carr

# Patrick Carr

### **Inspection report**

123 Old Park Avenue Enfield Middlesex EN2 6PP

Tel: 02083421636

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### Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service effective?	Good
Is the service well-led?	Good

# Summary of findings

### Overall summary

#### About the service

Patrick Carr is a care home registered to provide accommodation and personal care to three people with a learning disability and autistic people. They currently provide accommodation and care to one person.

### People's experience of using this service and what we found

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Based on our review of key questions Safe, Effective and Well-led, the service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

### Right Support:

Staff supported the person to follow their individual interests, follow their chosen lifestyle and to maintain their independence. They supported the person with their health and to minimise all risks to their health, safety and wellbeing. Staff were trained to meet the needs of the people they were supporting.

### Right Care:

The person told us about their life and confirmed they received good care and support to lead a fulfilling life. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. There was a strong commitment to delivering person-centred care and staff respected the person's rights and individuality. Staff had good knowledge of the person's individual communication needs and treated them with kindness and respect. The person confirmed this.

### Right Culture:

Staff formed relationships with people they supported. They provided support to maintain relationships with family and friends and to deal with challenges in life. Patrick Carr is a care home registered for three people. At the time of the inspection, support was provided to one person who had been receiving support from the provider for over 30 years.

The registered manager was committed to continuous learning.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

### Rating at last inspection

The last rating for this service was good (published 07/09/2018).

### Why we inspected

We inspected this service as it had been four years since the last inspection. This was a focused inspection looking at the key questions safe, effective and well-led. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Patrick Carr on our website at www.cqc.org.uk.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

# 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 was safe. Details are in our safe findings below.	
Is the service effective?	Good •
The service was effective. Details are in our effective findings below.	
Is the service well-led?	Good •
The service was well-led. Details are in our well-led findings below.	



# Patrick Carr

### **Detailed findings**

## Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

### Inspection team

This inspection was carried out by one inspector.

#### Service and service type

Patrick Carr is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Patrick Carr is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. At the time of our inspection there was a registered manager in post.

### Notice of inspection

We gave the service 48 hours notice of the inspection. This was because we wanted to be sure the registered manager and the person living in the home would be available.

### What we did before the inspection

We reviewed information we held about the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all this information to plan our inspection.

### During the inspection

We met the person living at Patrick Carr. We also spent time observing staff interacting with this person. We spoke with both staff members, one of whom was the registered manager.

We reviewed records. This included risk assessments and support plans.



## Is the service safe?

# Our findings

Safe - This means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- There were suitable systems in place to safeguard people and manage risks of abuse.
- Staff had a good knowledge of safeguarding issues and how to address them.
- Staff were trained in safeguarding practices and there was a safeguarding procedure in place for staff to follow.
- We discussed safeguarding issues with staff and the person living in the home and were assured that any safeguarding issues were addressed appropriately.
- •There was a personalised complaints procedure for the person detailing who they could call with any concerns including names of people they could speak to.
- Staff dealt sensitively with safeguarding concerns and supported the person well.

Assessing risk, safety monitoring and management

- People were protected against risks to their safety.
- There were risk assessments which included guidance on supporting the person to stay safe.
- The person was involved in assessing the risks to their safety. Staff included them in all discussions about their safety and their care.
- Staff had a detailed understanding of the risks for the person they were supporting and told us how they supported them to minimise risks.
- The home was well maintained and safe.

Using medicines safely

- People's medicines were managed safely.
- The person looked after their own medicines and staff supported them with ordering of medicines.
- Staff had good understanding of the person's medicines and what each medicine was for in case they needed support.

Learning lessons when things go wrong

• The registered manager and staff showed a reflective approach to learning from challenging situations and gave us examples of how they had supported the person with difficult issues.

Preventing and controlling infection; Visiting in care homes

- People were protected from the risk of infection.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.

- We were assured that the provider was using personal protective equipment (PPE) effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that precautions were taken in order to support safe visits to the home.

### Staffing and recruitment

- The service provided a stable staff team to support the person's individual needs and preferences. The team comprised the registered manager and one other staff member. They both lived in the home. No other staff were employed. There was a contingency plan if they needed help in the event of illness or emergency.
- The person had lived in this home for more than 30 years so the two members of staff knew their needs well.



# Is the service effective?

# Our findings

Effective - This means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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. We checked whether the service was working within the principles of the MCA.

- The person had mental capacity and made their own decisions, receiving support from staff where they needed.
- The person's rights were known, respected and supported by staff.
- There was good practice in the area of consent. Staff sought the person's consent throughout the day whenever offering support. The person said they were supported well and made their own decisions.
- Staff ensured the person had full understanding of and consented to vaccinations.

Staff support: induction, training, skills and experience

- Staff had suitable skills and experience for the job.
- Staff received training suitable for their role and to ensure their professional development. Staff had recognised qualifications in health and social care.
- •Staff reviewed the support they were providing on an ongoing basis including with a healthcare professional, and made sure the person was happy with their support.

Supporting people to eat and drink enough to maintain a balanced diet

- The person living in the home told us they preferred staff to prepare their meals and that they were happy with their diet.
- Staff told us how they encouraged a healthy diet.
- The person had a kettle in their room to make hot drinks whenever they wanted and also kept their own snacks.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

• Care was delivered in line with good practice standards.

- The service assessed the person's needs regularly to ensure they adapted their support to meet any changing needs.
- Care plans contained detailed information about support needs, likes and dislikes. Staff had very good knowledge of the person's needs and we observed staff respecting their choices.
- The person had a meaningful lifestyle and told us they were supported well with all aspects of their life. They had good support with all their protected characteristics.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The service supported the person with all their healthcare appointments, including booking the appointments and accompanying them to support communication. The staff were fully aware of the person's physical health needs and concerns and took appropriate action to support them. They also helped them with monitoring their health at home.
- There was a risk assessment in place for hot weather and the person had been supplied with a fan due to the current heatwave.
- The person's end of life wishes were recorded and known by staff.

Adapting service, design, decoration to meet people's needs

- The person living in the home showed us round their living area which was their own floor with a bathroom and bedroom. They also had use of the kitchen, lounge and garden.
- The home was a family home and met the needs of the person who had no accessibility requirements.



### Is the service well-led?

# Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager and staff member were clear about their roles and had knowledge of regulatory requirements. They ensured they kept up to date with any regulatory changes and sought external advice where needed.
- Good quality support was provided and reviewed regular to ensure it remained what the person required and that any risks were mitigated.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The provider promoted a person-centred culture.
- The person living in the home was at the centre of the service. The home reflected their needs and interests and staff supported them with the things they chose to do.
- The service was committed to empowering the person to maintain their and exercise their rights in all aspects of their life.
- There was appropriate engagement with relatives, but the person's confidentiality and wishes were respected at all times.
- There were regular individual discussions between the person and staff to make plans and discuss their support needs and wellbeing.
- The service worked in partnership with external professionals where needed to ensure best outcomes for people.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

- The registered manager understood the duty of candour. There had not been an incident requiring duty of candour at the service.
- There were a commitment to continuous learning and improvements.
- Staff kept up to date with new developments and joined all learning opportunities offered by the local authority.
- The service was very responsive to the person's changing needs and requests for support and adapted their support as requested.