

Paradise Lodge Care Home Limited

Chignal House

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

Were the people using this service safe and was the service well-led?

Since our last inspection the provider and registered manager had worked hard to address the concerns in our last inspection. As a result of the improvements we found there were no longer any breaches of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The new registered manager had settled in well and had developed positive relationships with people, staff and families. They worked effectively with the provider to promote a culture which was focused on the needs of the people living at the service. Although the registered manager was still stretched as they were managing two other services, the provider was addressing this issue. A new deputy manager had been appointed to support the registered manager.

Some of the processes and records at the service needed streamlining to ensure systems worked effectively. New quality audits had been introduced and were effective at supporting the improvements at the property. The provider met with the registered manager and senior staff to implement any actions from the audits. There was open discussion about mistakes and any lessons learnt were used to improve the service.

Communication had improved across the service and staff felt supported to speak out about any concerns they had. The provider and registered manager communicated well with families and people and had consulted with them about the proposed building work.

Staff worked well with external professionals to meet people's needs. There was scope for the registered manager to develop positive networks outside the service for support and to learn and share about best practice.

The registered manager had significantly enhanced the administration of medicine. There was improved training and guidance about the support each person needed. The registered manager observed staff competency and carried out detailed checks to ensure people received their medication as prescribed.

There were enough safely recruited staff to meet people's needs. The registered manager recognised the importance of people receiving support from staff who knew them well.

Staff supported people to remain safe. The quality of the risk assessments had improved. Staff had the necessary guidance to support people to minimise risk, while ensuring they enjoyed their lives and were not overly restricted. Staff knew what to do if they were concerned for people's safety. People were protected from the risk of infection. The property was clean and homely. The building work was not impacting on their quality of life.

See more information in Detailed Findings below.

Rating at last inspection: Requires Improvement overall, with caring and responsive rated as good (report published 22 May 2018)

About the service:

Chignal House is a residential care that provides personal care and accommodation to up to three people with learning disabilities. At the time of the inspection there were three people living at the service. The service had 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. People with learning disabilities and autism using the service can live like any citizen 'Registering the Right Support' CQC policy.

Why we inspected:

We carried out this focused inspection because the provider was carrying out building work at the property and had applied to increase the numbers of people living at the service. We wanted to check whether the existing people living at Chignal House were receiving safe care during the application process. At the time of writing this report, the provider had withdrawn their application to increase the service while they completed the building work.

Follow up:

We will continue monitoring the service to ensure people receive care which meets their needs.

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 had improved to good.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service had improved to good.

Details are in our well-Led findings below.

Chignal House

Detailed findings

Background to this inspection

The 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.

Inspection team:

One inspector and one assistant inspector carried out this inspection.

Service and service type

Chignal House is a care home. People in care homes receive accommodation and nursing or personal care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

The inspection was unannounced.

What we did:

The registered manager was registered to manage three care homes. We had concerns about the safety and management of two of these services, Chignal House and Paradise Lodge. We therefore carried out the inspection of the two services over two days in the same week.

As part of the inspection, we reviewed a range of information about the service. This included safeguarding alerts and statutory notifications, which related to the service. Statutory notifications include information about important events, which the provider is required to send us by law. We require the provider to submit a Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. At the time of this focused inspection the registered manager was still completing their return.

We spoke with people who lived at the service and observing how they were cared for. Where people at the service had complex needs, and were not able verbally to talk with us, or chose not to, we used observation to gather evidence of people's experiences of the service. We spoke with one family member for their views on the service which their relative received.

We spoke with the provider who was also the owner, the registered manager, acting deputy manager and two care staff. We reviewed the care records of three people who used the service. We also looked at a range of documents relating to the management of the service, including three staff files.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm

At the last inspection in March 2018 People who use services and others were not protected against the risks associated with the proper and safe management of medicines. This was a breach of Regulation 12 (2) (g) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found the provider and registered manager had addressed our concerns and the service was no longer in breach.

Using medicines safely

- Since our last inspection the registered manager had made a number of changes to the administration of medicine to ensure people received their medicines as prescribed.
- The registered manager had sourced a new course for staff which addressed gaps in their knowledge. All staff had received refresher training.
- Staff had detailed guidance about the support people needed with the medicines.
- The registered manager had improved the medicine audits. As well as daily checks on which medicines staff had administered, the registered manager had increased the frequency of their quality audit. The quality and frequency of staff competency checks had also improved.

Assessing risk, safety monitoring and management

- Since our last inspection the registered manager had improved the measures to minimise the risks to people's safety.
- Senior staff had carried out personalised risk assessments outlining any risks to people's safety and there was clearer guidance to staff on how to minimise these risks. Staff adjusted their support in line with people's flexible timetables. For example, staff increased their monitoring after a person had attended a birthday party to check for changes in their blood sugar levels.
- People at the service were settled and staff knew them well. Staff described how they supported people safely while ensuring they were not overly restricted. A member of staff told us, "[Person] cooks their own stir fries. We just support them because of the risk of fire."

Safeguarding

- The registered manager had demonstrated a commitment to improving the processes around safeguarding people within the service. They had changed the training provider to improve staff knowledge. Staff had also met to discuss how to support people to remain safe and what to do if they had concerns about a person's safety.
- There were now clear roles within the staff team about who was responsible for safeguarding processes within the service.
- We looked at an incident relating to a safeguarding alert and saw the registered manager had worked well with outside professionals.

Systems and processes

- The new meetings between senior staff were effective at managing areas of risk, such as reviewing any concerns with staff practice or any gaps from staff sickness.
- The registered manager had implemented improved and more personalised systems to help them monitor people were safe, such as individual health check forms. They had not fully streamlined processes so staff were spending a lot of time writing and information was not always easy to find. The registered manager described the plans they had in place to address this.

Staffing levels

- There were enough safely recruited staff to meet people's needs.
- The registered manager and provider told us they rarely used agency staff as they felt people needed to be supported by staff they knew.
- In an emergency, the provider, registered manager or other senior staff provided care to ensure there were enough staff to meet people's needs.

Preventing and controlling infection

- Prior to our inspection we had concerns that the building work may have increased the risk of infection. When we visited we found the service to be clean, whilst still appearing homely and welcoming.
- Audits to check on the control of infection had increased and improved. The provider had made practical suggestions for improvement in their audits such as reminding staff to double-check the washing up when a person chose to wash their own dishes.

Learning lessons when things go wrong

- The registered manager and provider had a more proactive approach to learning from mistakes. They had an improved system to log and monitor accidents and incidents.
- Communication about mistakes was open and resulted in an improved service, for example staff were given improved guidance and direction to minimise the risk of mistakes re-occurring.

Is the service well-led?

Our findings

The service was consistently managed and well-led. The provider and registered manager created a culture which promoted high-quality, person-centred care.

At the last inspection in March 2018 people who used the service and others were not protected against the risks associated with the ongoing failure to have good governance systems in place to monitor the quality of the care provided. This was a breach of Regulation 17 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found the provider and registered manager had addressed our concerns and the service was no longer in breach.

Leadership and management

- The new registered manager had focused on addressing risk and driving improvements throughout the service.
- The registered manager and provider had developed a positive working relationship. The registered manager told us the provider had agreed to their requests for increased resources, such as improved training.
- We had some concerns the registered manager was still stretched at they were managing other services in the organisation. However, there was limited impact to people at Chignal House from this and the provider had plans to address this issue. This included appointing a new deputy manager to support the registered manager in their post.

Provider plans and promotes person-centred, high-quality care and support, and understands and acts openly when things go wrong

- People knew the registered manager well and had the confidence their concerns would be listened to and resolved. We observed a person at the service approached the registered manager when they wanted a concern resolved. They told the registered manager, "Go and sort" and immediately became less anxious when they were listened to.
- The registered manager and provider promoted support which considered people's cultural backgrounds. A person told us about their afternoon trip, "I go shop for plantain."
- When things went wrong, the manager met with people, families and professionals to resolve concerns.

Managers and staff are clear about their roles. They understand how to manage risk, promote quality and meet their regulatory requirements

- Checks on the quality of the service had improved and reflected that the provider and registered manager had a better understanding about their responsibilities. Since our last inspection the provider had started quarterly formal checks, which highlighted issues of concern. The registered manager had also improved their regular quality checks.
- There were more regular meetings between senior staff which improved communication and helped make sure things got done, including monthly meetings between the registered manager and provider. These

meetings helped drive improvements, such as implementing actions from the last inspection and from the new quality checks.

Engaging and involving people using the service and staff

- People and their families were consulted and communicated with by the registered manager. Meetings had taken place to discuss the impact of the proposed extension to the service. There was scope to improve and record the consultation with people in some of the more formal processes, such as during the provider's quarterly check, to ensure people's voice was captured formally.
- Staff told us communication was good at the service and they could approach the registered manager or the provider if they had any queries or concerns. Team meeting notes reflected improved communication between the provider, registered manager and care staff.

Continuous learning and improving care

- The registered manager and provider had a better understanding of their roles in improving care. We the provider, registered manager and care staff were more pro-active and focused on improving the lives of the people at Chignal House.
- Staff told us the service was now more settled and outcomes for people had improved as they benefitted from an established staff and management team.
- We also found some guidance documents and procedures were outdated and did not represent current best practice. The registered manager had rightly focused on tackling areas of high risk and described their plans to ensure the systems were effective and easy to access.

Working in partnership with others

- Senior staff and care staff worked well with outside professionals, such as social workers and specialist agencies to meet people's needs.
- The registered manager and provider had responded well to our last inspection and had worked with the local authority to make improvements.
- The registered manager had limited access to networks outside of the organisation. We discussed the importance of developing new links as a way of gaining support and learning about best practice.