

Parkcare Homes (No.2) Limited

Station Road

Inspection report

8-8a Station Road
Winchmore Hill
London
N21 3RB

Tel: 02083602274

Website: www.craegmoor.co.uk

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service: Station Road is a care home providing accommodation and personal care for up to 12 people with learning disabilities. The home is a large detached house. The home was set out over three floors with a self-contained flat where two people lived. On the day of the inspection, nine people were 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 a learning disability were supported to live as ordinary a life as any citizen.

People's experience of using this service:

People and relatives told us the staff were kind, friendly and dedicated. Staff were knowledgeable around people's needs.

People were not always protected from the risk of avoidable harm as staff were not always providing care as per people's care plan and risk assessment.

Processes were in place to ensure that people could raise concerns. Complaints were investigated and responded to.

The service was working to a service improvement plan with support from the local placing authority. Checks and audits were carried out to determine the quality of the care. The provider had acted on some areas already identified for improvement.

Overall staff morale was poor with concerns raised about staff and management working relationships. The management team assured us these concerns were being addressed.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

Medicines were safely managed.

There were enough staff available to ensure people's care needs were met. Staff were safely recruited and received regular training.

People were supported to attend and engage in activities in the local community which were of interest or benefit to them.

Rating at last inspection: Good (report published January 2018).

Why we inspected: The inspection was brought forward due to information of concern that we had received in relation to people's care. The inspection was prompted in part by information we had received from the local authority where concerns had been raised around aspects of care delivery. At the time of the inspection, the service was subject to enhanced monitoring by the local authority safeguarding and quality team. The service was working on a service improvement plan.

However, the information shared with CQC about the incident indicated potential concerns about unsafe medicines management, risk management and staffing levels. This inspection examined those risks.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, we may inspect sooner.

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

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 caring?

Good ●

The service was caring.

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our Well-Led findings below.

Station Road

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: The inspection was carried out by one inspector and one specialist nurse advisor in Learning Disabilities.

Service and service type: Station Road is a care home. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. 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: Before the inspection, we reviewed information we held about the service. This included details about incidents the provider must notify us about, such as serious injury and police callouts; and we sought feedback from the local authority and other professionals who work with the service.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection, we spoke with four people who used the service and three relatives by telephone. We spoke with the registered manager, operations director and four care staff.

We reviewed four people's care records which included care plans, risk assessments and daily observations. We reviewed medicines records for all nine people. We reviewed four staff files and checked recruitment, training and supervision records. We checked other records associated with the running of the service such as staff rota's, accidents and incidents records and quality audits.

After the inspection we requested additional evidence to be sent to us. This was received, and the information was used as part of our inspection.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant that people were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe receiving support from staff and living at Station Road. One person told us, "The staff look after us quite well." A relative told us, "We see [Station Road] as an extended family. [Person] will tell us if things aren't good."
- Staff had received training in safeguarding and were knowledgeable around how to safeguard people from abuse and where to report concerns about people's safety.

Assessing risk, safety monitoring and management

- People's risks had been identified and assessed. Detailed risk assessments were in place to provide guidance on how to keep people safe from harm. Risks assessed included allergies, mental health conditions, mobility and eating and drinking. Risk assessments were reviewed on a regular basis.
- Staff had recently completed training around eating, drinking, dysphagia and choking. Two people living at the service were assessed as being at risk of choking. Part of the risk management plan was that staff should supervise these people eating and drinking.
- For one person, the risk of choking arose due to them eating their food quickly, which was observed on inspection. We observed that this person was left unattended by staff at a mealtime whilst they were eating despite their care records stating that they should be supervised when eating. This placed the person at an increased risk of avoidable harm such as choking. We brought this to the attention of the management team who advised that they would address this with the staff member involved.
- Relevant safety checks on the building and utilities had been completed for peoples' safety. A process was in place to report any maintenance issues for repair. Any minor environmental concerns identified on inspection had already been identified and reported to the provider's centralised maintenance oversight system for action.

Staffing and recruitment

- We received a mixed response from staff whether they felt there were enough staff on duty. Some staff told us they struggled to meet people's care needs as they found other staff did not always pro-actively manage their workload. We have elaborated further on this in the Well-Led section of the report.
- People and relatives told us they had no concerns with the staffing levels and felt that their care needs were adequately met. One person told us, "I have staff here to help me." On the day of the inspection, there were four staff on duty in addition to the registered manager.
- Staff rotas seen confirmed that where people were supported in the community or to attend appointments, staffing levels were adjusted accordingly.

- Systems were in place to ensure staff were safely recruited, such as criminal records, ID checks and references.

Using medicines safely

- People had medicines care plans and risk assessments in place which provided staff with guidance on how people received their medicines. They received their medicines from staff who had undertaken relevant training and completed medicine competency assessments.
- Medicines Administration Records (MARs) seen on inspection indicated that people received their medicines as prescribed, with no errors or gaps in recording. Stocks of medicines checked balances with documented quantities. MARs documented where people had an allergy.
- Medicines were stored securely with daily temperature checks documented.
- Where people were prescribed 'as required' medicines, for example for pain or anxiety, procedures and guidance were in place for staff to ensure these medicines were administered appropriately.
- Evidence was seen that people had regular medicines reviews with the appropriate health professionals.

Preventing and controlling infection

- Effective arrangements were in place to manage the cleanliness of the home. The home was overall clean on the day of the inspection.
- Staff had received training in infection control and had adequate supplies of personal protective equipment to maintain good infection control.

Learning lessons when things go wrong

- Accidents and incidents were reported and recorded by staff. Where an action was identified to prevent re-occurrence, this was completed. For example, adapting equipment to reduce the risk of falls in the home.

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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same. People's outcomes were consistently good, and people's feedback confirmed this.

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

- People living at Station Road had done so for several years, and as such, assessments for new admissions had not taken place. However, people's needs were regularly assessed, and detailed care plans were in place based on information obtained from periodic reviews and input from health professionals.

Staff support: induction, training, skills and experience

- Staff told us they were supported to attend regular training. We received positive feedback from people and relatives regarding the support received from staff. Feedback included, "One staff member told us, "I'm happy with my trainings. [Name] came to do training for dysphagia." The area director told us that ensuring training was up to date had been a priority.
- Training records confirmed that staff had completed the provider's required training, which covered a range of topics relevant to the provision of people's care. Staff had also been trained in areas specific to people's care needs, for example dysphagia. We saw observations and competency assessments had been completed following the training delivery.
- Staff were supported by regular supervision. Records confirmed that staff were given opportunities in supervision sessions to raise concerns and discuss training needs.

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

- People told us they were happy with the menu choices on offer and felt involved in preparing their meals. One person told us, "I'm having salmon for lunch. I love salmon." A second person told us, "I can eat anything I want. I can do what I want. I can make a cup of tea or lunch for myself."
- People's weight was monitored, and staff made referrals to the appropriate health professionals if they were concerned about people's eating, drinking or weight changes.
- One person was supported to make healthy food choices to assist with weight loss. We observed a jovial conversation between them and staff regarding healthy food choices and the positive impact that was on their weight loss plan.

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

- People's healthcare needs were set out in their care plans, staff monitored people's healthcare needs and sought professional input where required.
- Relatives told us staff were quick at identifying any concerns and seeking appropriate health professional support. A relative told us, "They are very good at acting on things. [Person] was referred to the GP and issue was seen within a week."

- Staff supported people to attend healthcare appointments. Staff knowledge about people was good and professional advice provided was followed.

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

- Everyone had their own bedroom and access to either an en-suite bathroom or a closely situated bathroom. Bedrooms were bright and decorated to people's personal tastes.
- People could access the kitchen to make snacks and drinks and people could access the garden which was observed on the inspection.
- The home was overall decorated to a bright and modern standard.

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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Records confirmed that where appropriate, people had consented to their plan of care and where this was not possible, a mental capacity assessment and best interests' decision had been taken in line with the legal framework.
- Staff had training in MCA and understood the importance of ensuring the consulted with people prior to providing assistance.
- DoLS applications had been submitted in line with requirements.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People spoke positively of living at Station Road and the warm relationships they had developed with staff and other people living at the service. One person told us, "The best thing is that the staff are nice." A relative told us, "We have built relationships with staff and we have a great relationship with the other service users."
- Staff we spoke with were kind and caring. They knew people's preferences and used this knowledge to support them in the way they wanted. A staff member told us, "I always want to make sure people have a smile on their faces."
- People were supported to maintain relationships that were important to them. Visitors were welcome at any time. A relative told us, "Relationships were supported safely within the service."
- Advocates were used where people did not have someone to speak on their behalf.
- Staff respected people's equality, diversity and human rights and recorded them as part of the support planning process. People had a human rights profile in their care file which provided information to staff on how to ensure they provided personalised support to people with protected characteristics.

Supporting people to express their views and be involved in making decisions about their care

- Staff encouraged and supported people to make decisions about their day to day routines, in line with their personal preferences. For example, we observed staff have discussions with people about their meal preferences, activities and for one person a discussion about how they wanted to celebrate their upcoming birthday. A person told us, "I will talk to [staff member] and plan what to do. I will have a party and lots of people will come around."
- Family members told us they were involved in discussions about people's support plans and ongoing care reviews. One relative told us, "The communication is very good. They know we are close to [person]."

Respecting and promoting people's privacy, dignity and independence

- People and relatives told us that staff treated them with dignity and respect. People's privacy was respected. People could freely spend time in their bedrooms and we observed staff respect people's privacy by knocking on doors.
- People living at the service had differing levels of need and some people lived lives more independent from the service than others. Care plans detailed what people could do for themselves and where people required staff support. One person told us, "I have staff to help me with the shower. The rest I can manage by myself." We observed people assist with meal preparation and attend activities in the community on their own.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People and relatives were overall positive about the responsive nature of the care delivered. One person told us, "The staff look after us quite well."
- Relatives gave us examples of where the staff and management team had used their knowledge of the person to provide emotional support at times. One relative told us of an instance where a staff had worked to reassure a person after an event. They told us, "A few weeks ago [Person] was verbally abusive and stormed off. Staff hadn't seen that before. [Staff name] found out what had triggered this, and it was all sorted."
- Care plans were detailed, person centred and reviewed on a regular basis. Care plans clearly stated the assessed care needs, for example personal development, medicines or a health condition. Where the person lived with a specific medical condition, it was explained along with the symptoms the person may show. The care plan clearly stated the interventions staff should provide.
- People's individual communication needs were assessed and recorded in line with the Accessible Information Standard (AIS). The Standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of people with a disability, impairment or sensory loss.
- People and families spoke positively of the relationships people had with their key workers and how people were involved in planning their care. Records confirmed that people had a weekly meeting with their keyworker where recent activities, events and care needs were discussed. One person told us, "My meetings are on Saturdays. We have a good chat." A relative told us, "[Person] has a wonderful keyworker in [staff member]."
- On the day of the inspection, we observed that most people were out and about either in the community with staff or attending scheduled external activities. People and relatives were positive around the level of stimulation people had whilst living at the service. A relative told us, "[Person] seems to be content. They are included in all the trips and are well looked after by the other residents."
- We did not observe any activities taking place within the home for people who did not go out. We fed this back to the registered manager who advised that they would review.

Improving care quality in response to complaints or concerns

- A complaints procedure was in place which was on display in communal areas of the home.
- We noted that no formal complaints had been documented since we last inspected which was confirmed by the registered manager. However, we noted that where people had raised minor concerns, records were not kept of the improvements made as a result, for example, people sometimes raised issues in residents' meetings. The registered manager demonstrated that any issues raised were addressed, however this was not always documented.

- People and relatives told us they would raise concerns with the manager. One person told us, "I go to [registered manager], she comes upstairs to see me." A relative told us, "[Registered Manager] is very nice. I know I can speak to her."

End of life care and support

- No-one living at Station Road was receiving end of life care at the time of the inspection.
- Care plans documented that advanced care planning and end of life care was discussed with most people and their relatives.

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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same. The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- People and relatives told us they were happy living at Station Road and the level of support received. Feedback from people included, "I'm happy to live here. I've got all my friends here" and "I'm very happy here."
- Relatives told us, "No concerns about [Person] there. Everybody is extremely friendly. All good people there" and "[Registered Manager] has brought in new things. More positives, for example food, menu choices and healthy eating has increased."
- Staff spoke positively of the people they cared for. A staff member told us, "The service users know you. They come to you when they want something. I know them quite well. They like to chat with you or ask you something. They are happy."
- The registered manager understood their responsibility to let others know if something went wrong in response to their duty of candour.

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

- The registered manager was clear about their responsibilities and had a good understanding of regulatory requirements. They had notified CQC when it was required of events and incidents which occurred at the service.
- At the time of the inspection, the management team at the service was undergoing change. A new deputy manager had been recruited who had just commenced employment. Staff were positive about the changes taking place in this regard. In addition, team leaders were being recruited. The registered manager was being supported by an operations director.
- A system was in place for the monitoring of quality and safety. Areas for improvement were identified through audits and appropriate action was taken to make any required improvements.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- When we last inspected in December 2017 some staff raised concerns around poor working culture and poor staff working relationships. At this inspection, we found that these issues remained within the staff team. Some staff spoke positively of working at the service and some staff raised concerns with the effectiveness and work ethic of the staff and management team.
- We spoke with the registered manager and operations manager about these concerns. They advised that

they were trying to address the concerns raised through regular meetings, supervisions, additional training and performance management.

- Residents meetings were held on a regular basis and participation from people was actively encouraged. Minutes of meetings were displayed in a communal area of the home. Topics discussed at meetings included people's wishes for holidays and outings, improvements to the home and discussions around what people were getting up to in general.

Continuous learning and improving care; Working in partnership with others

- At the time of the inspection, the service was subject to enhanced monitoring and support from the local placing authority. A service improvement plan was in place based on concerns identified earlier this year through the local authority's quality monitoring procedures in areas such as medicines management, staff training and following professional input.

- At this inspection, we saw that the registered manager with support from the operations director was working through the improvement plan to address the concerns raised and progress had been made.