

Mrs Anne Elizabeth Barrows

# Nak Centre

## Inspection report

The Nak Centre  
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### Ratings

Overall rating for this service

Good ●

Is the service responsive?

Good ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 17 February 2016 at which time a breach of legal requirements was identified. Care plans were not being regularly reviewed and contained information which was out of date and inaccurate. Some information was contradictory which meant it could be difficult to gain an accurate picture of people's support needs.

We carried out this focused inspection to check the provider was now meeting the legal requirements. The inspection took place on 7 June 2017 and was unannounced. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for the Nak Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

The Nak Centre provides care and accommodation for up to six people who have a learning disability. At the time of the inspection five people were living at the service. There was a registered manager in post. 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.

Care plans were up to date, accurate and gave a comprehensive picture of people's needs and preferences. There was a system in place to help ensure they were regularly reviewed and any changes in people's needs were clearly highlighted. Daily logs were completed regularly and the information was detailed and descriptive. Where necessary, people's health was monitored to help ensure any changes would be quickly recognised. We found the service was now meeting the requirements of the legislation.

People had access to a range of activities which were meaningful and appropriate to their needs. Activities took place both within the service and in the local community. People were supported to be involved in daily tasks such as laundry and other household chores according to their abilities.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service responsive?

Good ●

The service was responsive. Care plans were accurate and up to date.

Daily logs contained detailed and descriptive accounts of how people spent their time.

People had access to a range of meaningful activities.

# Nak Centre

## **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 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 focused inspection took place on 7 June 2017 and was unannounced. The inspection was carried out by one inspector. This inspection was done to check that improvements to meet legal requirements planned by the provider after our February 2016 inspection had been made. We inspected the service against one of the five questions we ask about services: is the service responsive? This is because the service was not meeting some legal requirements in this area.

Before the inspection we reviewed information we held about the service and notifications we had received. A notification is information about important events which the service is required to send us by law.

During our inspection we spoke with the registered manager and two members of staff. People living at the Nak Centre were not able to give us their verbal views of the service due to their health care needs. We met with people and observed them engaging and interacting with staff.

We looked at two people's detailed care records, people's daily records and weekly activity planners.

# Is the service responsive?

## Our findings

At our previous comprehensive inspection in February 2016 we found the records kept regarding people's care and support were unreliable. Care plans were not being regularly updated and some information was out of date or contradictory. There was no system in place to help ensure the care plans were regularly reviewed. We found the service was in breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this focused inspection we found care plans had been updated and were reviewed monthly or whenever people's needs changed. The care plans contained information about people's background, any medical conditions and support needs. There was detailed information about people's daily routines and how they preferred to be supported for example, when getting up or ready for bed. A summary sheet at the front of care plans, contained information regarding the last review date and whether any changes to the records had been made. Where appropriate it highlighted where the changes were. This meant staff were able to quickly identify any changes in people's needs. We concluded the provider was now meeting the requirements of the legislation.

Daily logs were completed throughout the day for each individual. These recorded any changes in people's needs as well as information regarding appointments, activities and people's emotional well-being. The logs were comprehensive and informative.

People had access to a range of activities, both in-house and outside of the service. Activities were planned to meet people's individual needs and preferences. For example, the registered manager told us of a trip people had taken to a specific event. One person had not attended as they would have found it too long and would not have enjoyed it. The registered manager told us the person had been supported to go on a separate trip out to a local attraction which they had thoroughly enjoyed.

Staffing was arranged so people were able to have one to one support when accessing the community. This meant they were able to enjoy trips at their own pace and in a way which suited their individual needs. The daily logs and weekly activity planners reflected the range of pursuits people were supported to take part in. These included horse riding, drumming sessions, attending day centres, theatre trips and bowling. People were also supported to be involved in household chores such as vacuuming and laundry tasks. Each person had a personal photograph album where photographs of them taking part in activities were kept. This meant staff were able to keep a record of events which was meaningful and accessible for each individual.

There was a satisfactory complaints procedure in place which gave the details of relevant contacts and outlined the time scale within which people should have their complaint responded to. No complaints had been received at the time of the inspection.