

Inspired 4 Care Limited

The Acres

Inspection report

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?	Inadequate 
Is the service effective?	Requires Improvement 
Is the service caring?	Requires Improvement 
Is the service responsive?	Requires Improvement 
Is the service well-led?	Requires Improvement 

Summary of findings

Overall summary

About the service

The Acres is a small residential home providing personal care to one person with a learning disability at the time of the inspection. One person had left the service just prior to our inspection. The service can support up to four people. Each person had their own bedroom, two of which were en-suite, and shared the lounge and kitchen. There was a waking night member of staff overnight in case of an emergency.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. It is a small home which is not identifiable as being a care home. People are supported to be part of their local community.

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

People were not safe living at the service. Risk assessments had not been robust enough to prevent one person leaving the home unsupported. Staff had not followed the agreed care plan to engage and distract this person when they were anxious. Action had not been taken when there was a 'near miss' incident when the same person was seen leaving the home by staff and then encouraged to return.

A new manager had been appointed in September 2019. The nominated individual and quality manager were taking more of a 'back seat' role, with the manager taking responsibility for managing the service.

The manager had re-written care plans and risk assessments, introduced a more robust quality monitoring system and regular staff meetings and supervisions.

People's needs had not been adequately assessed before they moved to the service to ensure The Acres was able to meet their needs and they were compatible sharing with the people already living at the home. The manager told us they would lead all future pre-admission assessments.

Staff felt well supported by the manager, who was approachable. Staff completed training to meet people's needs, although we noted some of this had only been arranged after people had already joined the service.

People were supported to maintain their health and nutrition. People received their medicines as prescribed.

Relatives were positive about the staff team supporting their relative, saying they were kind and caring.

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.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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

Rating at last inspection

This service was registered with us on 1 December 2018 and this is the first inspection.

Why we inspected

This was a planned inspection based on when the service was registered with us.

Enforcement

We have identified breaches in relation to managing the known risk of one person trying to leave the home unsupported, the lack of robust pre-admission assessments, the lack of engagement by staff to distract one person when they were anxious and not taking sufficient action following an incident to reduce the risk of the same thing happening again.

Please see the action we have told the provider to take for these breaches at the end of this report.

Follow up

We will meet with the provider following this report being published to discuss how they will make changes to ensure they improve their rating to at least good. We will work with the local authority to monitor progress. We will return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Inadequate 

The service was not safe.

Details are in our safe findings below.

Is the service effective?

Requires Improvement 

The service was not always effective.

Details are in our effective findings below.

Is the service caring?

Requires Improvement 

The service was not always caring.

Details are in our caring findings below.

Is the service responsive?

Requires Improvement 

The service was not always responsive.

Details are in our responsive findings below.

Is the service well-led?

Requires Improvement 

The service was not always well-led.

Details are in our well-Led findings below.

The Acres

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.

Inspection team

The inspection was carried out by one inspector.

Service and service type

The Acres 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 who was in the process of applying to be registered with the Care Quality Commission. A registered manager 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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since they had registered with us. We sought feedback from the local authority and 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.

Immediately prior to our inspection we were informed of a serious incident at The Acres, where a person had left the home without staff support. The information CQC received about the incident indicated concerns about the management of the security of the building. This inspection examined those risks.

We have found evidence that the provider needs to make improvements. Please see the safe, caring and well led sections of this full report.

You can see what action we have asked the provider to take at the end of this full report.

We used all of this information to plan our inspection.

During the inspection

We spoke with one person who used the service about their experience of the care provided. We spoke with four members of staff including the nominated individual, registered manager, human resource manager and care workers. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included two people's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We spoke with two members of staff and one relative who regularly visited the service.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated inadequate. This meant people were not safe and were at risk of avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risk assessments were in place, with guidance for staff in how to manage these known risks.
- However, one person had left the home without the staff's knowledge just prior to our inspection. A decision had been made at a review meeting in November 2019 with the person's family and social worker that the front door of the house was to be kept unlocked so they could take positive risks. The service had not challenged the decision of the review meeting with the local authority social services or implemented other measures to reduce the risk of them leaving the home unsupported.
- For example, the front door had an alarm fitted but this was not loud enough to alert the members of staff in other parts of the house when the front door was opened. This meant the risk of the person leaving the house had not been adequately managed. Positive risk assessments to increase the person's independence in their local community had not been written.
- Staff had not followed the risk assessment and care plan to engage with and distract the person to reduce the risk of them wanting to leave the home on their own.
- Incidents were recorded and reviewed by the manager. However; one person had tried to leave the house on their own three weeks before our inspection. Staff saw them leave and supported them to return to The Acres. The person's father had complimented the staff on how they handled this situation and said that it would probably happen again. No further actions were implemented following this to prevent a re-occurrence or to ensure staff would be aware if they did leave the building.
- One person, who had since left the service, had complex challenging behaviours that had not been assessed prior to admission and the staff did not have the skills to meet their needs. This had put other people living at the service and staff at risk of harm.

The provider had not taken robust action to reduce the risks people may pose to themselves or others and staff had not followed the agreed risk assessment and care plan. This was a breach of Regulation 12 (Safe care and treatment) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- The manager had re-written some of the risk assessments to make them more robust. They had also written a positive behaviour support plan for one person, detailing the behaviours they may have and the potential triggers for these behaviours. Staff were able to describe how they would distract this person, but this was not clearly specified in the positive behaviour support plan. At a review meeting in November 2019 one person's family and social worker noted that there had been fewer incidents involving one person following these improvements.
- Equipment servicing was current and up to date.

Systems and processes to safeguard people from the risk of abuse

- We saw feedback from one person's family and social worker that the home had improved in supporting one person with managing their behaviour since the manager had introduced a positive behaviour support plan and the staff team were being more consistent in their approach.
- All staff completed safeguarding training and were able to explain how they would report any concerns they had to the manager.

Staffing and recruitment

- Staff were safely recruited, with all pre-employment checks being completed before a new member of staff started working at the service. The human resource manager oversaw the recruitment process for The Acres.
- The reasons for gaps in people's employment history were recorded. However, one member of staff had not provided a full employment history; although employment details from 2000 had been provided. The human resource manager said they would ensure a full employment history would be obtained for all applicants.
- The rota showed staffing was in place to meet people's identified needs.

Using medicines safely

- People received their medicines as prescribed.
- Medicines administration records (MARs) were fully completed. Guidelines were in place for medicines that were not routinely administered, for example pain relief, stating how the person would inform staff if they needed the medicine.
- Daily stock counts were completed, and the MARs were checked by the manager each month.

Preventing and controlling infection

- The home was visibly clean throughout. Cleaning schedules were used to ensure all areas were regularly cleaned.
- Personal protective equipment (PPE) was available for members of staff to use when required.

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.

This is the first inspection for this newly registered service. This key question has been rated requires improvement. This meant the effectiveness of people's care, treatment and support did not always achieve good outcomes or was inconsistent.

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

- A pre-admission assessment had been completed before people moved to The Acres. However, this contained only brief details about a person's needs and did not have any assessment about whether the new person was compatible and able to share a house with the other people already living there.
- We were aware that one person, who had since left the service, had some behaviour that challenged the service. The assessment had been completed by the nominated individual and human resources manager (who had experience of working in social care). They had moved in quickly as an emergency placement. There had not been sufficient planning to ensure the staff team had the training and support to meet this person's needs before they moved in.

The provider had not robustly assessed a person's needs, nor ensured the staff had the training and experience to meet their complex needs, before they moved to The Acres. This was a breach of Regulation 9 (Person-centred care) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- The new manager told us they had agreed with the nominated individual that they would complete all future pre-admission assessments and would consider compatibility issues as well as staff skills and experience to ensure they were able to meet people's identified needs. We will check this at our next inspection.

Staff support: induction, training, skills and experience

- Staff told us that they felt a lot more supported since the new manager was appointed. They had regular supervision and team meetings. They said they were able to contribute their ideas and discuss people's support, so all the staff were working in a consistent way. One member of staff said, "The team meetings are really positive; we discussed ways we could support people and so are more consistent."
- Staff had completed a range of on-line training courses.
- Face to face training had also been arranged for epilepsy awareness and managing challenging behaviour. However, these had not been arranged until October 2019 after the new manager had joined the service, meaning staff did not have the training to meet people's individual needs before this.

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

- People were supported to plan their meals. A diet plan had been agreed with one person and their family to support them to manage their weight.
- Information about people's modified diets was available to guide staff. Staff recorded when they added a

thickener to people's drinks to reduce the risk of choking.

- The amount of food and fluids people had was recorded when required.

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

- People were supported to maintain their health and had access to healthcare support as needed. Health action plans were used to ensure people's health needs were met.
- Appropriate referrals were made to external agencies, for example speech and language team (SALT), when required. A relative told us, "Staff support [name] to the dentist and GP. It's a lot of pressure off me."

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

- The Acres was decorated and maintained to a high standard.
- The downstairs bedrooms had accessible on-suite shower and toilet to meet people's mobility needs.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular 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 particular 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. 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.

- People's decision-making capacity was assessed. Where the service thought the person may lack the capacity to make decisions and was under constant supervision, applications had been made for a DoLS.

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.

This is the first inspection for this newly registered service. This key question has been rated requires improvement. This meant people did not always feel well-supported, cared for or treated with dignity and respect.

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

- We heard and saw positive interactions with people on the day of our inspection. One person told us, "The staff are all okay, they are good with me" and a relative said, "All of [name's] brothers are happy with his care and support and I'm well chuffed with it."
- Information about people's life, interests, dislikes and key relationships was recorded so members of staff were able to engage people in conversations about what they liked. Any cultural needs were also recorded.
- As stated in the background section, one person had left The Acres unsupported immediately prior to our inspection. Care plans provided information for staff in how to engage and distract this person and to support them to go out regularly. However, when they left the home the staff were not aware of this for a period of over two hours, meaning they were not following the written care plans to engage and distract the person.
- The staff we spoke with were able to describe how they would distract and support this person if they became anxious or were asking to go out.

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

- Care plans included information about people's communication needs. For example, one person needed time to process new information and respond so staff had to be patient to allow them the time to do this.
- Staff told us how they would involve people in making choices, for example, what they wanted to do that day or what they wanted to eat.

Respecting and promoting people's privacy, dignity and independence

- Staff explained how they maintained people's privacy and dignity whilst supporting them.
- People were prompted and encouraged to be involved in tasks and to complete things for themselves. For example, one person liked to help in the kitchen preparing their food.
- Staff were able to describe the things people could complete independently; however this was not clear from the care plans.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated requires improvement. This meant people's needs were not always met.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Care plans had been reviewed and updated by the manager, providing more detail and guidance about people's needs and how staff should support them to meet these identified needs.
- However, staff members had not followed the care plans or tried to engage with one person for over two hours when they had left the home on their own.
- The relative we spoke with said they had been involved in agreeing their relatives care and support plans. Regular review meetings were held to discuss and review people's support plans, involving people's family and local authority social worker.
- Daily records were written to document the support provided and what people had done during each shift.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People living at The Acres were able to communicate verbally. Guidance was provided on how staff should present information and choices to people, so they could be involved in their care as well as day to day decisions.
- For example, one person became tired in the afternoon so any information or questions should be discussed early in the day, so they were more able to participate in a meaningful way.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to take part in a range of activities, for example going to local museums and college. One relative said, "They (the staff) take him everywhere."
- One person liked horse racing and was supported to place a bet once or twice a week at their local bookies.

Improving care quality in response to complaints or concerns

- The Acres had a complaints policy. At the time of our inspection no formal complaints had been received. The manager said people and their families would speak directly with them or a member of staff if they had any concerns.

End of life care and support

- At the time of our inspection no one was receiving end of life support. Care plans noted any advanced wishes people may have for the support they wanted at the end of their life.

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.

This is the first inspection for this newly registered service. This key question has been rated requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The new manager was very experienced in social care and had been appointed in September 2019. The quality assurance manager would oversee the new manager.
- Staff meeting minutes recorded that the nominated individual and the quality assurance manager were now taking a 'back seat' with the new manager being responsible for managing the service. The nominated individual did not have the knowledge and experience in social care to critically review the service or be involved in day to day decisions or assessments of people's needs.
- Improvements had been made to the risk assessments and care plans, which had been re-written by the manager. However, known risks had not been robustly managed as identified in this report.
- The manager reviewed all incident reports and any actions taken to reduce the risk of a re-occurrence were recorded. However, additional measures to reduce the risk of one person leaving the house on their own had not been initiated after they had been seen trying to leave three weeks before our inspection.

The lack of robust risk management and review of incidents and the involvement of the nominated individual in care matters when they did not have the knowledge or experience was a breach of Regulation 17 (Good governance) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- The manager told us their role included completing all pre-admission assessments, ensuring the service could meet people's needs and the new person was able to share with the existing people living at The Acres. This change was seen as a positive development by one local authority social worker.
- The manager had introduced a more robust quality assurance system. Audits and reviews were carried out in a range of areas, including medicines, care plans, accidents and incidents and the environment.
- Staff members were positive about this change and felt well supported. Regular staff meetings and staff supervisions had been introduced.

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

- Notifications of serious events were made to the CQC when required.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The person and relative we spoke with were happy about the support they had at The Acres. The relative

told us, "The last two to three months [name's] settled and looks really well. He's chatty and interacts with the staff more now."

- Staff members said the manager was supportive and approachable. One said, "Things have definitely perked up since [manager] has come on board. You feel that you could ask her anything and she gives good support for the team."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Records showed people were involved in making choices about what they wanted to do each week.
- The manager had initiated surveys for the staff team, relatives and visiting professionals. The feedback from the staff team and relatives was positive. One relative commented, "It's clear there's been improvement in the service and the support being provided. It is fairly recent and has some way to go."
- The service worked with a range of medical and external professionals to meet people's needs.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	<p>Regulation 9 HSCA RA Regulations 2014 Person-centred care</p> <p>The provider had not robustly assessed a person's needs, nor ensured the staff had the training and experience to meet their complex needs, before they moved to The Acres.</p>
Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	<p>Regulation 12 HSCA RA Regulations 2014 Safe care and treatment</p> <p>The provider had not taken robust action to reduce the risks people may pose to themselves or others.</p> <p>Action had not been taken following one incident to reduce the risk of a re-occurrence.</p> <p>Staff had not followed the agreed risk assessments and care plans for one person who left the home unsupported.</p>

This section is primarily information for the provider

Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	<p>Regulation 17 HSCA RA Regulations 2014 Good governance</p> <p>There had been a lack of risk management for people leaving The Acres unsupported and the involvement of the nominated individual in care matters when they did not have the knowledge or experience.</p> <p>Following an incident steps had not been taken to reduce the risk of the same thing happening again.</p>

The enforcement action we took:

We served a warning notice against the provider.