

Parkcare Homes (No.2) Limited The Mews

Inspection report

97-99 Main Street
Bramley
Rotherham
South Yorkshire
S66 2SE

Date of inspection visit: 18 December 2023

Good

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Tel: 01709548218 Website: www.prioryadultcare.co.uk

Ratings

Overall rating for this service

Summary of findings

Overall summary

About the service

The Mews is a residential care home providing personal care to up to 8 people. The service provides support to people with a learning disability. At the time of our inspection there were 8 people using the service.

People's experience of the 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 assessment and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support

We found some minor concerns in relation to infection control; however, the provider took appropriate actions to ensure these concerns were rectified.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The service met the principles of the Mental Capacity Act and support was planned in people's best interests.

Risks associated with people's care and support were assessed, monitored and managed to ensure people were safe. People were supported by sufficient staff to meet their needs and ensure people's preferences were adhered to. Staff knew people well. People received their medicines as prescribed.

People's needs were assessed, and support was provided in line with what people wanted and needed. People received good outcomes and met their health, social and emotional needs.

Right Care

The management team and staff promoted person-centred care and ensured people's privacy, dignity and human rights were upheld. Staff respected people and offered choices and supported them in making decisions.

We found healthcare professionals had been referred to appropriately and staff ensured their support and advice was implemented.

Right culture

The ethos, values, attitudes and behaviours of leaders and care staff ensured people could lead confident, inclusive and empowered lives. Staff felt supported by the management team.

The overarching governance system included a series of audits which checked areas such as medication,

infection control and the environment. Any issues raised were addressed in a timely way.

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 27 October 2017).

Why we inspected

We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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

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 well-led?	Good •
Is the service well-led? The service was well-led.	Good •



The Mews

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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

The Mews 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. The Mews 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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection The inspection was unannounced.

What we did before the inspection We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with 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. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with 6 people who used the service and 4 relatives about their experience of the care provided. We spoke with 7 members of staff including the registered manager, and care workers.

We observed staff interacting with people. We reviewed a range of records. This included 3 people's care records and multiple medication records. We looked at 3 staff files in relation to recruitment. We reviewed a variety of records relating to the management of the service.

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. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- We carried out a tour of the home with the registered manager and found some areas in need of cleaning. The provider took swift action to address these concerns and evidenced the actions they had taken.

Visiting in Care Homes

• People were able to receive visitors without restrictions in line with best practice guidance.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- People we spoke with enjoyed living at the home and told us they felt safe. People looked relaxed and comfortable in the presence of staff.
- Relatives told us their family members were kept safe. One relative said, "[Relative] is very safe. Staff are brilliant."

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe.
- Staff knew people well and understood the risks associated with their care and support. Staff were knowledgeable about how to mitigate risks to keep people safe.
- The provider ensured the building and equipment were maintained, and regular

maintenance of the premises was carried out.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- During the day people were supported on a one to one basis, therefore there was enough
- staff to support people in line with their needs. At night a waking night staff team were available.
- The provider operated safe recruitment processes.

• Staff recruitment files contained appropriate documentation and evidence of per-employment checks such as Disclosure and Barring Service (DBS) checks. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People were supported to receive their medicines safely.
- Medicines were stored appropriately and medication administration records [MAR's] were in place to record medicines administered.
- Some people required medicines on an as and when required basis, often referred to as PRN medicines. PRN medicines were administered in line with people's individual needs.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- The provider had a system in place to ensure lessons were learnt from accidents and incidents. The registered manager used this system to identify trends and improve the service.

Is consent to care and treatment always sought in line with legislation 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 MCA 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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

•The provider was working in line with the Mental Capacity Act.

• Staff confirmed advocacy services were used and people were kept informed and involved in their support.

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 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.

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

- There was a positive and open culture at the service.
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- People were supported to live a life which considered their preferences and choices and was in line with their personal needs. One person said, "It's lovely living here, I have everything I need.
- Relatives we spoke with were complimentary about the service. One relative said, "Since [relative] has been at The Mews, they have come on leaps and bounds. I have got my [relative] back, [relative] is fantastic." Another relative said, "It's a brilliant home, absolutely amazing."

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

• The provider understood their responsibilities under the duty of candour.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Working in partnership with others

• The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.

• The provider worked in partnership with others to ensure people received appropriate support in line with their needs.

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

• People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.

- The provider and registered manager had systems in place to gain feedback from people, their relatives and other stakeholders. Feedback received was used to develop the service.
- People we spoke with found the registered manager approachable and staff felt supported by the management team. One relative said, "I know the staff really well and if there is a concern they contact me straight away."

Continuous learning and improving care

• The provider had created a learning culture at the service which improved the care people received.

• The provider had a system in place to audit the service and any issues identified were actioned in a timely way.