

# Parkcare Homes (No.2) Limited

# Alphonsus 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

### About the service

Alphonsus House is a residential care home providing personal care for up to 19 younger adults with learning disabilities or sensory impairments. The home accommodates 19 people in four separate properties; three houses and a bungalow. 19 people were living at the service at the time of the inspection.

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. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People told us they felt safe and our observations confirmed people were comfortable in the presence of staff. Staff knew how to identify and report concerns for people's safety. Risks were assessed and managed and staff followed guidance in behaviour support plans to ensure people were safely supported. People received their medicines as prescribed and staff had been safely recruited.

People, relatives and staff felt the service was well managed. Improvements had been made since the last inspection and learning took place from incidents and events. The registered manager and senior staff carried out regularly auditing to check the quality of people's care and took action where concerns were identified.

People and staff were given opportunities to share their views about the service and relatives felt the registered manager was approachable. The staff team worked in partnership with other professionals to ensure people's needs were met.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. 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](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 5 February 2019).

### Why we inspected

To assure ourselves the service was meeting people's needs, that staff had the necessary skills and experience and the management processes were effective we completed a focused inspection. We reviewed

the key questions of Safe and Well Led only.

We reviewed the information we held about the service. No areas of concern were identified in the other Key Questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those Key Questions were used in calculating the overall rating at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Alphonsus House on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will continue to monitor information we receive about the service until we 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?**

The service was safe.

Details are in our safe findings below.

**Good** ●

### **Is the service well-led?**

The service was well-led.

Details are in our well-Led findings below.

**Good** ●

# Alphonsus 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 (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 conducted by two inspectors.

#### Service and service type

Alphonsus House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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

This 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 commissioning teams. 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.

We used all of this information to plan our inspection.

#### During the inspection

We met and spoke with nine people who lived at the service. Due to their complex needs some people were not able to share their experiences with us in detail, so we observed how staff interacted with people. We also spoke with a visiting relative. We spoke with four staff members, the operations director and the registered manager. We looked at four people's care plans and records, medicines records, details of incidents, behavioural support plans and quality assurance records. We also looked at recruitment records for two staff members.

# 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 people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe receiving support from staff. One person said, "I am safe. If I want to go out the staff go with me." We observed interactions between people and staff and saw people looked comfortable in the presence of staff and we confident to approach them.
- Staff understood how to report any concerns of potential harm or abuse and received training in how to keep people safe. The registered manager was aware of their responsibilities in relation to safeguarding and had reported matters of concern to both the local authority and CQC as required.

Assessing risk, safety monitoring and management

- Risks were assessed and managed and staff followed guidance in people's care plans to ensure their safety. Where risks related to behaviours which resulted in harm to self or others these were linked to a detailed positive behaviour plan. The plan identified triggers, a detailed description of the distraction techniques to be used, diversion techniques and the use of 'as required' medicines.
- Staff understood how to manage risk. They were able to demonstrate a good understanding of distraction techniques used to support people's behaviours.

Staffing and recruitment

- People received support from staff according to their assessed need. Relatives we spoke with expressed positive views about staffing levels. We observed there were enough staff to meet people's care and support needs both within and away from their home.
- Staff confirmed people received support as required and they were able to respond to people's needs.
- Staff had been safely recruited. The provider had carried out checks to ensure they were safe to work with vulnerable people.

Using medicines safely

- People received their medicines as prescribed. Systems used for the receipt, administration and storage of medicines were safe.
- We noted that where medicine administration records had been handwritten, these had not always been signed by two members of staff. This may increase the risk of medicines errors. We also reviewed protocols for some 'as required' medicines and found some were lacking in detail about the circumstances in which they should be used. However, staff we spoke with were clear about when they should be used. We discussed this with the registered manager who told us this would be addressed without delay.

Preventing and controlling infection

- The home environments were clean and free from odour.
- Staff understood how to protect people from the risk of cross infection and could describe the processes in place to keep the home clean. Staff told us they had received training in infection control and were observed using gloves and aprons to reduce the risk of infection when supporting people.

#### Learning lessons when things go wrong

- Staff were aware of their responsibilities to report any accidents or incidents involving people who lived at the service.
- The registered manager reviewed all incident reports to ensure any learning was identified. Staff confirmed following incidents, changes were discussed and care plans updated to reduce the likelihood of reoccurrence.



# 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 requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- At the last inspection we found the nurse call system in people's bedrooms was not always within easy reach. At this inspection we found this issue had been resolved.
- The registered manager and senior staff regularly reviewed the quality of care people received. Audits were completed on care and medicine records and action taken where concerns were identified. Staff told us there were daily 'walkarounds' to check the quality of care and cleanliness of the environment.
- The registered manager was aware of their responsibilities as a registered person and had submitted notifications to CQC as required by law. The rating from the most recent inspection was displayed in an accessible area of the home so people could review it.

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

- People knew the registered manager by name and spoke positively about them. One person said, "[Registered manager] is great. Anything I want to do, anywhere I want to go, I just ask."
- Staff told us they felt the service was well managed. One staff member said, "The home is well run. You can go to the manager about anything, and there is support from seniors as well. The staff culture is positive, we all help each other."
- The registered manager was aware of their responsibilities under the Duty of Candour. The Duty of Candour is a regulation which all providers must adhere to. Under the Duty of Candour, providers must be open and transparent, and it sets out specific guidelines providers must follow if things go wrong with care and treatment. Where things had gone wrong the registered manager had been open and honest with people and relatives.

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

- People were involved in giving feedback about how life at Alphonsus House could be improved. We saw people had requested an improvement in the range of activities offered and people had been asked to suggest things they would enjoy.
- Relatives told us they were able to express their views and give feedback about their family member's experiences. People's diverse needs were considered and staff used a range of communication styles to capture people's voice and ensure their views were represented.

- Staff told us they were asked for their views during one to one meetings. One staff member said, "Ideas are listened to and things are implemented. In supervisions I am asked if I have any concerns."

#### Continuous learning and improving care

- The registered manager took learning from incidents or events and used this to improve the quality of people's care.
- The operations director told us there was learning shared following a recent incident with another of the provider's services. Learning points had been shared to improve quality across other services.
- Staff confirmed training was in place and told us they received regular updates to ensure their knowledge was current and in line with best practice.

#### Working in partnership with others

- The staff team worked in partnership with other professionals to meet people's needs. This included healthcare professionals and specialist learning disability community teams.
- Staff also worked with people's relatives to understand people's life histories and personal experiences. This helped them to improve communication with people and better understand people's behaviours.