

Mr. Gordon Phillips

Shepherds Corner

Inspection report

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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

Shepherds Corner is a residential care home which specialises in supporting people with learning disabilities and/or autism. 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.

Shepherds Corner is a large home, bigger than most domestic style properties. It was registered for the support of up to 13 people. Ten people were using the service. This is larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the building design fitting in with the residential area and other domestic homes of a similar size. There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home.

People's experience of using this service

People were safe at the service. Staff were trained to safeguard people from abuse and knew how to minimise identified risks to people's safety. Health and safety checks were carried out of the premises and equipment to make sure they were safe. The premises was clean and tidy and provided a range of comfortable spaces for people to spend time in. Staff followed good practice when providing personal care and when preparing and handling food which reduced hygiene risks.

There were enough staff to support people. The provider made sure staff were suitable and fit to support people and given training to help them meet people's needs. Staff were motivated to provide high quality care and support. They were supported by the provider to review and continuously improve their working practices.

People's needs were met by staff. People were involved by staff in planning and making decisions about their support. Staff used people's preferred method of communication to make sure they could have a say. Staff knew people well and respected people's choices for how they wanted their care to be provided. Staff were kind, caring and supported people in a dignified way which maintained their privacy and independence. 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.

Staff helped people stay healthy and well. They supported people to eat and drink enough to meet their needs and to take their prescribed medicines. Extra help was sought for people if they needed this, for example when they became unwell. Staff worked well with other healthcare professionals to ensure a

joined-up approach to the care people received.

People and their representatives were satisfied with the care and support provided by staff. They knew how to make a complaint if needed. The registered manager investigated accidents, incidents and complaints and kept people involved and informed of the outcome. Improvements were made when needed and learning from investigations was shared with staff to help them improve the quality and safety of the support they provided.

The registered manager encouraged people, their representatives and staff to have their say about how the service could improve. They used this feedback along with other checks, to monitor, review and improve the quality and safety of the support provided. The provider worked proactively with other agencies and acted on recommendations to improve the quality and safety of the service for people.

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.

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.

The Secretary of State has asked the Care Quality Commission (CQC) to conduct a thematic review and to make recommendations about the use of restrictive interventions in settings that provide care for people with or who might have mental health problems, learning disabilities and/or autism. Thematic reviews look in-depth at specific issues concerning quality of care across the health and social care sectors. They expand our understanding of both good and poor practice and of the potential drivers of improvement.

As part of thematic review, we carried out a survey with the registered manager at this inspection. This considered whether the service used any restrictive intervention practices (restraint, seclusion and segregation) when supporting people.

The service used some restrictive intervention practices as a last resort, in a person-centred way, in line with positive behaviour support principles.

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 7 April 2017).

Why we inspected

This inspection was planned based on the previous rating of 'Good'.

Follow up

We will continue to monitor the service to ensure that people receive safe, compassionate, high quality care. Further inspections will be planned in line with our inspection schedule or in response to concerns.

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 effective?

The service was effective.
Details are in our Effective findings below.

Good ●

Is the service caring?

The service was caring.
Details are in our Caring findings below.

Good ●

Is the service responsive?

The service was responsive.
Details are in our Responsive findings below.

Good ●

Is the service well-led?

The service was well-led.
Details are in our Well-Led findings below.

Good ●

Shepherds Corner

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

One inspector carried out this inspection.

Service and service type

Shepherds Corner 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

Before the inspection we reviewed the information we held about this service including notifications the provider is required by law to send us about events and incidents involving people. 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

As people using the service were unable to speak with us due to their communication needs, we observed

interactions between people and staff. We looked at three people's care records and three staff records. We reviewed medicines management arrangements and other records relating to the management of the service, including policies and procedures. We also spoke to the registered manager, one senior care support worker and one care support worker.

After the inspection

We spoke to three people's relatives about their experiences of the care and support provided to their family 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 remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Relatives said people were safe at the service. One relative told us, "I feel [family member] is safe there. They are conscious about [family member's] safety. I've never gone there and felt they weren't keeping things safe for [family member]." Another relative said, "I think it's a safe place and a good home for my [family member]."
- Staff were trained to safeguard people from abuse. They knew how to recognise signs that a person may be at risk. They were supported by a 'safeguarding champion', a senior member of the staff team, who provided guidance and advice to staff if they were unsure what to do about a concern they had about a person.
- Information was clearly displayed for people, visitors and staff about how to report safeguarding concerns to the appropriate person or agency to investigate.
- When a concern was raised, the provider helped the local authority with their enquiries and investigations. They acted on any recommendations made about how to improve working practices to keep people safe.

Assessing risk, safety monitoring and management

- Risks to people had been assessed and information was provided to staff about how to manage these to keep people safe from injury or harm. For people whose behaviour might challenge them and/or others, there was guidance for staff about how to reduce the risk of this behaviour presenting or causing harm to the person or others.
- Staff understood risks posed to people and how they could help people to stay safe. A relative told us, "Staff take [family member] for walks. They have to be careful because [family member] could get away. But they make sure there are enough of them [staff] so that [family member] can go out every day."
- Senior staff undertook regular health and safety checks of the premises. Issues found through these checks were dealt with promptly. The provider had arrangements in place for the premises and equipment to be maintained and serviced to make sure they remained in good order and safe for use.

Staffing and recruitment

- There were enough staff to meet people's needs. Staff on each shift were trained to deal with emergency situations and events if these should arise.
- During the inspection, staff were present and accessible to people.
- The provider carried out pre-employment checks on staff that applied to work at the service. These checks helped the provider make sure staff were suitable and fit to support people.

Using medicines safely

- People were supported to take their prescribed medicines. People's medicines records contained important information about them such as allergies and guidance for when to administer 'as required' medicines. Our checks of stocks and balances of medicines and records showed people consistently received the medicines prescribed to them.
- Staff had been trained to manage and administer medicines and made sure these were secure and stored safely.
- The provider regularly checked staff's working practice in relation to medicines. This helped the provider make sure staff were working in a consistently safe way.

Preventing and controlling infection

- People's bedrooms and communal areas were clean, tidy and free from odours.
- Staff followed current guidance to reduce infection risks associated with poor cleanliness and hygiene and when preparing, serving and storing food. They had access to cleaning supplies, materials and equipment to help them do this.
- Hand sanitisers, soap and drying facilities were available around the premises for people, visitors and staff to use. This helped to reduce the risk of the spread of infection.

Learning lessons when things go wrong

- The registered manager investigated all accidents and incidents involving people and took appropriate action when this was needed. For example, following an accident at the premises involving a person using the service, the registered manager had additional safety systems added to reduce the risk of this reoccurring.
- Learning from investigations was shared with staff to help them improve the quality and safety of the support provided.
- The registered manager analysed accidents and incidents to check for any trends or themes to help them reduce the risk of these happening again.

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 remained the same. This meant 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's care and support needs had been appropriately assessed by the provider. Assessments took account of information provided by people, their representatives and others involved in their care about their health conditions, the care they required, and the outcomes people wished to achieve from the support provided.
- As part of these assessments the provider referred to current guidance in relation to positive behaviour support principles to assess how people should be supported in the least restrictive way as possible.
- Information from these assessments had been used to develop individualised care plans for people which set out their choices for how, when and from whom they received their support. This helped to make sure staff provided support in line with people's wishes.

Staff support: induction, training, skills and experience

- Staff received relevant training to help them meet the range of people's needs. This included refresher training to help staff keep up to date with current practice. Staff also undertook specialist training to support people with their healthcare conditions such as epilepsy and diabetes.
- New staff had to complete induction training before they could work with people unsupervised.
- Staff had regular supervision (one to one) meetings with their line manager to discuss their working practices, any concerns they had about their role and any further training or learning they needed to help them provide effective support to people.

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

- People had a say in planning meals. Staff used their feedback to prepare meals that people liked which encouraged them to eat well. Menus were clearly displayed so people knew what they would be eating each day.
- Staff understood people's dietary needs including any specialist needs they had due to their healthcare conditions. They took this into account when planning and preparing meals.
- Staff supported people to make healthy food and drink choices and to eat nutritious and well balanced meals. They monitored people were eating and drinking enough. If they had concerns about this, they asked for support from the relevant healthcare professionals and acted on their recommendations and guidance.

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

- People's records set out how staff should support them to manage their health and medical conditions

and access the services they needed such as the GP, dentist or other healthcare specialists involved in their care and treatment.

- People were supported to attend their healthcare and medical appointments. Staff followed recommendations made by healthcare professionals to help the person achieve effective outcomes in relation to their health and wellbeing.
- Staff shared information with each other about people at shift handovers. This helped keep all staff informed about any specific concerns about a person and their health and wellbeing and how these were being managed.
- The provider used a 'telemedicine' service, a video based system which staff used to contact medical professionals such as GP's and nurses if they had a health related concern they wished to discuss about a person. The registered manager told us this system had reduced the need for people to make unnecessary trips to the GP or hospital and helped to alleviate stress and anxiety that these visits could sometimes cause people.
- When people did need to go to hospital, information was sent with them about their current health, existing medical conditions and their medicines. This helped to inform ambulance and hospital staff about the person and their needs when they had to make decisions about the person's treatment.

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

- The premises offered people a range of spaces to spend time in. In addition to their own room, people had use of two communal lounges, a dining room, a sensory room and the garden.
- Communal areas were decorated with artwork created by people using the service. Pictures of people undertaking a range of activities were also on display to help create a comforting and familiar environment for people.
- People's bedrooms had been decorated and furnished to their choice and reflected their hobbies and interests.

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 and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Assessments were undertaken of people's capacity to make and consent to decisions about specific aspects of their care and support.
- There were processes in place where if people lacked capacity to make specific decisions the provider would involve people's representatives and healthcare professionals to ensure decisions would be made in people's best interests.
- Applications made to deprive people of their liberty had been properly made and authorised by the appropriate body. The provider was complying with the conditions applied to the DoLS authorisations. Authorisations were regularly reviewed to check that they were still appropriate.

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 remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- Relatives told us people were treated well by staff. One relative said, "The staff are wonderful. They are very good and will let me know how [family member] has been. They are friendly and they genuinely care for my [family member]. It's a good place for them to be." Another relative told us, "I think the staff are so considerate...they are genuine and caring about everybody that lives there. Whenever I go there, staff are always interacting with everyone. No one gets left out. There's a lovely family atmosphere at the home." Another relative said, "[Staff member] is exceptional and she really truly goes above and beyond for [family member] and genuinely cares for them."
- We observed people were relaxed and comfortable with staff. Staff were warm and friendly in conversations and talked to people about things that were of interest or important to them. Staff gave people time to make choices about what they wanted to do.
- When assessing people's needs the provider took account of their specific wishes in relation to how their social, cultural and spiritual needs should be met. These were recorded in people's care plans so that staff had access to information about how people should be supported with these.
- Staff received equality and diversity training as part of their role. This helped staff understand what discriminatory behaviours and practices might look like to help them make sure people were always treated fairly.

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

- There was detailed information for staff about how people wished to communicate and express themselves. This helped staff understand how to support people to have a say about what they wanted in terms of their care and support.
- We observed staff used people's preferred communication methods when interacting with them. A relative said, "They understand [family member] so well and make sure they make themselves understood to [family member] so that they can understand them."
- People were continuously involved in making decisions about their care and support. Each person had a designated 'key worker' who was responsible for ensuring their care and support needs were met. People met with their keyworker every month to identify any further support people might need or want.

Respecting and promoting people's privacy, dignity and independence

- Staff were kind and respectful when talking to people. They asked people for their permission before providing any support. When providing support staff made sure people were not rushed so that they could do things at their own pace.

- When people wished to have privacy and spend time alone in their rooms, staff respected this. The sensory room provided additional space at the service where people could spend time away from others. The sensory room was furnished with items for people to use to help them unwind and relax in peace.
- People were supported to be as independent as they could be. Staff encouraged people to get washed and dressed each day, clean and tidy their room, do their laundry, their personal shopping and plan and prepare their meals and drinks. Staff only took over when people could not manage or complete tasks safely.
- People's records were stored securely so that information about them was kept private and confidential.

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 remained the same. This meant people's needs were met through good organisation and delivery.

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

- People's records contained detailed information about them, their life history, their likes and dislikes, hobbies and interests, their preferred routines and their preferences and choices for how care and support should be provided. This helped to ensure people received personalised care and support from staff that was responsive to their needs.
- Staff understood people's care and support needs and how these should be met. We saw staff were able to anticipate what people wanted and supported people to do tasks and activities in the way people preferred.
- Senior staff reviewed the care and support provided to people every month to check this was continuing to meet their needs. Staff were promptly informed of any changes to the support people needed to help them support people appropriately.

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's communication needs had been identified, recorded and highlighted so that staff had access to relevant information about how they should be supported with these.
- A range of information had been adapted to meet people's needs. For example, information about how to make a complaint or raise a safeguarding concern was available in easy to read pictorial formats to make this easier for people to understand.

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 activities and pursue interests that were important to them. A relative told us, "I think they try and keep [family member] occupied and do the things [family member] wants to do. [Family member] loves to go trampolining and they take [family member]. They take [family member] on holidays and [family member] loves it."
- Each person had a timetable of activities that reflected their specific choices and preferences for how they wished to spend their time every day. This ranged from taking part in group based activities such as arts and crafts sessions and outings in the community, to one to one activities such as going shopping or for lunch or undertaking physical activities such as cycling with staff's support.
- People were encouraged to maintain relationships with the people that mattered to them. Relatives told

us they were able to visit at any time and were always welcomed by staff. Some people went to visit with relatives and staff made sure appropriate support was in place for people to do this.

- Staff had developed good relationships with relatives and kept them regularly informed of their family member's health and wellbeing. A relative told us, "[Family member's] keyworker keeps me up to date about [family member] and what activities [family member's] done. They give me plenty of notice about [family member's] appointments because I go along to all of these."

Improving care quality in response to complaints or concerns

- Relatives were satisfied with the care and support provided to their family members. One relative said, "I am genuinely happy with their care." Another relative told us, "I think [family member] has a good quality of life there. I don't have any major concerns."
- Relatives told us they would be comfortable raising a concern or complaint if they needed to. One relative said, "I speak with the manager regularly and I feel able to speak freely and frankly with her."
- There were arrangements in place to deal with people's concerns and complaints. One complaint had been received by the service since our last inspection which the registered manager had investigated and provided appropriate feedback to the person making the complaint.

End of life care and support

- As part of the assessment of people's needs, people and their representatives were able to state their wishes for the support they wanted to receive at the end of their life. This was documented in their records. This helped to ensure staff would know what to do to make sure people's wishes and choices were respected at the appropriate time.
- At the time of this inspection, none of the people using the service were receiving end of life care and support. The provider had established relationships with the relevant healthcare professionals that would need to be involved should this need be required.

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 remained the same. 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

- The provider had clear expectations about the quality of care and support people should receive from the service. Staff were encouraged and supported to review their working practice through supervision and team meetings to make sure this was helping people achieve positive outcomes in relation to their care and support needs.
- Incentives were provided to staff to deliver high quality care and support. Since our last inspection the registered manager had introduced a recognition scheme to reward staff that demonstrated excellence at work.
- Staff understood how to provide people with personalised care and support tailored to their needs. A staff member told us, "I know people well. I really enjoy my job. ...we are taught to be people focused, communicate with people and promote their independence."

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

- There was a clear and well defined management and staffing structure at the service. The registered manager held regular team meetings with all staff to make sure they understood their role and responsibilities to the people they cared for.
- The registered manager understood their responsibility for meeting regulatory requirements. They notified us promptly of events or incidents involving people. This helped us to check that the provider took appropriate action to ensure people's safety and welfare in these instances.
- The registered manager investigated all accidents and incidents that happened and made sure people and their representatives were kept involved and informed of the outcome.
- The rating awarded from the last CQC inspection was displayed at the service. This was important as it helped inform people and others about the quality and safety of the service.

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

- People, their representatives and staff were provided regular opportunities to have their say about the service and how it could improve. Staff sought people's views through keyworker meetings and reviews of their care and support needs. Staff used people's preferred method of communication to gain their views so that people would not be excluded from having a say in how the service could improve.

- People's representatives and others, such as healthcare professionals, were asked for their views through yearly surveys. Responses from the most recent survey indicated representatives and professionals had no concerns about the care and support provided to people.
- Staff's views about the service were sought through surveys, supervision and team meetings. The provider was taking action on areas that staff wanted to see improve in terms of their role, including offering more opportunities to learn and develop in their roles.

Continuous learning and improving care

- The provider monitored and assessed the safety and quality of the service. Staff undertook regular checks of key aspects of the service. Where issues were found through these checks these were addressed promptly and improvements were made.

Working in partnership with others

- Good relationships had been developed with a range of healthcare professionals involved in people's care. Staff made sure recommendations and advice from healthcare professionals was used to design the care and support provided to people. This helped to ensure that care and support was up to date with current practice in relation to people's specific needs.