

# Strode Park Foundation For People With Disabilities

## ComCare

### Inspection report

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Date of inspection visit:  
31 January 2023  
02 February 2023  
03 February 2023

Date of publication:  
27 February 2023

### 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

ComCare provides a support service for people living with a range of disabilities in various supported living houses. The office is based in the grounds of Strobe Park Foundation for People with Disabilities. At time of the inspection ComCare were supporting 12 people however not all people received support with personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. There were 9 people being supported with personal care during this inspection.

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

We were told staffing had been a particular concern for the management team when they started working at the service in November 2022. They had identified inconsistencies in the teams and that there was not always enough staff to meet people's needs. The manager described the previous culture amongst staff as poor. Improvements had been made at this inspection with people and their relatives telling us staff teams and support provided was improved and, "The manager is trying to get the right people. The right temperament and things are settling down. It is improving and staff are motivating people rather than just looking after them."

Recruitment files had not been robustly audited, and we identified shortfalls in pre employment checks being completed before staff were working alone. Correct mitigation was in place, such as risk assessments but these checks were not followed up until inspection. All checks were completed before the end of our inspection.

Management of the service had gone through a recent change. The manager recently joined and told us they were "starting from scratch." We were told they had apologised to people and their relatives when things had not gone well and had developed new audits and checks to drive improvement going forward.

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 assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it. We considered this guidance as there were people using the service who have a learning disability and or who are autistic. The service was meeting the principles of Right Support, Right Care, Right Culture on this inspection.

### Right Support:

People told us staff were polite, kind and respectful when supporting them with their personal care. Staff supported people to play an active role in maintaining their own health and wellbeing. Staff listened and amended peoples care as their needs changed. People were supported by staff to pursue their interests. A relative told us their family member went swimming, at least, "Once a fortnight and has lunch afterwards."

They even went to Winter Wonderland in Hyde Park, London." 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.

#### Right Care:

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to their individual needs. Staff showed kindness, compassion and support to people. One person told us the staff, "Understand me and help me get a shower." They also told us staff supported them with changing their bed, making food and supporting them when they were frustrated. We saw people telling staff, "I love you," and they were affectionate towards them holding their hands or hugging them. Relatives told us "(Staff member) is great I cannot rate them highly enough" and, "This is the place (person) has always chosen and feels the safest. ...(person) is extremely happy where they live."

#### Right Culture:

People led inclusive lives because of the ethos, values, attitudes and behaviours of the management and staff. A relative told us, "Staff treat (person) as an individual, a buddy, they get the measure of him." People were encouraged and supported to establish and maintain relationships with one another as well as with family and friends. We observed staff preparing a valentine calendar with one person, to assist them to count down the days till the event and observed staff supporting people with video calls with their family. Relatives told us the, "Staff are always helpful." People told us they were excited about going home to their family and staff had supported them to prepare for their individual needs. Staff knew and understood people well and were responsive, supporting their aspirations to live a quality life of their choosing. Relatives told us how staff had worked with their family member to organise a disco for their birthday including preparing all the invitations. They described the staff as "extremely caring and thoughtful." They had made their relative "A cake, the most beautiful cake."

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 13 March 2019).

#### Why we inspected

This inspection was prompted by a review of the information we held about this service.

#### 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.

<p><b>Is the service safe?</b></p> <p>The service was not always safe.</p> <p>Details are in our well-led findings below</p>	<p><b>Good</b> ●</p>
<p><b>Is the service well-led?</b></p> <p>The service was not always well-led.</p> <p>Details are in our well-led findings below</p>	<p><b>Good</b> ●</p>

# ComCare

## 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

This inspection was carried out by 2 inspectors.

#### Service and service type

This service provides care and support to people living in 8 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

#### 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 not a registered manager in post. A new manager had been in post for 3 months and had applied to register. We are currently assessing this application.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well

and improvements they plan to make. We sought feedback from professionals from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

#### During the inspection

We spoke with 6 people who used the service and 6 relatives about their experience of the care provided. We spoke with 7 members of staff including the manager, deputy manager, director of care and support workers. We reviewed a range of records. This included 4 people's care records and medication records. We reviewed 4 staff files in relation to recruitment practice. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# 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 had remained the same. This meant people were safe and protected from avoidable harm.

### Staffing and recruitment

- There were appropriate numbers of staff to meet people's needs. However, the manager was open to inspectors that previous to the inspection, numbers of staff had not always been enough to meet the needs of people using the service. However, Improvements had been made to the numbers of staff employed since the new manager had joined.
- People and relatives reported to inspectors, staffing levels had improved and there was more consistency since January 2023 which supported what we found during this inspection.
- Staff had appropriate right to work checks completed when they applied to work at the service. All records we reviewed of staff had Disclosure and Barring Service checks which provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

### Systems and processes to safeguard people from the risk of abuse

- People were kept safe by staff who were able to recognise and report abuse. Safeguarding training had been delivered and staff we spoke with demonstrated they knew how to apply this.
- People and those who matter to them had safeguarding information in a form they could use, and they knew how and when to raise a safeguarding concern. People told us they were confident raising concerns with the team leaders and managers. One Person told us, "(staff) listen and answer you." People told us they felt safe.
- Alerts of concerns raised to the local authority safeguarding teams were detailed and investigated appropriately.

### Assessing risk, safety monitoring and management

- Risks to people were appropriately assessed and managed. Risk assessments were detailed, and person centred. There were detailed histories of people, their specific support needs and any potential risks. This helped staff take actions to mitigate the risk of occurrence.
- Where people needed support to manage their emotions there were detailed positive behaviour support plans in place. These provided staff with the information they needed to keep people safe. For example, there was information on what could cause a person to become upset and what actions staff were to take before and after an incident had occurred.
- People's care plans reflected their individual needs. We observed staff following risk assessments such as when people needed two staff members to transfer and we observed people responded positively towards them.

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 when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.
- Each person's care and support plan included ways to avoid or minimise the need for restricting their freedom. People had their mental capacity needs assessed and were supported to make choices. Where appropriate, court of protection orders had been applied for in order to ensure their safety.
- Due to developments in relationships between people living at the service, the provider had been working with specialist learning disability service training provision on understanding sexuality and the importance of consent in sexual relationships which enabled people to safely understand their relationships.

#### Using medicines safely

- People were supported to receive their medicines in a safe way.
- People who required medicines 'as and when' such as for pain relief or emergency medicine to manage seizures, had clear protocols and instructions on how staff were to administer these and when.
- Medicines were ordered, stored and disposed of safely.
- An electronic medicine administration record was used and checked daily by care staff and then reviewed by office staff to ensure that any errors were identified and resolved.
- In the event of an error being made when administering people's medicines there was a clear procedure in place to ensure there were no adverse effects on people as a result.

#### Preventing and controlling infection

- People living in the service were supported by staff to complete regular cleaning of their home.
- Risk of infection was minimised by control measures such as support from regular staff, wearing correct personal protective equipment and testing for Covid-19 when required.

#### Learning lessons when things go wrong

- When things went wrong, staff apologised and gave people honest information and suitable support.
- A relative told us about an incident which had happened before our inspection, but was assured by the actions taken and that the manager was, "getting things sorted, apologised and told them they would make sure things would not happen again."
- People received safe care as staff learned from safety alerts and incidents. The provider has been working with local authority safeguarding lead and staff were debriefed following incidents. Staff told us they identified learning and escalated these for discussion with the management team to drive improvements.



# 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 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.

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

- Managers and staff were clear about their roles and what they wished to achieve to improve quality of the support provided. The manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs/ oversight of the services they managed.
- The management team acknowledged improvements were required within the service and told us, they were "starting from scratch" reviewing practice, policies and procedures. Relatives told us, "I think the manager is doing well and trying to get the service to what they want the service to be."
- It is a requirement of CQC registration for services to have a registered manager in post. There was a manager who was registered with CQC, but they were no longer in post. A new manager started following the inspection who is currently in the process of applying to the CQC.
- Governance processes were mostly effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support. However, we identified there were improvements needed to identify where previous employment checks had not been completed. For example, where references had not been returned in a timely manner prior to initiating independent working for staff. During inspection references were obtained for staff where needed.

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

- There was a positive culture centred around people within the service. The manager was open with us during inspection and told us there had been a negative culture within the service, but this had been identified and actions were being taken to address this. Actions had not been fully implemented however the manager reported there was a noticeable change already.
- The manager demonstrated a clear understanding and knowledge of people using the service and what their care needs were and what their support package consisted of.
- We observed positive interactions between people and the staff who supported them. Staff told us there had been a positive change in the culture since the new manager started and they felt happy and listened to.

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 duty of candour. The service had apologised to people, and those important to them, when things had gone wrong. Relatives told us, "Staff always let us

know if there is an accident." We were told the manager had apologised where issues in the past had not been addressed appropriately.

- Staff were actively encouraged to report concerns, accidents and incidents and be honest with what had gone wrong.
- Providers are required to notify the Care Quality Commission (CQC) about events and incidents such as abuse, serious injuries, deprivation of liberty safeguard authorisation and deaths. The manager was aware of their responsibilities and had notified CQC about all important events that had occurred. The manager had met all of the providers regulatory requirements.

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

- The management team worked with staff to improve the organisational culture. Staff had contributed towards the organisation values and behaviour statement. They had ensured staff had refreshed their training and revised and strengthened their induction programme. They spoke with staff in one to ones and shared weekly emails on actions plans to improve the service and progress against them.
- The manager sought feedback from people and those important to them and used the feedback to develop the service. Relatives told us, "Staff weren't talking to one another and you just kept getting passed on. It is getting better since the new manager took over, it's positive and staff are on board."
- The manager had introduced various pathways to communicate the changes being implemented to people, their relatives and to staff. This ranged from meetings, emails and newsletters. This helped to keep everyone up to date the changes being made within the service and raise suggestions if appropriate.

Continuous learning and improving care; Working in partnership with others

- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible. Relatives told us, "Staff are doing the best they can now. The manager and management team definitely want to know what's going on, keep in touch, so we all know what's happening, Staff are at the end of the phone, or they will call me back. There has been a 100% improvement."
- The service worked well in partnership with other health and social care organisations, which helped to give people using the service a voice and improve their wellbeing. People had access to their social worker, speech and language therapists and physiotherapy. Professionals worked with them regularly and trained staff to complement interventions such as supporting people to exercise.