

# Freedom Care Limited

## 362 Park Road

### 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

362 Park Road is a residential care home. This service supports people with learning disabilities and/or autism; The service is registered to care for one person; there was one person 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 the person who used 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. The person using the service received planned and co-ordinated person-centred support that is appropriate and inclusive for them.

There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home. Staff were also discouraged from wearing anything that suggested they were care staff when coming and going with the person.

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

The person and their relative were happy with the support they received and felt safe living at the service. Staff knew what to do to keep the person safe and were confident any concerns would be taken seriously. Risks to the person's well-being and safety were assessed, recorded and kept up to date. Staff supported the person to manage these risks effectively. The person received support to take their medicines safely.

Staff had the skills and knowledge they needed to meet the person's needs. They received regular support, guidance and supervision to enable them to provide effective care and support. Staff supported the person to maintain their health and well-being and access the healthcare they needed. The person was 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 person was supported by staff who knew them well, respected their individuality and diversity, and treated them with respect.

The person was supported to develop care plans that were specific to them. These plans were regularly reviewed to keep them up to date. The person was supported to maintain relationships with people who were important to them, pursue hobbies and interests and be a part of their local community.

The registered manager provided clear and consistent leadership and support for staff to be able to do their job effectively. The provider's quality assurance processes were effective in driving improvements to the service.

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 28 April 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

#### 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 remained safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service remained effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service remained caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service remained responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service remained well-led.

Details are in our well-led findings below.

Good ●

# 362 Park Road

## 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 team consisted of one inspector.

#### Service and service type

362 Park Road 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

We gave the service 24 hours' notice of the inspection. This was because the service is small and the person using the service and staff are often out; we wanted to be sure they would be around to speak with us.

#### 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. 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

We spoke with the person using the service, one relative, the registered manager, deputy manager and a

support worker. We reviewed one care plan and medicines records. We reviewed two staff recruitment files and information relating to the induction, training and supervision of staff. We saw records of internal and external safety checks of the premises. We looked at audits to monitor and improve the service and the processes and other records relating to the day to day management of the service, including policies and procedures.

# 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

- The person felt safe using the service. They told us, "I feel safe here, it's alright. I can talk to staff and [registered manager]."
- The provider had effective safeguarding systems in place. The registered manager understood their responsibilities about keeping the person safe, protecting them from potential discrimination and reporting concerns to other agencies.
- Staff had completed training in safeguarding and knew what to do to make sure the person was protected from avoidable harm or abuse.

Assessing risk, safety monitoring and management

- Risk assessments were in place to support the person to be as independent as possible, in and away from the service.
- Risk assessments were regularly reviewed and captured the person's wishes and needs.
- Positive behaviour support plans and guidance was in place to ensure the person was supported in line with best practice.
- Maintenance records showed checks were carried on installations, equipment and the premises. An evacuation plan was in place to support the person and staff in the event of an emergency.

Staffing and recruitment

- The person told us there were always enough staff around to help them. Staff and records confirmed the person was supported by a small team of staff who they knew well.
- Effective recruitment procedures ensured the person was supported by staff with the appropriate experience and character. This included completing Disclosure and Barring Service (DBS) checks. A DBS check allows employers to check whether the applicant has any convictions or whether they have been barred from working in care and support services.

Using medicines safely

- Medicines were stored, administered and managed safely and as prescribed.
- The person's capacity to administer their own medicine had been assessed and outcomes recorded in their medicine care plan. This detailed the support they needed and their abilities.
- The person's medicines were reviewed regularly which helped to make sure they were not taking unnecessary medicines. Protocols were in place to ensure the person was safe in the event they declined their medicines.
- Staff had completed training and competency assessments were carried out to check staff were following

the correct procedures.

#### Preventing and controlling infection

- Staff were trained in infection control and demonstrated a good understanding of the systems in place.
- Staff involved in the person in keeping their home clean and to observe good hygiene practice, such as washing hands.

#### Learning lessons when things go wrong

- Lessons were learned when things went wrong.
- Accidents and incidents were reviewed to look for themes or patterns. This information was used to make changes to reduce the risk of recurrence.
- Debriefing meetings took place after incidents which provided an opportunity for reflection and learning.



# 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 has 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

- The person's needs had been assessed before they moved into the service to ensure they could be met. Assessments were completed with input from relevant specialists, including the community mental health team.
- The person was supported to set goals to help them develop their skills and become more independent.
- The person confirmed staff understood their needs and provided the support they required.

Staff support: induction, training, skills and experience

- Staff said they received good training, including training specific to the person's needs, which gave them the skills they needed to do their job. The registered manager had a record of all training staff had completed and when refresher courses were due.
- Staff were supported to complete development training and national qualifications in social care.
- Staff had regular meetings with their line manager to receive support and guidance about their work and to discuss training and development needs. Staff told us they received good support.

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

- The person was encouraged to shop for food and prepare their own meals, to maximise their independence. Staff supported them to plan meals that provided a balanced diet.
- Staff supported the person to understand healthy eating, whilst also respecting the person's right to make their own choices and decisions.

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

- The service had systems in place to plan referrals to external services and to maintain care and support. Staff worked with local health services to ensure the person received the support they needed. Examples included their GP, psychiatrist and mental health nurses.
- Care records showed staff had responded to any concerns or changes about the person's health or well-being in a timely manner, and respected the person's right to refuse care or treatment on occasions.
- Staff had recorded the outcome of appointments, including any advice or guidance.

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.

- Staff understood the importance of supporting the person to make decisions about their day to day lives. We observed a staff member consulting with the person and respecting their choices throughout the inspection visit.
- The provider promoted a culture of reducing restrictions. Physical interventions were used as a last resort when other strategies had been tried and failed. The person had not been subject to any restrictions on their freedom.
- Further development of care records was required in order to reflect potential fluctuations in the person's mental capacity. The registered manager told us they would action this following our inspection.

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

- The service was furnished and decorated to suit the person's individual tastes. They told us, "I like to display my models and things I have made. I choose my furniture."
- The premises was maintained to a good standard and in good decor throughout. Repairs were attended to in a timely way.

# 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 has 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; respecting equality and diversity

- The person told us they liked the staff that supported them. They spoke about positive relationships with staff who had supported them for sometime but also enjoyed meeting new staff. New staff were introduced to the person before they started to support them.
- We observed positive interactions, the person spoke openly with staff about what they wanted to do and about things that were worrying them.
- Staff knew the person well, they were able to tell us about their needs and diversity, their preferred routines and the things that were important to them

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- The person was supported to express their views and make decisions about their care and treatment. Their relative told us, "Staff communicate with [Name] and myself really well. I am very involved in [Name] care, staff feedback to me."
- The person was comfortable approaching staff and starting conversations or informing staff about their wishes or choices.
- There were regular meetings with staff, where the person expressed their views and set out what they wanted to happen. This helped the person to set goals they wished to achieve to become more independent.
- We observed the person was very involved in cleaning and maintaining their home on a day to day basis, working alongside staff or undertaking tasks independently.

# 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 has 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

- Staff knew the person's likes, dislikes and preferences. They used this information to provide support in the way the person wanted, and respond to fluctuations in their moods and well-being in a timely manner.
- The person was supported to make choices and have as much control and independence as possible.
- There was a clear care and support plan which set out how the person's needs should be met. They regularly spoke with the registered manager to review their plan. Plans included goals the person wanted to achieve and had been updated where needed.

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.

- The person's care plan detailed how they communicated and received information. For example, staff had suggested using a communication board to help the person identify staff and planned activities. The person had agreed this and told us they found it useful.

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

- The person was supported to develop and maintain relationships. This included spending time with relatives. Their relative told us, "[Name] comes to visit me about every two weeks. Staff makes sure a driver is available to bring and collect [name]."
- The person took part in social activities, daily living and was supported to pursue their hobbies and interests. They proudly displayed items they had made around their home and enjoyed talking about them.
- Staff had forged links with the local community to help support the person to be more independent, for example, using the local shops. We saw staff supported the person to go to the supermarket at their request to make a specific purchase.

Improving care quality in response to complaints or concerns

- The person had been given information about the complaints procedure in formats which were appropriate to their needs.
- We observed the person spoke with the registered manager and staff about anything that was worrying them.
- The person's relative told us they had no concerns about the care and support provided, but felt confident

to raise these if they arose. No complaints had been received since our last inspection.

#### End of life care and support

- The person had been supported to think about their end of life wishes and had opportunity to record this in their care plan if they wished.

# 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 has 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 service promoted an open, inclusive and person-centred approach. The person's relative told us, "Staff respond to [Name] really well and know when something isn't right. I have never had experience of a placement this effective before."
- The registered manager and deputy manager were in daily communication with the person and staff and spent time in the service directing care and support. The person telephoned them on a daily basis, which provided reassurance for them.
- The person and their relatives were involved in developing and reviewing the care and support plan.
- The registered manager spoke openly and honestly throughout the inspection process. They talked about the challenges the service faced, and their plans for implementing and sustaining improvements.

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 submitted notifications of significant events, such as incidents and accidents, to CQC in a timely manner and had displayed their ratings which is a legal requirement.
- The registered manager was aware of the duty of candour, which sets out how providers should explain and apologise when things have gone wrong with people's care.

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

- Quality assurance systems were in place and used effectively to monitor key aspects of the service. Audits and checks were completed on a regular basis by the management team and registered provider to identify any areas for improvement.
- Regular handover and staff meetings provided opportunities to discuss current practice, support and any required changes. A staff member told us, "Management are really good. [Registered manager] will always ask about our physical and emotional well-being. [Registered manager] is very involved in the service and really supportive. Managers take time to listen and always respond if I need to call them. They are supported by the area manager who is also very approachable."

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

- The service involved the person, their relatives, and staff effectively in a meaningful way. The registered

manager responded to issues raised in meetings, day to day discussions and surveys and let stakeholders know what action they had taken.

- The person's equality, diversity and human rights were respected. The service's vision and values centred around the person they supported.

Working in partnership with others; Continuous learning and improving care

- The service had good working relationships with other agencies, including local primary care services.
- Staff had established links in the local community to support the person to feel part of their community.
- The registered manager worked closely with staff to help them develop their knowledge, skills and confidence.
- The registered manager had access to forums, news and updates through the provider to ensure they were updated in relation to any changes in legislation or good practice guidance.