

# Central and Cecil Housing Trust Link House

## Inspection report

15 Blenheim Road  
London  
SW20 9BA

Tel: 02085454920  
Website: [www.ccht.org.uk](http://www.ccht.org.uk)

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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service caring?

**Requires Improvement** ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

We carried out a comprehensive inspection of this service on 28 September 2016 at which two breaches of legal requirements were found. The provider did not have suitable arrangements in place to ensure that people were always treated with dignity and respect by staff, specifically during mealtimes at the home. We also found this service had not had continuous and consistent senior management oversight to ensure required improvements were made. After the inspection, the provider wrote to us with a plan for how they would meet legal requirements in relation to these breaches.

We undertook this focused inspection on 28 February 2017. We checked the provider had followed their plan and made the improvements they said they would to meet legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Link House on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

Link House is registered to provide accommodation and personal or nursing care to 52 older people. The service specialises in caring for older people living with dementia. At the time of this inspection there were 37 people using the service.

The service is required to have a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. Like registered providers, they are 'registered persons'. Registered persons have a legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run. The previous registered manager left the service in December 2015. A new permanent home manager was appointed in August 2016 and at the time of this inspection was waiting to hear the outcome of their registered manager application to CQC.

At this inspection we found the provider had taken the action they said they would and now met legal requirements.

Training and support had been provided to all staff to ensure people were treated with dignity and respect, particularly during mealtimes. Senior staff monitored staff were putting into practice what they had learnt through unannounced spot checks. They shared their feedback with all staff to enable them to reflect on their working practices and further develop in areas which still needed improvement. We saw interactions between staff and people had improved. We observed the lunchtime meal and noted staff maintained regular dialogue and communication with people throughout the meal. Staff who were supporting people to eat did this in a dignified and respectful way.

The home manager remained focussed on achieving identified actions in the service improvement plan. They had regular meetings with the operations manager who in turn met regularly with senior managers at provider level to update them about progress being made to meet improvement targets and objectives. In this way, there was clear accountability and scrutiny at all levels for ensuring the service continued to work

towards making improvements that were needed.

Provider level support for the service with regard maintenance issues had improved. The operations manager held weekly meetings with the maintenance department to check these issues were being progressed and that there were clearly stated timescales for when issues would be completed and resolved.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service caring?

We found action had been taken to make improvements. All staff had received specific training and support to ensure people were treated with dignity and respect, particularly during mealtimes.

We saw positive interactions between staff and people and support was provided in a dignified and respectful way.

We have not improved the rating for this key question from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection of the service.

**Requires Improvement** ●

### Is the service well-led?

We found action had been taken to make improvements. There was clear accountability and scrutiny at all levels for ensuring the service continued to work towards making improvements that were needed.

Provider level support for the service with regard maintenance issues had improved. These were now robustly monitored and there were clear timescales now in place for when these would be completed.

We have not improved the rating for this key question from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection of the service.

**Requires Improvement** ●

# Link House

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This focused inspection was unannounced and undertaken by a single inspector on 28 February 2017. It was done to check that improvements had been made by the provider after our comprehensive inspection on 28 September 2016. This is because the service was not meeting legal requirements at the time of that inspection. We inspected the service against two of the five questions we ask about services: is the service caring and is the service well led?

Before the inspection we reviewed the information we held about the service. This included the written report we asked the provider to send us, setting out the action they would take to take to meet the regulation that was not being met at their last inspection.

During our inspection we spoke with the home manager, deputy manager and three care support workers. We observed support provided during the lunchtime meal service and we looked at records relating to the management of the service.

# Is the service caring?

## Our findings

At our last inspection of the service in September 2016 we found the provider in breach of the regulations because they did not have suitable arrangements in place to ensure that people were always treated with dignity and respect by staff, specifically during mealtimes at the home. After the inspection, the provider wrote to us with an action plan setting out how they would make the necessary improvements to address the issues and concerns we found.

At this inspection we found the provider had taken the action they said they would and now met legal requirements.

Senior staff had delivered workshops to all staff on how to ensure people were treated with dignity and respect, particularly during mealtimes. To monitor that staff were putting into practice what they had learnt, the senior staff team undertook unannounced visits at mealtimes, to check that staff were supporting people in a caring and respectful way. The outcomes of these checks were shared with staff immediately after the visit and also at staff team meetings to enable staff to reflect on their working practices and further develop in those areas which needed improvement.

We undertook observations of the lunchtime meal service on all floors of the home. We saw interactions between staff and people had improved. Before the meal was served, staff talked about the menu with people particularly about the pancakes people were having for dessert, to mark Pancake Day. One person was encouraged to share their childhood memories of eating pancakes which was something which they had always enjoyed. There were a range of drinks on offer for people to choose from. People that could verbalise were served with the drinks they asked for. We saw for one person who could not verbalise their choice, staff showed them the different flavours of juice and let them choose the one they wanted by pointing and touching their carton of choice.

Throughout the meal staff maintained regular dialogue and communication with people. For example we saw they explained to people what they were about to eat, checked that they were happy with their food and offered people an alternative if they did not want what was offered. On a number of occasions people asked for something different to eat and staff were happy to accommodate their requests. Staff supporting people to eat, did this in a dignified way. They sat with people, maintained good eye contact and engaged people in conversation whilst remaining observant to signs that indicated people had had enough to eat.

On all floors music was playing and provided a focal point for discussion on one floor as people tried to guess the show tune being played. The atmosphere on all floors was calm, unhurried and people could eat their main meal at their own pace. People were served dessert after their main meal when they were ready for this. For people who didn't want pancakes, staff offered people a choice of ice cream, yogurt or fresh fruit. The Chef visited each floor after lunch to check whether people had enjoyed their meal, encouraging people to give their feedback. We heard people give positive comments to staff about their meal.

Staff confirmed the training and support they had received from senior managers through the workshops

and spot checks had helped them to improve their practice. One staff member said, "There's been a lot of training around mealtimes...it's about putting people first."

## Is the service well-led?

### Our findings

At our last inspection of the service in September 2016 we found the provider in breach of the regulations because this service had not had continuous and consistent senior management oversight to ensure required improvements were made. After the inspection, the provider wrote to us with an action plan setting out how they would make the necessary improvements to address the issues and concerns we found.

At this inspection we found the provider had taken the action they said they would and now met legal requirements.

The home manager remained focussed on achieving identified actions in the service improvement plan, which we reviewed at our last inspection. They had regular meetings with the operations manager to discuss progress and any additional support that was needed to ensure identified actions would be achieved. The operations manager in turn, met regularly with senior managers at provider level to update them about the progress being made by the service to meet improvement targets and objectives. In this way, there was clear accountability and scrutiny at all levels for ensuring the service continued to work towards making improvements that were needed.

Provider level support for the service with regard maintenance issues had improved. The home manager continued to report any issues that needed attention, to the provider's maintenance department. The operations manager now held weekly meetings with the maintenance department to check these issues were being progressed and dealt with. This included ensuring there were clearly stated timescales for when issues would be completed and resolved. The home manager told us this aspect of support had improved and said, "It's great as I know when things will get done."

Some positive outcomes had been achieved since our last inspection. Additional actions had been added to the service improvement plan, after that inspection, to reinforce the need amongst staff to ensure people were always treated with dignity and respect. The service had adopted the Social Care Institute for Excellence's (SCIE), 'Dignity Challenge' which set out ten standards for all staff to adhere to when caring for people. To support staff to achieve these, dignity champions had been introduced, each with lead responsibility for one of the ten standards. These members of staff provided advice and support to colleagues about how to embody the values of each of these standards in their day to day working practices. The improvements we saw during mealtimes indicated this support and guidance, along with the training provided through workshops, had had a positive impact on staff's practices so that people experienced better quality support and care.