

scope Woodford Court

Inspection report

6-8 Snakes Lane West Woodford Green Essex IG8 0BS Date of inspection visit: 18 September 2017

Good

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Tel: 02085029502 Website: www.scope.org.uk

Ratings

Overall rating for this service

Is the service safe?	Good $lacksquare$
Is the service effective?	Good •
Is the service caring?	Good •
Is the service responsive?	Good $lacksquare$
Is the service well-led?	Good •

Summary of findings

Overall summary

This inspection took place on 18 September 2017 and was unannounced. At our last inspection in October 2014, we found the provider was meeting the regulations we inspected and the service was rated Good. At this inspection we found that the service continued to be rated Good.

Woodford Court is a care home that provides accommodation and 24-hour support with personal care for up to 12 adults with learning disabilities.

There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People felt safe at the service. The provider had safeguarding policies and procedures were in place. Staff had received training about how to safeguard people and knew how to report any potential abuse.

There were enough staff to meet people's needs and the provider ensured all new staff had the relevant checks carried out before they started working at the service. Staff received regular training and supervision.

People and their representatives were happy with how care and support was provided. Staff had a good knowledge of people`s individual care needs. They treated people with dignity and respect and encouraged them to be independent.

Any potential risks to people were assessed to ensure their safety. There was a system in place to record when accidents or incidents had happened. People's medicines were safely managed.

People received care and support that were tailored to their individual needs. Staff were aware of people's likes and dislikes. People were provided with a choice of food and drink. They were supported by staff who respected their privacy and maintained their dignity.

People, relatives and staff felt the service was managed well. People who used the service and their relatives were asked about the quality of the service provided. The provider had a complaints policy in place. There were regular meetings for people and staff to discuss about the service.

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 remains good.	Good ●
Is the service effective? The service remains good.	Good ●
Is the service caring? The service remains good.	Good ●
Is the service responsive? The service remains good.	Good ●
Is the service well-led? The service remains good.	Good •



Woodford Court 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 was planned to check 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 inspection took place on 18 September 2017 and was unannounced. It was carried out by one inspector.

As part of the inspection, we reviewed the information we held about the service. This included statutory notifications, which are notifications the provider must send us to inform us of certain events. We also spoke with the local authority commissioners about the service and reviewed previous inspection reports.

During the inspection, we spoke with three people who lived in the service, three relatives, the registered manager and three members of the staff team. We looked at a variety of records, including three care records, three recruitment files, staff training records, health and safety records and other documentation relating to the management of the service.

Following our inspection, a relative contacted us on 21 September 2017 to provide their feedback about the service.

Our findings

The provider had policies and procedures to keep people safe from abuse and reporting any concerns. A person who lived at the service told us, "I'm safe here. I don't want to move." Relatives said the service was safe and they did not have any concerns about their loved ones. Staff were aware of safeguarding procedures and had received training in this subject. They also knew how to whistle-blow if they had any concerns. A member of staff told us they would report any concerns. They said, "I have done it before and the matter was dealt with promptly."

We saw risk assessments supported people to develop their independence while minimising any risks. There was guidance in place on how to manage them for example, when transferring people from their chair to their bed. Staff were aware of potential risks to people and ensured they were safe. The provider also had an environmental risk assessment in place which identified potential risks and how to minimise them. Records of accidents and incidents were kept and analysed to identify any trends or if any additional measures were needed to minimise the risk of them happening in future.

People had a personal emergency evacuation plan (PEEP) in place that advised staff on the help they needed to evacuate the premises in the event of a fire. Staff carried out regular fire drills and checked if all fire safety equipment operated correctly and a fire risk assessment was in place.

People and relatives felt there were enough staff working to meet the needs of the people who used the service. One person told us, "There are enough staff around." During our visit, we saw staff attended to people's needs in a timely manner. The registered manager told us they were currently recruiting more staff, however, any sickness or absence was covered by staff working at the service. We saw the provider did not use any agency staff. This helped to ensure people received consistent care from staff who knew them well.

We looked at three staff recruitment files and found that all the pre-employment checks required had been carried out. We saw the files contained an application form, references, identity checks, health checks and evidence of a Disclosure and Barring Service (DBS) check. The Disclosure and Barring Service carries out a criminal record and barring check on individuals and this helped employers make safer recruitment decisions. We positively noted people who used the service were part of the interview panel when staff were being interviewed for their posts. One person told us, "Yes, I was in the interview for staff."

The provider had systems to ensure medicines were stored, administered and disposed of safely. People told us they received their medicines on time. One person told us, "They [staff] come and give me my medicines when I need to have them." We saw medicine administration record (MAR) sheets were completed correctly and there were no missing signatures. There was a daily stock balance of the medicines undertaken to make sure people had received their medicines as prescribed. Staff who were responsible to administer medicines had received training to do so.

Is the service effective?

Our findings

People and their relatives told us they were happy with the care and support from staff. They said they felt staff had the skills to meet their needs. One person told us, "The staff do a good job."

The provider had a training programme in place which covered a number of areas to help staff in their roles. The staff also undertook regular refresher training to keep themselves up to date with the latest guidance or practice. One member of staff told us, "The training is good and I have learned a lot." We saw new staff had completed a structured induction which included mandatory training. They also shadowed an experienced staff member until they were assessed as competent to work alone. Some staff were in the process of completing their Care Certificate which is a set of standards that staff need to adhere to in their daily working life.

Staff were supported by having regular supervision sessions with their line managers and also had an annual appraisal. This helped to ensure they provided effective care to people.

Staff considered people's capacity using the Mental Capacity Act 2005 (MCA) as guidance. This legislation is used to protect people who might not be able to make informed decisions on their own and protect their rights. We saw people's capacity to make decisions had been assessed and recorded. People can only be deprived of their liberty to receive care and treatment when this is in their best interest and legally authorised under the MCA. The application procedures for this in care homes are called the Deprivation of Liberty Safeguards (DoLS). The staff and registered manager had a good understanding of the principles of MCA. There were policies and procedures for them to follow. Before people received any care or support staff asked them for their consent and acted in accordance to their wishes.

People were supported to have enough to eat and drink. One person said, "The food is good, I can choose something else to eat if I want to." People were able to choose what they liked to eat however staff encouraged eating healthily. Staff were in the process of introducing a pictorial menu to help people better understand the choices available to them. If people were on any special diets or had any nutritional needs, this was recorded in their care plans.

Staff worked closely with other professionals to ensure people were supported with their health needs. We saw records which showed people had been referred to other health services such as GP or dietician. Each person had a detailed health action plan in place which helped to ensure all their needs were met.

Is the service caring?

Our findings

People told us the staff were kind and caring and looked after them well. One person said, "I like it here, the staff are very good to me." Another person told us, "The staff are very kind and helpful."

During our visit, we found the atmosphere in the service was homely and the interaction between staff and people were friendly and relaxed. Staff spoke to people in a respectful manner and had built a good relationship with them. They knew what people's needs were and how to meet them. They were aware of their likes, dislikes and preferences. For example, they mentioned what one person liked to eat.

Relatives mentioned they always felt welcome when visiting the service. Staff encouraged and supported people to stay in touch with their friends and relatives. Some relatives visited their loved ones very regularly.

People were involved in planning their care and support. Their representatives were also involved where applicable and attended review meetings where their care was discussed. Staff ensured relatives were kept up to date about changes in their family member's needs.

Staff encouraged people to be as independent as possible and ensured their privacy and dignity were maintained at all times. They told us they closed the curtains and doors when providing people with personal care which people confirmed to us.

We positively noted that one person had trained to be an advocate and spoke on behalf of another person when decisions were made about their needs. Advocates are people who are independent of the staff or management team and they support people to ensure that their rights and needs are recognised. Information about how people could access an advocate if they wished to, was available to them.

Important information about the service was available for people and visitors in the entrance area. This included information about safeguarding and how to make a complaint. Staff were aware of the need to maintain people's confidentiality.

Is the service responsive?

Our findings

People were complimentary about how staff delivered care and support to them. One person said, "The staff help me with things and they look after well." We saw people received personalised care and support that met their individual needs. People's care plans provided detailed information about their care and support needs. They also contained people's individual wishes and preferences in the way they wanted their care and support to be provided. We saw care plans were reviewed on annually or earlier when needed to ensure staff continued to meet people's needs.

Each person had a named a key worker who worked with them on a one to one basis to discuss their care and to plan goals such as attending a special event and they made sure this happened.

People were provided with opportunities to engage in meaningful activities and social interests relevant to their individual needs and requirements, both at the service and in the community. We saw there was a programme of activities for each person who used the service. People enjoyed taking part in their activities. One person said, "I like to go out." The registered manager informed us they were in the process of looking at other activities which had been suggested by relatives. They had also recruited one person who would concentrate on activities only and was just waiting for all their pre-employment checks to be completed before they could start work.

People were supported to maintain links with their friends and families and this helped to ensure they were not socially isolated. One person said they often went out to meet with their friends.

The provider had policies and procedures for dealing with any concerns or complaints. Information about how to make a complaint was available to visitors. The complaints procedure was also available in easy read format. One person told us, "If I am not happy about something, I will talk to the manager." Relatives also commented that they would approach the registered manager if they had any concerns and were confident they would be dealt with accordingly. We noted the registered manager had received a thank you note from one person who used the service saying how pleased they were with the service.

Our findings

The service had a manager who was registered with Care Quality Commission (CQC) since January 2017. Since being in post, people, staff and relatives felt they had seen improvement in how the service was managed. One person told us, "The manager is very good." A member of staff said, "The manager is very supportive and helpful." Relatives commented the registered manager was approachable and they could discuss any issues they had with them. The registered manager had an open-door policy and made themselves available if people, staff or relatives wanted to speak to them.

The registered manager demonstrated they were aware of when the CQC should be made aware of events and the responsibilities of being a registered manager. They were aware of the notifications that were required to be sent to the Commission and these had been sent in a timely manner.

We saw there were regular staff meetings held where staff could share ideas and were kept informed of any changes occurring at the service. Staff felt able to approach management with suggestions and were confident they would be listened to. One example was about further developing the food menu for people and this was being worked upon at the time of our visit. Meetings were also held on a monthly basis for people who lived at the service.

The provider had an effective quality assurance system in place to monitor the quality of the service provided to people. These included audits in a number of areas and a monthly visit by a representative of the provider. If shortfalls were identified, appropriate action were taken.

The provider continually sought feedback from people, relatives, staff and other professionals about the service. These were gained through the use of satisfaction questionnaires. Where suggestions had been made, this had been taken on board by the management of the service and they implemented changes where necessary.