Astra Homes Limited

Pinfold Home

Inspection report

33-37 Pinfold Road
Streatham
London
SW16 2SL

Tel: 02087697869

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08 December 2017
10 January 2018

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Ratings

Overall rating for this service	Requires Improvement

Is the service safe?	**Requires Improvement**
Is the service effective?	**Good**
Is the service caring?	**Good**
Is the service responsive?	**Good**
Is the service well-led?	**Requires Improvement**

Summary of findings

Overall summary

Pinfold Home 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 is a staffed residential home for 26 people with mental health needs, some of whom may also have a learning disability. There were 24 people using the service at the time of this inspection.

This inspection took place on 8 December 2017 and 10 January 2018. Our first visit was unannounced.

At the last inspection in October 2016, we asked the provider to take action to make sure maintenance staff respected people's privacy. We found this action had been completed.

A registered manager was not in place. Since our last inspection the registered manager had left the service. A new manager was in post and they told us they would be applying to register with CQC. 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 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 living at Pinfold Home and spoke positively about the support provided to them. Staff told us that the service had improved in recent months with the new manager and changes being made in important areas such as medicines management and support planning.

We found some areas of the service required further improvement. Risk assessments required review to help ensure people's safety by fully addressing all identified risks and the steps in place to reduce these. Documented fire safety checks were not taking place consistently.

Staff were aware of safeguarding procedures. Appropriate recruitment checks took place before staff started work.

Staff had received training which gave them the knowledge and skills to support people effectively. Refresher was being arranged at the time of this inspection. Staff had received training in the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS). People were asked for their consent to the care and support they received.

There was a system in place for dealing with people's concerns and complaints. People told us they knew how to complain and felt confident to do so.

People were supported to have their health needs met. Staff worked with people to access the GP and other

local health services as appropriate to help make sure their individual health needs were met.

You can see what action we told the provider to take at the back of the full version of the report.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Requires Improvement

The service was not always safe.

Documented fire safety checks were not taking place regularly. The assessments of identified risks to people's safety required improvement.

There were sufficient staff to meet people's needs and keep them safe.

Staff were aware of safeguarding adult's procedures and would report any concerns appropriately.

Medicines were securely stored and people received their medicines as prescribed.

Is the service effective?

Good

The service was effective.

Staff were being provided with training and support that helped them care for people effectively.

People received the support and care they needed to maintain their health and wellbeing. They had access to appropriate health care professionals when required.

Is the service caring?

Good

The service was caring.

People who used the service told us they felt staff were caring. People responded well to staff interactions and said they liked living at Pinfold Home.

Is the service responsive?

Good

The service was responsive. Care plans were being updated to better help staff meet people's individual needs.

Activities took place and these were being reviewed to better meet people's interests.

People felt able to raise any concerns and were confident that they would be listened to.

Is the service well-led?

Requires Improvement

The service was not always well-led. Pinfold Home did not have a registered manager in post as required by CQC conditions of registration.

The new manager stated they would be applying for registration. People using the service, staff and external professionals told us the service had benefited from their leadership.

Improvements were being made to the quality monitoring processes in place at the time of this visit.

Pinfold Home

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.

Before the inspection we reviewed information we held about the service including a Provider Inspection Return (PIR) and any statutory notifications. Statutory notifications include information about important events which the provider is required to send us. A PIR is information that the provider is required to send to us, which gives us some key information about the service and tells us what the service does well and any improvements they plan to make.

Our first day of inspection was unannounced and both visits were carried out by one inspector.

During the inspection we spoke with 11 people who used the service, five staff members, the home manager and the general manager. We looked at three people's care and support records. We also looked at records relating to the management of the service including staff training and recruitment, medicine administration and quality assurance checks. We received feedback from three health and social care professionals following our inspection.

Requires Improvement

Is the service safe?

Our findings

Health and safety checks required improvement to make sure that people using the service were kept safe. Available records for fire safety checks showed that the recorded weekly checks of the fire alarm by staff as well as those of emergency lighting and fire extinguishers had stopped in June 2017. Staff spoken with were not aware of these checks taking place in recent months. We requested these checks be started immediately and the general manager confirmed by email that these important safety checks had resumed on a weekly basis. They also confirmed that a new fire risk assessment was being carried out and fire safety training was booked for staff. We will look at this area again at our next inspection of the service.

Other health and safety checks were being carried out regularly. For example, daily fridge temperatures and annual gas boiler checks.

Risks to people`s health and well-being were being assessed however we found that the written assessments in place required review. This was to make sure that they fully addressed all potential identified risks to people using the service and the staff working with them. For example, one person's assessment did not address their high risk of falls and referred to a different person's name in places. The managers told us that this must have been an error when they were being completed on a computer. Another person's documentation did not fully address each risk as identified in their admission assessment. The general manager told us by email that work had been undertaken by staff to update this documentation following our inspection. We will look at this area again at our next inspection of the service.

People we spoke with told us they felt safe living at Pinfold Home. One person told us, "I do feel safe here."

Staff knew how to report concerns to help safeguard people from the risk of harm and abuse. One staff member said they would go straight to one of the managers commenting, "The managers are approachable. They listen to me." Staff had last received safeguarding training in 2016 and refresher training was being arranged at the time of our visit. Information about safeguarding was displayed in the office including contact details for responsible safeguarding agencies.

Staff were seen to work positively with people to help keep them safe. For example on the day of the inspection we saw people going out and they were making staff aware of their plans and the approximate time when they were expected back. When incidents occurred, the manager reported these to the police and involved external agencies. An external professional told us that the service had communicated well with them about their client and had kept them informed about incidents affecting the person's safety.

There were sufficient numbers of suitable staff to help people to stay safe and meet their needs. People told us there were enough staff to help them when they needed support. One person commented, "Everything is fine. The staff are good." A staff member told us, "There are enough staff on duty. It's safe."

Safe recruitment practices were followed. References were obtained from previous employers along with proof of identity documentation. Criminal Records checks had been completed. These important checks

identify people who are barred from working with children and vulnerable adults and informs the service provider of any previous criminal convictions.

Medicines were being managed safely. The new manager reported that changes had been made to the way medicines were being managed including a change of supplying pharmacy. Staff had been trained and refresher training was booked immediately following our inspection. There were regular audits carried out by staff and the manager to check if people received their medicines as intended by the prescriber. Medicine administration records (MAR) were completed accurately and the stock of boxed medicines we audited matched the records kept.

The environment was clean and hygienic. There were dedicated domestic staff who helped keep the home environment to a good standard of cleanliness. One person told us, "The cleaners do a good job."

Good

Is the service effective?

Our findings

People said they were supported by staff who knew them well and understood their needs. One person said, "Staff have an enquiring, practical and professional way of dealing with clients. They're a good crowd." The staff we spoke had been in post for an extended period, knew people well and were able to describe their particular needs and preferences.

Staff told us they received appropriate training and support for their role. One staff member said, "I have medicines training booked and am also due to do safeguarding training." Two staff members told us they had been undertaking National Vocational Qualification (NVQ) training to support their professional development. We saw new staff received an induction and records were kept of this process.

Records showed that staff had attended training in topics like safeguarding, the Mental Capacity Act (MCA), fire safety and mental health awareness training. It was however noted that the majority of staff had last received training in 2016. The managers confirmed that refresher training was now being booked for all staff including sessions on medicines, safeguarding and fire safety.

Staff told us they had regular supervisions where they discussed their performance and development needs. They told us they felt supported by the managers at Pinfold Home. One staff member told us, "I can talk to them." Another staff member commented, "It's nice to be more open now. We can talk to the managers."

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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

Records showed that staff had completed MCA and DoLS training that helped them to understand issues around capacity and support people effectively. We saw people were able to come and go as they pleased and this was confirmed by the people we spoke to. Access to the property was monitored by staff to ensure people's safety. One person told us, "I'm free here. I can go out and about."

Individual agreements were in place with some individuals in their best interests. For example, about accessing their money and around their conduct whilst living in a communal setting. These were agreed with the person and set out in their care plan.

People told us they enjoyed the food provided at the home. One person said, "The food is up to standard." Another person told us, "The meals are well cooked, substantial and satisfy my diet." A third person commented, "The food is good." We saw people enjoying meals reflecting their own cultural background. One person responded, "I get African food I like" in a 2017 questionnaire given out to people using the

service.

People were supported to access health services as and when they required. Records showed that people attended GP, hospital and other health appointments and were accompanied by staff as required. People's mental health was monitored and the home worked with external healthcare professionals to promote their health and well-being. One external professional told us that the staff kept them up to date with any changes in the person's health or wellbeing and communicated effectively with them.

The environment was suitable for people's physical needs. Refurbishment of the home was on-going and people told us they were happy with their bedroom accommodation. One person said, "My bedroom is warm and comfortable." Another person said, "My room has its own kitchen and toilet."

Good

Is the service caring?

Our findings

People told us they liked living at Pinfold Home and got on well with the staff. One person said, "The staff treat me nicely. They care about me." Another person commented, "They treat me very well. I'm happy here." A third person said, "They're a good crowd. They're not persecutory." Further comments included, "I like it here" and "Things are alright."

Many of the people using the service at Pinfold Home had lived there for an extended period and were supported by staff who knew them well. Staff we spoke with were familiar with the needs and preferred daily routines of each person. The atmosphere during our visits was relaxed and calm. Some people shared jokes with staff and were free to go out as they pleased.

Staff were positive about the support provided. One staff said, "Very good. Staff spend time with people." Another staff member said, "It's good quality although there is room to improve. Staff do try to treat people like they would like to be treated." One external care professional said their observation was that people using the service "feel at home" and were "looked after." They reflected that some people "view it as a home for life and are comfortable with this." A second care professional said they were very satisfied with the quality of care provided to their clients.

A third care professional raised concerns about the approach taken by staff describing it as lacking compassion or friendliness. This was raised with the general manager who immediately addressed it with the management team to ensure all staff working in the service spoke to people in the correct manner.

Meetings were held with people using the service but these had been irregular in recent months. The most recent meeting held in September 2017 was used to formally introduce the new manager and to reinforce rules around smoking. There was other discussion around activities, key work sessions and menus.

Feedback questionnaires had been given out to people using the service looking at areas such as the attitude of staff, meals and activities. We looked at some of the comments recently received which included, "The staff are good to me", "I go out shopping with staff" and "I like the home."

Information about people was stored securely and confidentially. The staff did not discuss people's needs in front of others. For example, staff made sure the office door was shut when sharing information about people during our inspection.

Good

Is the service responsive?

Our findings

People told us that staff were responsive to their needs. One person said, "They have sorted out my medicines and my care plan." Another person said, "I'm very happy with my stay here, it suits me." A third person commented, "The people are nice."

The support plans were under review at the time of this inspection with new files being created each person using the service. Each plan stated the person's support needs, and what support and care interventions were required to meet these. The plans addressed areas such as people`s mental health needs, work and education, self-care, support required with medicines and money management. Each plan was written in the first person using statements such as 'I would like' and 'I want to'.

Each person had an allocated key worker who monitored their wellbeing and took responsibility for ensuring their care and support needs were being met. One to one sessions between people and their allocated key worker were not being recorded consistently and it was difficult to track individual progress in achieving their agreed goals. For example, in areas such as building independent living skills or managing their own finances. This was discussed with the management team at the time of our inspection who agreed the use of closer auditing to identify where staff may need further support with documenting key working sessions.

Work was taking place to improve the support to people using the service to engage in activities. An in-house programme of groups and activities was displayed however this had not commenced at the time of this inspection. Activities to be offered included well man and well woman sessions and the manager told us that an external health professional was going to be involved in facilitating these.

Two people went out for lunch together locally on one day we visited and another person was being supported to access local educational courses during our visits. Other people were seen to come and go during the day.

One external care professional felt that some people using the service could possibly move to live with more independence particularly with some additional support but recognised that many people were not keen to move on from the home. They said that some step down accommodation may benefit people and the manager told us that this was already being looked into. A flat close by to the home had been found for one person and work was continuing to support them to move to living more independently.

Daily notes were completed for each person documenting their health, wellbeing and day to day activities. We saw references to people being supported to go shopping, attend health appointments and to see family. Peoples support needs were discussed in handovers and team meetings.

Pinfold Home had a procedure in place to manage any concerns or complaints which was accessible to people using the service and other involved stakeholders. This set out the process which would be followed by the provider and included contact details of the provider and the Care Quality Commission. People told

us they felt able to talk to staff or a manager if they had a concern or complaint. Records showed that any concerns or complaints raised were addressed appropriately.

One person said, "I would talk to the manager." Another person also said they would go to the manager saying, "She is a fair woman."

Requires Improvement

Is the service well-led?

Our findings

A registered manager was not in place. A new manager commenced employment at Pinfold Home in August 2017 and it was their intention to register as manager with CQC in the near future. This had been delayed due to the de-registration process for the previous registered manager.

People using the service were positive about the way the home was run and knew who the managers were. One person said, "A very well run establishment." A second person commented, "The manager is a wonderful person. Excellent." Another person told us, "The deputy manager has been great."

The management team reported that the systems and procedures in place at Pinfold Home were under review with necessary improvements taking place in areas such as medicines management and support planning.

Staff reported improvements in the service in recent months and were confident about the quality of support provided. They welcomed the changes being made to the service with one staff member commenting, "We are going in the right direction." Another staff member told us, "Step by step, things are getting better." A third staff member commented, "It's all going well."

Staff told us that they felt well supported by the management team. One staff member said, "The manager is very helpful. She has started changing things step by step. I feel less stressed." Another staff member told us, "I can talk to her."

Effective systems were not in place to assess and monitor the quality of service that people received. Previous systems had not been effective in picking up shortfalls and new procedures were being introduced at the time of this inspection. Shortfalls identified with fire safety testing and risk assessments had not been identified prior to our inspection taking place. Further assurance was received by CQC following our inspection that these areas had been addressed.

Two external care professional gave feedback about the quality of care provided at Pinfold Home. One professional commented, "It's my view that Pinfold provides good quality care to the residents at the home." Another professional said, "The new manager is good. She is on top of things."

The service worked in partnership with other professionals and agencies in order to meet people's care needs as required and involvement with these services was recorded in people's care files. One external care professional said the home worked well with them to meet their client's needs.

Staff had access to a wide range of policies and procedures. These included medicines, safeguarding, whistleblowing, health and safety and infection control which were available to staff if they needed to seek advice or guidance in a particular area.