

Parkcare Homes (No.2) Limited Leonard's Croft

Inspection report

80 Lichfield Road Stafford Staffordshire ST17 4LP Date of inspection visit: 04 December 2019

Good

Date of publication: 22 January 2020

Tel: 01785214449

Ratings

Overall rating for this service	

Is the service safe?	Good	
Is the service well-led?	Good	

Summary of findings

Overall summary

About the service

Leonard's Croft is a residential care home registered to provide accommodation and personal care to eight younger people who have a learning disability. On the day of the inspection six people were living at the home.

Leonard's Croft consists of five one bedroom self-contained flats. Three single bedrooms, a bathroom, communal lounge area, kitchen and a garden at the rear of the property.

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 people who use 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. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

Since our previous inspection in October 2018, the provider has taken action to improve the management of people's prescribed medicines. People were supported by skilled staff to take their prescribed medicines.

People told us they felt safe living in the home and staff were aware of their responsibility of safeguarding them from the risk of potential abuse. The risk to the individual was identified and risk assessments put in place to mitigate the risk of harm. People who used the service were supported by staff to keep their home clean and tidy. Lessons were learnt when things went wrong, and action was taken to avoid a reoccurrence.

There was a clear management structure in place and people were aware of who was running the home. The provider had systems in place to review, assess and monitor the quality of service provided to people. The culture of the home was observed to be warm and friendly. Information relating to people were personcentred and reflective of the person's current needs.

Systems were in place to obtain people's views in relation to the service provided to them. People were supported by staff to maintain links with their local community. The provider worked closely with other professionals to ensure people received a seamless service.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection The last rating for this service was Good published (14 November 2018)

Why we inspected

We received concerns in relation to the management of medicines and people's care needs. As a result, we undertook a focused inspection to review the Key Questions of Safe and Well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other Key Questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those Key Questions were used in calculating the overall rating at this inspection.

The overall rating for the service remains Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Leonard's Croft on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?	Good 🖲
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good 🔍
The service was well-led.	
Details are in our well-led findings below.	



Leonard's Croft

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

Leonard's Croft 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. The registered manager was present during our inspection visit.

Notice of inspection This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who used the service about their experience of the care provided. We spoke

with a support worker, a senior support worker, the deputy manager and the operations director.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including quality audits.

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 Requires Improvement. At this inspection this key question has now improved to Good.

This meant people were safe and protected from avoidable harm.

Using medicines safely

•At our previous inspection in October 2018, we found improvements were required to ensure the safe management of medicines. At this inspection we found the provider had taken action to ensure people received their medicines safely and as prescribed.

People were supported by skilled staff to take their prescribed medicines. Staff told us they had received medicines training and competency assessments were carried out to ensure their practices were safe.
We observed medication administration records had been signed to show when medicines had been administered as directed by the prescriber.

•We saw medicines were stored in accordance to the pharmaceutical manufactures instructions to ensure they were safe to use.

Systems and processes to safeguard people from the risk of abuse

•People told us they felt safe living in the home and staff were aware of their responsibility of safeguarding people from the risk of potential abuse. One person told us, "I feel happy and secure living here." They told us if they had any concerns they would talk to a staff member.

•A staff member told us if they had any concerns about the risk of abuse they would report it to the registered manager. They were also aware of other external agencies they could share concerns with to safeguard people from further harm.

Assessing risk, safety monitoring and management

•The risk to the individual was identified and a risk assessment put in place to mitigate the risk.

•One person told us, "I was involved in my risk assessment about my outdoor activities."

•People required support to manage their behaviours. Staff told us they had received training about how to safely support people to manage their behaviours.

•Positive behaviours plans were in place and provided detailed information about how to assist people when they became unsettled or distressed.

We observed a risk assessment in place where a person had been identified at risk of malnutrition. This provided staff with essential information about how to support the person to maintain a healthy diet.
Personal emergency evacuation plans were in place that provided staff with detailed information about the level of support the individual would require to leave the building in an emergency.

Staffing and recruitment

•People were supported by sufficient numbers of staff who had been recruited safely.

•Staff told us that safety checks were carried out before they started to work at the home and the staff records we looked at confirmed this.

•People told us there were always enough staff on duty to offer support when needed.

•One person told us they were allocated one to one staff support and this level of support was always provided.

Preventing and controlling infection

•People were supported by staff to maintain the cleanliness of their home.

•We observed that all areas of the home were clean and tidy.

•Staff told us they had access to essential personal protective equipment (PPE) such has disposable gloves and aprons. The appropriate use of PPE should assist in reducing the spread of infections.

Learning lessons when things go wrong

•Lessons had been learnt when things went wrong, and risk assessments were put in place to avoid a reoccurrence. For example, one risk assessment informed staff about things that would make a person distressed and how to avoid this happening in the future.

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.

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

•People and staff were aware of who was running the home. A staff member told us, "The registered manager is great and supportive."

•The provider had systems in place to review, assess and monitor the quality of service provided to people. •People told us that staff frequently asked whether they were happy with the care and support provided to them. People were able to express their views about the quality of the service during meetings carried out with people who used the service.

•The provider had an infection prevention and control (IPC) lead in place. The IPC lead was responsible for monitoring the hygiene standards within the home.

•Audits of care plans were carried out to ensure staff had access to up to date information about people's care and support needs.

•Audits were in place to review staff's training to ensure they had the necessary skills to provide people with a safe and effective service.

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

•We observed there was a positive emphasis on promoting independence and to support people to maintain links with their local community.

•People were given the opportunity to say who worked with them. One person told us, "A new staff is supporting me at the moment to see if we get on."

•A staff member described the culture of the home as "warm and friendly." We observed there was a warm and friendly atmosphere where staff engaged with people in a kind and friendly manner.

•We found care plans and risk assessments were person-centred and relevant to the person's current needs.

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

•Discussions with the operations director confirmed they were aware of the duty of candour and their responsibility to act on any concerns to ensure the welfare of people who used the service.

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

characteristics

•Care team meetings were carried out which, gave people the opportunity to express their views about the service they received. One person told us, "The staff do listen to my views."

•Staff told us they were involved in regular meetings. One staff member told us, "As a team we are able to make suggestions and we are listened to. For example, I have asked for a person to be provided with more one to one support to enable them to go out more often and the manager listened to me."

•Staff told us during their one to one supervision sessions, they were able to make suggestions about the running of the home.

Continuous learning and improving care

•The provider had systems in place to obtain people's and staff views and used this to improve the quality of service provided.

Working in partnership with others

•The provider worked with other professionals to ensure people received a seamless service. This included mental health nurses, GPs, advocates and social workers.