

Nisacraft Limited

Nisacraft Care (Wembley)

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

We undertook an unannounced inspection on 9 February 2017 of Nisacraft Care (Wembley). Nisacraft Care (Wembley) is a care home that provides personal care and accommodation for up to 3 people who have learning disabilities.

At the last inspection on the 31 October 2014 the service was rated Good.

At this inspection we found the service remained Good.

Since the last inspection, the registered manager had left. The home was being managed and supported by a deputy manager and the provider. The deputy manager has submitted an application to apply to become registered manager for the home.

People's health and social care needs had been appropriately assessed. Care plans were person-centred, and specific to people's needs.

People were supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service supported this practice.

Systems and processes were in place to help protect people from the risk of harm and abuse. Staff had received training in safeguarding adults and knew how to recognise and report any concerns or allegations of abuse. Systems were in place to make sure people received their medicines safely.

There was a record of essential maintenance carried out at the home. Bedrooms had been personalised with people's belongings to assist people to feel at home.

Staff had been carefully recruited and provided with induction and training to enable them to support people effectively. They had the necessary support, supervision and appraisals from management.

There were some systems in place to monitor and improve the quality of the service.

Further information is in the detailed findings below.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

Nisacraft Care (Wembley)

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 provide a rating for the service under the Care Act 2014.

The inspection team consisted of one inspector. Before we visited the home we checked the information we held about the service and the service provider including notifications and incidents affecting the safety and well-being of people. No concerns had been raised.

There was one person using the service. We spoke to the person who was able to tell us what they thought about the service. We spent time at the home observing, how staff interacted with people and how they supported people during the day.

We also spoke with the provider, deputy manager and one care worker. We reviewed the person's care plan, three staff files, training records and records relating to the management of the service such as audits, policies and procedures.

Is the service safe?

Our findings

People using the service told us they felt safe in the home. They told us "They look after me. I have a special bed with rails so I don't fall and I am safe."

Training records confirmed that all staff had received safeguarding training. When speaking with staff they told us how they would recognise abuse and what they would do to ensure people who used the service were safe. They told us that they would speak to the deputy manager or report abuse to the local authority and Care Quality Commission (CQC).

Risks to people were identified and managed so that people were safe and their freedom supported and protected. Risk assessments were completed for people using the service. The assessments identified the risk and measures to manage the risk in various areas such as personal care, behaviours that challenged and when out in the community and were individualised to people's needs and requirements.

There were adequate numbers of staff on the day of the inspection. Staff told us that there were sufficient staff deployed to meet people's needs. We found the service did not use agency staff and care workers had worked at the home for a number of years which ensured a level of consistency in the care being provided and familiarity to people using the service. Care workers spoke positively about staffing arrangements in the home. They told us "Rota is given on time. There is enough staff, if we need anyone extra they are able to arrange for someone to come."

There were effective recruitment and selection procedures in place to ensure people were safe and not at risk of being supported by staff that were unsuitable. We saw that appropriate employment checks were carried out.

There were suitable arrangements in place to manage medicines safely and appropriately and ensure that people's medicines were stored and kept safely. We looked at a sample of the Medicines Administration Records (MAR) sheets and saw they had been signed with no gaps in recording when medicines were given to a person, which indicated people received their medicines at the prescribed time. There were arrangements in place with the local pharmacy in relation to obtaining and disposing of medicines appropriately. People using the service told us they received their medicines on time.

Care workers had received medicines training and policies and procedures were in place. The provider told us she was in the process of implementing medicines competency assessments for staff to ensure they were assessed and monitored to demonstrate they were capable to support people with their medicines safely.

There were appropriate arrangements for managing people's finances and this was done in agreement with people using the service. Money was accounted for and there were records of financial transactions. The deputy manager and provider conducted monthly checks and signed off the balances to evidence they were correct.

Accidents and incidents at the home were recorded in an incident report book and incident forms were completed. We saw there were systems in place to monitor the safety of the service. Records showed all necessary checks such as gas checks, fire checks and electrical checks were carried out and maintained. People using the service had a personal emergency and evacuation plan (PEEP) in place in case of fire.

Is the service effective?

Our findings

Staff told us that they felt supported by their colleagues and management. They spoke positively about working at the home and told us "I like working here. It's friendly. It's like a home" and "There is good teamwork. We can discuss everything and have a handover every day."

Records showed staff were supported to gain and develop their knowledge and skills to enable them to support people effectively. There was on-going training to ensure that staff developed and maintained their skills and knowledge. Topics included moving and handling, infection control, first aid, food hygiene, health and safety, medication and safeguarding. Staff spoke positively about the training they had received and told us "Moving and handling was a practical session. They showed us how to do it." Records showed that staff had received regular supervision sessions and this was confirmed by staff we spoke with.

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. People using the service had the capacity to make their own decisions and were able to give consent for their care and treatment.

When speaking to the deputy manager and care workers, they showed understanding of the Mental Capacity Act 2005 (MCA) and issues relating to consent. Training records showed and staff told us they had received MCA training.

People were supported to maintain good health. People were supported to access health and medical services when necessary. Care plans detailed records of appointments and medicines prescribed by healthcare professionals including GPs, district nurse, dentists, opticians and podiatry.

People were supported to get involved in decisions about their nutrition and hydration needs. There was a menu in place which staff told us was based on what people enjoyed. However if people did not want what was on the menu, alternative meals were accommodated for. We asked the deputy manager how they monitored what people ate to ensure they had a healthy and balanced diet. The deputy manager showed us a record was made on a daily basis outlining what people had eaten and drank throughout each day and evening. People using the service told us they had no concerns about the food in the home.

On the day of the inspection, we found the premises were clean and tidy with no offensive odours. Staff were responsible for cleaning duties as part of their shifts. The deputy manager showed us a daily staff task list which showed what care workers needed to do. Staff had signed off each task to show they have completed them.

We observed the premises had been adapted according to people's needs and preferences. We saw the environment had been designed and arranged to promote and support people's freedom, independence and well being. One person was supported with their mobility by the use of a wheelchair. The person's bedroom was on the ground floor, and doorways and hall ways were wide to ensure the person could access other parts of the home. There were doors leading out to the garden and a ramp to enable the

person to go into the garden safely and with ease.

Is the service caring?

Our findings

People using the service spoke positively about the way they were being looked after. They told us "They are very nice here. They give me a bath. I am happy."

During the inspection, we observed positive relationships between people and the staff. People using the service have been living at the home for a number of years. We observed care workers and the deputy manager showed interest in people and were present to ensure that people were alright and their needs attended to. Staff were attentive and spoke in a gentle and pleasant manner to people. Care workers and management staff approached people and interacted well with them.

We saw people being treated with respect and dignity. Staff had a good understanding of treating people with respect and dignity. We observed care workers knocked before entering people's rooms. They also understood what privacy and dignity meant in relation to supporting people with their care. Care workers told us "You have to respect their dignity. [Person] likes to do things themselves. [Person] always tells us what they want. We prompt [person] to wash but always get their permission before we support them"

People could choose where to sit and spend their recreational time. We saw people were able to spend time the way they wanted. All bedrooms were for single occupancy. People were able to spend time in private if they wished to and their wishes were respected. Bedrooms had been personalised with people's belongings, to assist people to feel at home.

There were arrangements in place to support people to express their views and be involved in making decisions about their care. Records showed monthly meetings were held with people using the service to encourage people to communicate their wishes. Minutes of these meetings showed areas such as people's well being, health and general behaviour, social activities and daily routines were discussed. People using the service had signed the minutes to confirm what was discussed and agreed.

Records also showed there had been formal review meetings with people using the service and their local authority representatives in which people's care was discussed and reviewed to ensure people's needs were being met effectively.

Is the service responsive?

Our findings

People using the service spoke positively about the service and care they were receiving. They told us "I am very happy here. When I am not well or have stomach pains they take me to the doctors. I go out shopping and go to the temple. Everyone knows me at the temple."

People received personalised care that was responsive to their needs. We looked at the care plans of people using the service. The care plans contained detailed information on the support the person needed with various aspects of their daily life such as personal care, health, communication, eating and drinking and community participation.

Care plans were person-centred, detailed and specific to each person and their needs. We saw that people's care preferences were reflected including information such as the person's habits, daily routine and preferred times to wake up and go to sleep. This demonstrated that the provider and deputy manager were aware of people's specific needs and provided appropriate information for all care workers supporting them.

People were supported to follow their interests, take part in them and maintain links with the wider community. During the inspection, people were taken out to lunch. Care workers were engaged in games with people but also respected people's wishes when they wanted to spend time in their room alone. People using the service told us they went out shopping and were supported with going to the temple. People enjoyed watching Indian films and had access to Indian channels and were able to watch Bollywood films when they wished to.

People were supported and encouraged with maintaining relationships with family members. The relatives of people using the service mainly lived abroad and were not able to come to the home on a regular basis. Records showed the deputy manager maintained contact with the relatives via the phone and arranged relatives to try and visit or contact people using the service when they could especially on special occasions such as birthdays and religious festivities.

There were procedures for receiving, handling and responding to comments and complaints. There were no recorded complaints received about the service.

Is the service well-led?

Our findings

Since the last inspection, the registered manager had left. The home was being managed and supported by a deputy manager and provider. The provider told us that the deputy manager will be submitting her application as registered manager for the home. Shortly after the inspection, we received an email from the deputy manager confirming her application had been submitted.

Care workers spoke positively about the management in the home and told us "I am able to speak openly with management. If I am not happy with anything they will sort it out." Records showed team meetings took place and staff were aware of any issues, concerns and best practice in relation to the service. When speaking with care workers, they spoke very positively about team meetings. They told us "We can raise issues and discuss anything we want. Everyone has a right to say what they want here."

There were some systems in place to monitor and improve the quality of the service. Records showed monthly checks of the service were being carried out by the provider and any further action that needed to be taken to make improvements to the service were noted and actioned. We found the service obtained feedback from relatives which was positive.

Care documentation was up to date and comprehensive. The home had a range of policies and procedures to ensure that staff were provided with appropriate guidance to meet the needs of people. These addressed topics such as infection control, safeguarding and health and safety. Staff were aware of these policies and procedures and followed them. People's care records and staff personal records were stored securely which meant people could be assured that their personal information remained confidential.