

The Params Care Limited

The Params

Inspection report

18 Foxley Lane
Purley
Surrey
CR8 3ED

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11 April 2018

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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

This inspection took place on 11 April 2018. When we last inspected the service in November 2015 they were meeting the regulations we looked at and we rated the service Good overall and in all five key questions.

The Params is a small care home which provides care and support for up to thirteen people with learning disabilities, sensory impairments and mental health needs. On the day of our inspection eleven people were living at this home.

At the time of the inspection, there was a registered manager. 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 told us they felt safe. Many of the people had been living at the Params for more than ten years and from what they told us, evidently considered themselves to be safe and secure in their home. People received care and support from staff who knew their needs and preferences well.

People were supported by staff who had also worked in the home in the long term and knew how to keep people safe. Risks to people's health and safety were assessed. There were good risk management plans in place.

People were supported by appropriate numbers of staff. Robust staff recruitment procedures helped to keep people safe.

People were supported with the safe administration of their medicines and there were regular audits undertaken by the provider to monitor the processes in place and to ensure people remained safe.

People were supported by staff who were well trained and supervised.

The provider ensured people's nutritional needs were met. People planned their meals, shopped for ingredients and cooked their own food with the support of staff.

People's healthcare needs were met and staff supported them to attend medical appointments.

Staff had undertaken training in the Mental Capacity Act 2005 and were aware of their responsibilities in relation to people who might be deprived of their liberty. They ensured people were given choices and the opportunity to make decisions.

People, their relatives and professionals told us staff were consistently kind and caring and established positive relationships with them and their families. Staff valued people, treated them with respect and

promoted their rights, choice and independence.

Comprehensive care plans were in place detailing how people wished to be supported. We saw people were central to the process of how their care and support was delivered.

People participated in a wide range of activities within the home and in the community and received the support they needed to help them to do this.

There was a complaints procedure in place and relatives felt confident to raise any concerns either with the staff or the registered manager if they needed to. The complaints procedure was available in different formats so that it was accessible to everyone.

We found there was an open and transparent culture in the home where staff were encouraged to share in the development of the home for the people living in it.

We found the provider had a system in place that sought feedback about the quality of the service from different people involved with the service. There were good systems in place to use the feedback received to improve the service where necessary.

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 was safe. People told us they felt safe and saw The Params as their home. They were protected against identified risks as the service had comprehensive risk assessments and risk management strategies in place.

People were protected against the risk of abuse. Staff were aware of their roles in safeguarding people and could demonstrate clear knowledge of how to appropriately raise concerns of alleged abuse.

People received care and support from sufficient numbers of staff at all times.

People received their medicines safely and in line with the home's policies and procedures.

Good ●

Is the service effective?

The service was effective. Staff received appropriate supervision and the necessary training to meet people's needs effectively.

People received care and support from staff who knew their needs and preferences well.

People received support in line with the Mental Capacity Act 2005. Staff knew about their responsibilities under the Act and the provider had considered people's capacity to make decisions for themselves.

People were provided with a range of healthy and well balanced food and drink to meet their nutritional needs.

People were supported to maintain good health and have appropriate access to healthcare services.

Good ●

Is the service caring?

The service was caring. People, their relatives and professionals told us staff were very caring. They told us they were involved in the care planning process and people's views and preferences were taken into account in the process.

Good ●

Staff demonstrated respect for people who used the service in the way they interacted with and spoke about people.

Staff took account of people's individual needs and supported them to maximise their independence. Staff provided support in ways that protected people's privacy and respected their dignity.

Is the service responsive?

Good ●

The service was responsive. People told us they contributed to the assessment and planning of their care. We saw that care was tailored to meet people's individual needs and requirements and aimed at increasing people's independence. Care records were detailed and clear.

Activities were tailored to individual need and people were encouraged to take part in activities of their choice.

People felt able to raise concerns and had confidence the registered manager would listen to their concerns and address them appropriately.

Is the service well-led?

Good ●

The service was well-led. The registered manager promoted an open and inclusive service whereby people, their relatives and staff were encouraged to contribute to the development and improvement of the service.

There were good quality assurance processes in place and the registered manager sought feedback on the quality of the service delivery via quality assurance questionnaires. Feedback received was reviewed and where appropriate action taken in a timely manner.

The Params

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 unannounced inspection took place on 11 April 2018. It was carried out by one inspector. We looked at notifications that the service is legally required to send us about certain events such as serious injuries and deaths.

At this inspection we spoke with five people living at The Params. We also spoke with three staff, and the registered manager as well as one of the owners. We looked at three people's care files and three staff files. We also looked at other records related to the running of the service. After the inspection we spoke with three relatives and one health and social care professional.

Is the service safe?

Our findings

People we spoke with told us they felt safe. One person said, "I am very well looked after here. I have been living here for a long time, it's my home and I like it here." Another person told us, "I feel quite safe here, I have lived here for over 20 years, it's my home."

At our inspection we saw people were protected against the risk of harm and abuse. Staff were aware of the different types of abuse and told us what procedure they would follow to report any suspected abuse. One member of staff said, "If I saw anything like that I would report it to the manager and if I had further concerns I'd report it to social services." Another member of staff said, "We've all had the training and I know it is important that we report any concerns we might have to the manager." Staff were aware of their responsibilities in reporting any safeguarding matters and on whistleblowing.

People received care in premises which were safe. We observed the service was in a good state of repair and staff confirmed any repairs were promptly carried out. The provider had systems in place to reduce risks relating to fire safety, gas safety, electrical installation, electrical appliances, water hygiene and water temperatures. Fire drills were carried out regularly as was the appropriate maintenance of fire equipment systems such as for the fire alarm and fire extinguishers. Each person also had a personal evacuation plan in place in case a fire broke out. We were shown records that evidenced all of this.

People were protected against identified risks. The service had in place good comprehensive risk assessments which covered people's needs. We saw they were regularly reviewed to reflect people's changing needs. Risk assessments detailed what people were able to do to minimise the risk themselves but they also set out what staff support was required to keep them safe. Risk assessments were person centred and took into account people's preferences and likes and dislikes. Risk assessments we inspected covered a wide range of activities such as, mobility, eating and drinking, accessing the community, making choices and self-care.

The provider undertook appropriate pre-employment checks to ensure people received care from staff they deemed suitable to work with them. As with many of the people living at the Params, we saw that a large percentage of the staff had worked at this home for a long time. We looked at staff files and found they contained appropriate recruitment checks such as criminal record checks, two references and other identification checks.

At this inspection we saw there were sufficient numbers of staff to ensure people's needs were met. We inspected staff rotas for the last month and we saw there was a good ratio of staff to people to support their needs. One of the relatives we spoke with said, "I visit regularly and there does seem to be enough staff on duty." Staff we spoke with told us they thought there were enough on duty to help people. The registered manager told us they arranged the rotas so that people's needs were met.

Our inspection evidenced that people were protected against unsafe medicines management. The provider demonstrated good practice in the administration, recording and safe storage of medicines. Staff told us,

they were aware of the correct procedure in safely administering, storing and recording medicines. Staff told us they would speak with the registered manager if they had concerns. We looked at the stock of medicines held in the medicines cabinet and found these were stored in line with good practice. Medicines were recorded correctly on the medicines administration records (MARs). We carried out a stock take check to see if the remaining amount of medicines recorded by the service was correct, and found all medicines were accounted for. The registered manager told us all the staff received competency assessments to ensure they were up to date with good practice. We saw documented evidence of this and only staff who were trained and assessed in this way were allowed to administer medicines to people.

A tour of the premises together with the registered manager found them to be clean, well decorated and free from potential sources of infection. All the staff whose files we checked had completed food safety training in the last two years. We were shown a report from a recent visit to the home by L.B Croydon's Food and Safety Team in February 2018. They found the provider to be meeting the required standards and rated the service as good. Two recommendations were made to improve best practice and at the time of this inspection both had been implemented as necessary.

The registered manager showed us the incident and accident records. We could see that appropriate details were recorded for any incidents or accidents that happened. The registered manager told us they reviewed the records to see if any trends might be identified that informed them of appropriate action to take to avoid the same things happening again.

Is the service effective?

Our findings

Our inspection of people's care files evidenced people's care and support was fully reviewed and assessed. Assessments were comprehensive and we saw evidence people were involved in discussions about their care and any risks that were involved in managing their needs. People told us that they were consulted about their support plans and they had felt listened to.

They said they were happy with the support they received from staff. One relative said, "The staff are marvellous, they are like family, they treat people with respect and people are very happy there." The health and social care professional we spoke with told us they thought people received effective care from well informed staff.

At this inspection we found a wide and appropriate range of training and support was available to staff to meet the needs of people. Records showed the registered manager met regularly with staff to discuss and appraise their work performance, their learning and development needs and any issues or concerns they had about their role. Staff told us they received regular one to one supervision meetings every four to six weeks with the registered manager. One member of staff said, "I get regular supervision with the manager that I find very useful in carrying out my work effectively." Another member of staff told us, "We do have good access to training and I have done loads of training over the last year."

We looked at staff training records and saw there was a list of all training the staff had completed. We saw the training provided covered the essential areas of knowledge, skills and competencies that the provider had assessed staff needed to do their jobs effectively. We noted that there was additional specific training that was accessed by staff such as that for diabetes and palliative care. The registered manager told us that training was delivered to staff in a variety of ways some face to face learning sets and some through e-learning.

Records showed that staff meetings were held every month. Residents meetings were also held monthly. Staff told us staff meetings provided a useful arena for debate about the service and its effective development as well as being a useful support mechanism for them.

The registered manager recognised the importance of good food and healthy nutrition and diet and the contribution it made towards people's wellbeing. This was seen by staff as an important aspect of people's daily life. Staff worked with people in planning and preparing their meals. We noted there was an "Eat Well" plan in place that set out healthy food options for people. People told us the food they received was good and they had a choice of what they wanted to eat and every day there were options. The registered manager showed us pictorial representations of different food dishes to assist people to make informed choices.

We saw evidence that as well as being supported to eat healthily, people were also encouraged to take regular exercise with personal exercise programmes in place as a form of supporting these aims.

Staff told us they supported people with their health needs. Our inspection of people's care records showed

that people had good access to appropriate health care professionals as needed. Staff told us that maintaining good health for people was essential and they made sure people saw health professionals as necessary. The care plans we looked at contained individual health action plans. These contained details about people's health needs and included information about their medical conditions, medicines, dietary requirements and general information.

Records showed that advice from relevant professionals was recorded and actioned appropriately and regularly reviewed. This showed that the service was meeting people's health needs effectively.

All of the people living in the home had capacity to give consent about the activities they wanted to undertake. Staff maximised people's decision making capacity by seeking reassurance that people had understood questions asked of them. They repeated questions if necessary and used pictorial forms of communication in order to be satisfied that the person understood the options available. Where people declined assistance or choices offered, staff respected these decisions. In this way people were encouraged and enabled to give their consent where ever possible about their wishes and preferences.

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 who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty were being met.

Is the service caring?

Our findings

We saw people were treated with kindness and compassion in their day to day care by staff. A relative told us, "Staff are very caring towards them, it's like one large family. They all know each other so well." It was evident that positive and caring relationships were developed with people and this was helped by the fact that they and the staff team had been together for some time and were established.

One member of staff said, "I love working with the people here. It's lovely to see them progress over time." A relative told us, "The staff have really good relationships with people. The staff and the people are a stable group and they know each other well which helps." A healthcare professional told us people seemed to be happy in the home. They said the staff and the registered manager were really caring and provided them with positive care.

We saw frequent and positive interactions between people and staff. Staff were patient in their support and waited for the person to respond before carrying on. We found the atmosphere was very relaxed between staff and people. We observed people smiling and choosing to spend time with staff who always gave them time and attention. Staff knew what people could do for themselves and areas where support was needed. Staff appeared very dedicated and committed. They knew, in detail, each person's individual needs, traits and personalities. They were able to talk about these without referring to people's care records.

Each person was allocated a member of staff as their own key worker. A keyworker is a member of staff who has the lead role for the care of that person and who has additional responsibilities such as helping someone to write their care plan. We saw monthly records of meetings that keyworkers had with people and we saw they were very much central and involved in their care planning. Relatives told us they were kept well informed about their family members support and care and when changes in people's needs happened.

We saw that staff respected people's privacy, knocking on their doors before entering and ensuring their personal care was carried out in private. The relatives we spoke with told us they were encouraged to visit whenever they wished and were always made to feel welcome by staff and the registered manager.

Is the service responsive?

Our findings

We saw individualised support plans were in place that provided clear information for staff on how to deliver people's care. Relatives of people as well as health and social care professionals who knew people well had contributed to these plans. Records included information about people's social backgrounds and relationships that were important to them. They also included people's individual characteristics, likes and dislikes, places and activities they valued.

Relatives confirmed that staff supported people in line with their wishes and with their support plans. This helped to ensure that the care people received was person centred and that it met people's emotional and communication needs as required. Staff understood that people's communication needs varied. They were able to tell us about the individual needs of people.

People were supported to access and maintain links with their local community. We saw people enjoyed active social lives that contributed to their wellbeing and to their individual development. One person said they went to church when they wanted to and they said they had holidays every year. Last year they went to Bognor Regis and really enjoyed their summer holiday there. This year they told us they were going to Bournemouth and they said, "I am really looking forward to that. I can't wait." One person told us they were able to go out shopping when they wanted to and other people said they attended a day centre every week. A variety of activities were available including playing bingo, art work, sewing and group outings. We saw evidence that people attended training and awareness courses that assisted them to develop their skills to become more independent. We saw people received a responsive service that met their individual needs, preferences and aspirations. Staff were committed to ensuring people received individualised care and support.

Relatives said that they were very happy with the choice and range of activities available for people. We saw that each person had their own varied activities timetable for the week based on their individual needs and preferences. Both individual and group activities took place. Activities included swimming, art and crafts, day trips and visits to local restaurants. All the activities had been risk assessed to ensure that people were kept as safe as possible without infringing too much on their enjoyment of the activities.

People's relatives told us they were aware of how to make a complaint. One relative said, "I have not had the need to complain, if I did I would talk to the staff or to the manager." Other relatives told us they would talk to staff if they were not happy with something.

There was a complaints procedure, which was available in an accessible format to help people understand how to complain. The registered manager confirmed that they had received no formal complaints since our last inspection.

From our inspection of people's care files we saw work was started together with relatives and health and social care professionals to help people discuss and record their wishes for end of life care. For example whether people wanted to be cared for in the home or a hospital or hospice. This was to ensure people had

a choice about what happened to them and that staff had the information they needed to make sure people's wishes would be respected. The registered manager told us they were working to complete this for all people.

Is the service well-led?

Our findings

People received a service which was well led. At this inspection we found a helpful team of staff that received support and encouragement from the registered manager. He had been in post for several years and had gained good management experience. We saw they had relevant and appropriate qualifications to manage this service. The registered manager told us they attended regular meetings with the local authority and kept abreast of developments within the social care sector by attending provider forums and conferences.

One relative we spoke with said, "We are kept well informed about our [family member]. The home is well run and looked after properly." Staff spoke highly of the manager and said, "The manager and the owners really care about the people here and just like us they want the best for people and for us." Another staff member told us, "Of course, yes the manager is very supportive and so is the staff team. We all know each other really well it's like a large family." Throughout the inspection we observed the staff and the registered manager interacting with people in a compassionate and respectful manner.

We saw the registered manager operated an open door policy whereby people, relatives and staff could speak with them at any time. We observed people and staff seeking advice and guidance without hesitation. We understand that information was shared with the staff team through handovers and this meant that all staff were aware of any changes for people. The registered manager told us staff were able to call him at any time should they need his support which was confirmed when we spoke with staff.

We saw documented evidence that showed the service had effective audit systems in place and these were kept up to date. This included a monthly health and safety check on the physical environment, a competency check on staff for medicines administration, an audit of people's care plans being maintained up to date, a keyworker systems check, a review of complaints and of accidents and incidents. The provider sought feedback about the service provision. We saw completed feedback surveys from people and their relatives. Responses we saw were positive. The registered manager showed us their analysis of all the comments received in order to draw up an action plan for making improvements if and where necessary. This all meant there were quality assurance systems in place that helped to maintain and improve the service effectively.

People were protected against an unsafe environment by the service carrying out comprehensive audits. Records showed the service carried out daily, weekly, monthly and six monthly health and safety checks on the service. We viewed records relating to fire equipment, medicine audits, food hygiene checks, maintenance checks and found these were all in date and any identified issues were reported to the manager who ensured they were rectified.

All the records that we inspected in the home were well maintained and we found that the information we required to see was easy to access and chronologically stored. Old information had been archived appropriately but was also accessible if needed. This reflected on a well organised and efficiently run care home.

The provider had sent us written notifications telling us about important events that had occurred in the service when required. They are legally obliged to send us notifications of incidents, events or changes that happen to the service within a required timescale. This means that CQC were able review the notifications and decide whether any action was needed on their part.