

Parkcare Homes (No.2) Limited

Tithe Barn

Inspection report

Upper Moraston
Sellack
Ross On Wye
Herefordshire
HR9 6RE

Tel: 01989730491

Website: www.craegmoor.co.uk

Date of inspection visit:
18 December 2018

Date of publication:
18 January 2019

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

What life is like for people using this service:

- People enjoyed living at Tithe Barn and were cared for by staff who understood their preferences and were kind.
- Systems were in place to identify people's individual safety risks and to promote people's safety. Staff were available to meet people's safety needs and reassure them when needed. The risk of accidental harm or infections was reduced as staff used the resources and equipment provided to do this.
- Staff administered people's medicines safely. Staff provided people with support to have the medicines they needed to remain well and people's medicines were regularly reviewed and checked.
- People were supported to enjoy a wide range of activities which reflected their interests, and enhanced their lives. Staff sought ways for people to continue to do things they liked, whilst maintaining their safety.
- People, their relatives, staff and other health and social care professionals worked together to assess people's needs and plan their care. This was done so people's needs and preferences would be met, and they would enjoy an enhanced sense of well-being.
- People were supported by staff to make decisions about their care. Staff used their knowledge of people's preferred ways of communicating, to assist people to make their own choices.
- Staff promoted people's right to independence, dignity and respect.
- People received support to keep in touch with family and friends who were important to them and to express their individual lifestyle choices.
- Staff supported people to have timely access to external health care. This improved health and well-being outcomes for people living at Tithe Barn.
- Staff had received a comprehensive induction and on-going training to develop the skills they needed to care for people.
- People, their relatives and staff were encouraged to make any suggestions for developing the care provided further.
- The provider and registered manager checked the quality of care provided and developed action plans to improve people's care, so people would continue to enjoy living at Tithe Barn.
- We found the service met the characteristics of a "Good" rating in all areas; More information is available in the full report

Rating at last inspection: Good. The last report for Tithe Barn was published on 29 July 2016.

About the service: Tithe Barn is a residential care home, providing personal care and accommodation. There were thirteen people with learning disabilities or autistic spectrum disorders living at the home at the time of the inspection.

Why we inspected: This was a planned inspection based on the rating at the last inspection. The service remained rated Good overall.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our inspection programme. If any concerning information is received 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 effective?

Good ●

The service was effective.

Details are in our Effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our Well-led findings below.

Tithe Barn

Detailed findings

Background to this inspection

The 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.

Inspection team: One inspector carried out the inspection.

Service and service type: Tithe Barn is a care home. People in care homes receive accommodation and nursing or personal care. 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.

Notice of inspection: This inspection was unannounced.

What we did when preparing for and carrying out this inspection: We reviewed information we had received about the service since the last inspection. This included details about incidents the provider must notify us about, such as abuse. We also sought feedback from the local authority and professionals who work with the service. We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

We spoke with eight members of staff including the deputy manager, the activities co-ordinator and six care staff. The registered manager was not available on the day of the inspection, so we spoke with them afterwards. We also spoke with one relative and spent time with people living at Tithe Barn to see how staff supported them.

We reviewed a range of records. For example, two people's care records and multiple medication records. We also looked at records relating to the management of the home. These included systems for managing

any complaints, and minutes of meetings with staff. We also saw registered manager's checks on the quality of care provided. For example, surveys completed by people.

Is the service safe?

Our findings

Safe – this means people were protected from abuse and avoidable harm

Good: ☐ People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes

- The registered manager and staff understood their responsibility to safeguard people from abuse.
- Staff received safeguarding training and knew what action to take in the event of any concerns for people's safety. One staff member explained some people living at Tithe Barn were not able to communicate their needs. The staff member gave us an example showing how the specialist training they had received helped them identify if people were experiencing any safety concerns, so steps could be taken to support them.
- The provider continued to check the suitability of potential staff to care for people living at the home.

Assessing risk, safety monitoring and management

- Staff knew people's individual safety risks well and used this knowledge when regularly checking if people had the support they wanted.
- Staff acted promptly if people needed support with their safety, or were anxious.
- People's individual risks were reflected in their risk assessments, which gave staff clear guidance to follow to reduce risks to people living at the home. These included risks when people were at the home, or out in the community, and risks people experienced when eating and mobilising.
- The environment was regularly checked by staff, so they could be sure risks to people were further reduced.

Staffing levels

- There were sufficient staff to care for people. One relative told us staff levels were good. The relative said, "There's always enough staff about, and they are on the ball, and because of this I have no concerns for [family member's name] safety."
- Staffing levels were based on the needs of people living at the home. One staff member told us, "[Registered manager's name] arranged for extra staffing yesterday, as [person's name] was unsettled."
- Staff told us any unexpected staff absence was covered by staff who knew people's safety needs well.

Using medicines safely

- People's medicines were managed safely. Staff had to undertake training and have their competency checked before they could administer people's medicines. Staff competency was subsequently regularly checked.
- Staff worked with people's GPs, so people's medicines were regularly reviewed. One staff member gave us an example of initiatives they had been involved in which had led to the reduction in medicines for some people living at Tithe Barn, with linked improvements in people's well-being.
- People's medicines were stored and disposed of safely. The registered manager was planning to review the use of petroleum based creams with people's GPs, to reduce risks further.

- The administration of medicines was regularly checked by the registered manager and senior staff, so they could be assured medicines were provided as prescribed.

Preventing and controlling infection

- Staff were supported to follow good infection control processes and used the equipment provided to reduce the likelihood of people experiencing poor health.
- Regular checks were undertaken on the environment, so the registered manager and provider could be assured the risks of infection were reduced.

Learning lessons when things go wrong

- Staff communicated information about incidents and adjusted the care planned to further reduce the likelihood of reoccurrences. Accidents, near misses and untoward incidents were regularly reviewed by the registered manager with staff, so any learning could be taken from these.

Is the service effective?

Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

Good: ☐ People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were considered before they moved to the home. The views of people's relatives and other health and social care professionals' advice was considered when people's needs were assessed.
- Relatives and staff gave us examples of how thorough this process was, and how this helped people to settle into life at Tithe Barn quickly, as the care provided reflected their preferences.

Staff skills, knowledge and experience

- Staff had developed the skills required to care for people. Relatives told us staff knew how to assist people. This included specialist training to care for people with autism, and specialist training so people could continue to enjoy the facilities at the home, such as the swimming pool, safely.
- Staff undertook a comprehensive induction programme. This included working with more experienced staff, initially. Staff were also supported to develop their skills on an on-going basis, so they could carry out their roles effectively. We saw staff used the skills they had gained, including when communicating with people, so people's preferences and wishes would be followed.

Supporting people to eat and drink enough with choice in a balanced diet

- Staff understood if people required specialist diets or particular textures of food and ensured people received the support they required.
- People were encouraged to decide what meals they would like. One staff member explained people were encouraged to try new things they may enjoy eating. The staff member explained they would check people's body language and offer alternatives, to ensure people enjoyed the meals they preferred.
- Some people enjoyed the independence of making their own drinks, and were confident to make these as they wished. Other people were encouraged by staff to have enough to drink so they would remain well.
- Staff gave us examples of improved health outcomes for people living at the home, such as desirable weight reduction, as a result of the support people received to enjoy a healthy lifestyle.

Staff providing consistent, effective, timely care

- Staff met at each shift handover to consider if people's care needed to be adjusted to meet their needs.
- The registered manager had put systems in place so staff could work effectively with other health and social care professionals. Staff gave us examples of benefits to people because of the way they and other organisations worked together. These included timely support if people were unwell.
- People had health action plans in place, to focus on maintaining and improving their health. People were supported to attend routine health appointments, such as inoculations, and specialist appointments, such

as dentistry and support from mental health specialists, so people enjoyed the best health possible.

Adapting service, design, decoration to meet people's needs

- People were able to use a wide range of facilities at the home, including extensive grounds, activities areas and a swimming pool. Staff gave us examples of how people elected to spend their time enjoying these facilities, which provided people with the freedom to safely express their personalities, interests and lifestyle choices.

Ensuring consent to care and treatment in line with law and guidance

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 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). 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.

- People were supported to be involved in decisions about their care. Where people needed support to make some decisions this was provided by staff, based on people's preferred communication methods.
- We found the MCA and associated Deprivation of Liberty Safeguards were applied in the least restrictive way, authorisation correctly obtained, and any conditions observed.

Is the service caring?

Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

Good: ☐ People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People enjoyed involving staff in their day to day lives and were relaxed in the company of staff who supported them. People were confident to ask for any assistance they wanted.
- The relative we spoke with highlighted how kind the staff were. The relative said, "They [staff] are special people. Some staff work across several flats to provide loving care to people."
- Staff knew people's histories and preferences well and spoke warmly about the people they cared for.
- Staff told us they were supported to find out about people by checking their care plans, so they could understand what was important to people. One staff member said, "You just take time to talk to people, to find out about them, and check they are okay." We saw this happened throughout the inspection.

Supporting people to express their views and be involved in making decisions about their care

- People made day to day decisions about their care. For example, people decided where they wanted to spend their time and what enjoyable things they would like to do. Staff supported people to make these decisions, where they wanted this, by gently offering alternatives for people to choose from.
- Staff showed people respect by communicating with them in the ways they preferred and ensured people were given the time they needed to express their decisions.
- Records showed us where this was appropriate, relatives and external health and social work professionals had been involved in supporting people to make decisions about their care.

Respecting and promoting people's privacy, dignity and independence

- Staff took time to promote and acknowledge people's independence. One staff member highlighted one person enjoyed assisting other people to prepare their breakfasts, as well as preparing their own drinks.
- People's right to dignity was reflected in the way staff cared for them. We saw staff were discreet when suggesting people may like to have personal care.
- People's confidential information was securely stored.

Is the service responsive?

Our findings

Responsive – this means that services met people's needs

Good: ☐ People's needs were met through good organisation and delivery.

Personalised care

- People's care plans recorded their care and communication preferences, histories and goals.
- People's relatives had been consulted about the care planned for their family members. Advice from staff and other health and social care professionals was considered and reflected in people's plans so their needs would be met.
- Changes in people's needs and preferences were incorporated into people's care plan reviews. This helped to ensure people's care reflected their current needs and preferences. One relative said, "They [staff] always ask for my views."
- Staff had developed communication dictionaries, which provided guidance for staff to support people to be involved in decisions about their care.
- We saw examples of information within people's plans which was provided in line with the Accessible Information Standards.
- Relatives highlighted they were welcome to visit their family members whenever they wanted to and were encouraged to maintain their relationships. Staff gave us examples of the ways they supported people to keep in touch with people who were important to them, and to express their unique lifestyle choices.
- People enjoyed the activities they planned with staff. We saw staff supported people to bake for pleasure. People decided how they wanted to spend their time, so they would continue to enjoy living at the home. One staff member highlighted how much one person liked to spend time locally, going out for coffee. We saw the person was supported to do this, daily.
- Staff gave us examples of the ways they varied how they supported people, so they could do things they enjoyed, safely. For example, some people liked to go horse riding. As people's mobility changed, some people were supported to maintain this interest through horse carriage riding, which they greatly enjoyed.
- Local community groups, such as singers, also provided opportunities for people to maintain their links with the community.
- The home had been registered with CQC before Registering the Right Support guidance and Building the Right Support had been developed. However, we found the care provided included choice, promotion of independence and inclusion. People living with learning disabilities at Tithe Barn were supported to live as ordinary a life as any citizen.

Improving care quality in response to complaints or concerns

- Systems were in place to manage and respond to complaints or any concerns raised, and to drive through any improvements required. We saw complaints processes were available in "easy read" format, to support people to understand how to make a complaint.
- Relatives told us they were confident any concerns or complaints they made would be acted on, but advised us they had not needed to make any complaints because the care provided was good.

End of life care and support

- The registered manager had begun to put systems in place to ensure people's needs at the end of their lives were assessed and planned, so their wishes were respected.

Is the service well-led?

Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

Good: ☐ The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- People living at Tithe Barn liked to spend time with senior care staff.
- Relatives told us they saw senior staff and the registered manager regularly, and found them approachable. One relative said, "The [registered] manager has got it spot on. [Deputy manager's name] also does shifts, we get on well. If I raise anything, they listen."
- Staff were very positive about working at the home. One staff member said, "It's a brilliant place, managers are really supportive, and I enjoy working here."
- The registered manager told us, "I want [people] to be able to enjoy the things they want to do. To be supported by staff who want to support them and for [people] to have a good quality of life."
- Staff understood the registered manager's vision for the quality of care to be provided. One staff member said, "[Registered manager's name] wants the same as us, for [people] to be safe, happy and have the best of everything."

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The home was managed well and people's care needs were met.
- Staff were supported to understand their roles through regular staff meetings and one to one meetings with their managers. We found staff meetings were used to encourage staff to reflect on the care they provided and to focus on developing the home further.
- The provider, registered manager and senior staff checked the quality of the care provided. For example, checks were made to ensure people's medicines were administered as prescribed, to ensure the environment was safely maintained, and people's freedoms respected. The registered manager also evaluated staff had the support they needed. For example, to ensure staff were fully supported during their induction periods. The registered manager gave us examples of action plans put in place to further develop the care provided to people as a result of the checks undertaken.
- The registered manager and senior staff were supported to provide good care, based on best practice standards, by meetings with the provider, attending training and conferences, plus research linked to the needs of people's living at the home.

Engaging and involving people using the service, the public and staff; Working in partnership with others

- People, their relatives and staff had been asked for their views on the service provided, through surveys. We found people's and staffs' feedback had been positive.

- Senior staff advised us surveys were in the process of being sent to other health and social care professionals, and would be used to develop the care provided further.
- Staff gave us examples of suggestions they made for improving people's care, so people would have access to new and fun things to do, and have timely health care. Staff told us their suggestions had been acted on, so people's well-being was maintained.
- The structures put in place by the registered manager promoted effective and timely access to external health professionals, such as GPs, and speech and language professionals. This helped to promote people's physical health and mental well-being.

Continuous learning and improving care

- There was a drive to learn and improve people's care further. Staff were encouraged to take learning from any incidents and to reflect on the standards of care they and other health and social care providers gave, so lessons could be learnt and plans to mitigate future occurrences were put in place.
- The registered manager also reported key events to the provider, such as untoward incidents and complaints, so they could be assured people were receiving good care.