

Devon County Council

Pine Park House

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

The inspection took place on 10 and 12 January 2017. The registered manager received 24 hours notice of our visit so that we could be sure people using the service would be available to talk to when we visited. A previous inspection, on 28 February 2013 found that the standards we looked at were met. The service had been closed between December 2013 and September 2014 due to flooding and repair work.

Pine Park provides respite to a maximum of six people at any one time. The service was set up to provide short breaks for people with a learning disability. Associated conditions includes people living with autism or sensory impairment. There was one person using the service the first day of our visit and two people using the service the second day of our visit. In all, the service provided respite to a maximum of 27 people.

Pine Park has a registered manager who is also the registered manager of New Treetops, which is another respite service run by Devon County Council. 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 received a safe service. No new staff had been employed since 2015 but recruitment practice was in line with Devon County Council recruitment policy. This ensured all checks, to ensure new staff were safe to work in a care environment, were completed.

Staff were knowledgeable about how to safeguard people from abuse and harm. Each person had comprehensive assessments of any risks, such as choking. Those risks were well managed.

The staffing arrangements ensured people were safe and that their planned care could be delivered flexibly and to meet their individual needs.

The premises was well maintained, safe and clean. Bedrooms were adapted to each person for when they were admitted.

Medicines were administered as prescribed, with checks in place to ensure this was done in a safe way. People were supported to manage their own medicines where possible.

The Care Quality Commission (CQC) is required to monitor the operation of the Mental Capacity Act (2005) (MCA) and Deprivation of Liberty Safeguards (DoLS) and to report on what we find. DoLS are put in place to protect people where they do not have capacity to make decisions, and where it is considered necessary to restrict their freedom in some way, usually to protect themselves or others. The service had sought appropriate advice and was meeting people's legal rights in relation to MCA and DoLS.

People commented positively about the food. The menu was varied but flexible, in accordance with

people's preferences and needs. Specialist diets were very well managed.

People's views were sought throughout the day, through their care plan reviews, meetings and through yearly questionnaires about the service. People said they had no reason to complain but they knew how to do so. The standard of communication, and openness of the management, provided people, their family representatives and staff with confidence to raise any suggestion or issue.

People were treated with respect and dignity. People and their family representatives were very complimentary about the care and kindness staff provided. People enjoyed their time at Pine Park. People had a wide range of activities available to them. Friendships with other people using the service were promoted. Staff understood and were able to meet people's needs and wishes.

People's health care needs were met through the well organised arrangements with external health care professionals. This provided a safe service when people were visiting Pine Park and promoted their health when they were back at home

Staff were well trained, supervised and supported. They spoke of their pride in the work they did and how well the service was managed.

People and their family members said the home was very well led. There were quality monitoring procedures in place, through the registered manager and organisation, with regular review.

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.

Recruitment practices ensured only staff who were suitable to work with vulnerable people were employed.

Individual risks were very well assessed and managed.

Medicines were handled in a safe way for people.

There were sufficient numbers of staff deployed to meet people's care and support needs.

People were protected from abuse and harm.

Is the service effective?

Good ●

The service was effective.

People's legal rights were upheld.

People's health care needs were met through effective contact with external health care professionals.

People liked the food and they received a healthy, balanced diet according to their preferences and needs.

Staff were trained, supervised and supported in their work roles.

Is the service caring?

Good ●

The service was caring.

People had made caring relationships with staff and other residents. They were treated with kindness.

People were treated with respect and dignity. Their privacy was upheld.

People's views were sought and listened to.

Is the service responsive?

The service was responsive.

People's care was planned in detail with them and they received person centred care from staff who knew their needs well.

People enjoyed active and interesting lives and their independence was promoted.

People felt confident to raise any concerns or complaints.

Good ●

Is the service well-led?

The service was well-led.

There were systems in place to monitor the quality of the service provided. These included seeking people's views and audits and checks by the registered manager and provider.

There was a strong culture of putting people first. Staff were proud of what they achieved for people.

Statutory responsibilities were being met.

Good ●

Pine Park House

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 inspection took place on 10 and 12 January 2017. The visits were announced. This was because we wanted to be sure people and staff would be at Pine Park when we visited. One adult social care inspector undertook the inspection.

Prior to the inspection we reviewed information we held on our systems. This included reviewing whether any statutory notifications had been submitted to us. A notification is information about important events which the service is required to tell us about by law. We had asked the provider to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. The provider had completed this in August 2016.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We met three people using the service and talked with two people. We telephoned five people's primary carers, which were family members. We looked at the care plans and records of care of two people and one medicine records.

We spoke with five staff members and the registered manager. We looked at records connected with how the home was run, including records of resident and staff meetings. We contacted people who commissioned the service for people but received no responses.

Is the service safe?

Our findings

People and their family members said Pine Park was a safe service. People's family members said, "(My family member) is very safe because staff are very aware of her problems", "It's the only place I feel (my family member) is safe" and "I completely trust them, 100%".

Individual risks were well understood with clear plans in place to minimise any risk. For example, risks relating to mobility, medicines, swallowing, and safety during outings and about leaving the premises without staff support. Any accidents or incidents were reported through the provider reporting systems for monitoring.

People were protected from abuse. Care staff were very clear how they would act if they thought abuse had occurred. For example, telling the registered manager. They also knew they could take concerns to the local authority safeguarding adult's team or the police. The registered manager was clear in their responsibilities of protected people from abuse and harm. For example, there had been one safeguarding alert made by the registered manager for one person's protection. All staff received three yearly training in the safeguarding of adults. The registered manager had ensured the level of training was appropriate to the level they deemed necessary for each staff.

The premises were in a good state of repair with regular maintenance and servicing arrangements in place. Staff said the arrangements for maintenance worked well and a maintenance person visited twice a week. Records showed that servicing and maintenance were well organised through Devon County Council.

The premises was clean and staff had personal protective clothing which they wore to reduce any possibility of cross contamination. The laundry arrangements at Pine Park ensured all bedding and any clothing requiring laundering was done in a safe way.

Medicines were managed according to each person's needs. For example, one person was seen administering their own medicines because they had chosen to do this and knew how to do it safely. Where a different medicine had been prescribed, which they were not used to, staff supported them to take it safely.

Medicines were stored safely, for example, with the room temperature monitored so the medicines were not stored above the recommended temperature. Each person had a medicines file with their photograph, contact details for relevant health care professionals, and any allergies listed. Each page clearly described what the medicine was, when and how it should be taken. For example, for one person their GP had confirmed the medicine could be crushed and taken in yogurt. Two staff checked each medicine record and each medicine when administered. The medicines and records were clear and well organised.

There were enough staff to meet people's individual needs. Where necessary people received one to one staff support. There were two care and support workers for one person during our first visit and two care and support workers for two people during our second visit. In addition were the registered and deputy manager

and on the second day an administrator. The deputy manager said that staffing was flexible around people's needs. Each staff member was contracted to a number of hours but the times they worked were arranged according to who was receiving respite care on a particular date. Each shift included a senior care and support worker. At night times there was one waking and one sleeping staff in the building.

There had been no new staff employed to work at Pine Park since August 2015. Those staff had previously worked within Devon County Council. However, recruitment checks had been completed in line with Devon County Council recruitment policy. For example, Disclosure and Barring Service (DBS) checks. The DBS helps employers make safer recruitment decisions and helps prevent unsuitable people from working with people who use care and support services. The registered manager said there was currently a recruiting ban and so no new staff would be recruited.

There were arrangements in place for emergencies. All staff received fire safety training including practice evacuations. People using the service were also involved in simulated emergencies. This was to see how they would react if the fire alarm was sounded. Each person had a comprehensive personal evacuation plan. Staff were trained in first aid. Since our previous inspection the building had been subjected to flooding and was out of commission for several months. The registered manager described how they managed that emergency. They had ensured people's respite needs were met through the use of other Devon County Council services.

Is the service effective?

Our findings

People's rights were protected.

The 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 at Pine park had consented to their care where they were able to make an informed decision. Where people could not make an informed decision, based on a lack of capacity to do so, an assessment of their capacity had been undertaken. For example, to determine whether they agreed with staying at Pine Park and whether they understood the need for night time monitoring, for example if they needed support to monitor seizures.

The registered manager said that no people's family or representative had Lasting Power of Attorney (LPA) authorised at this time. Where a person did not have capacity and there was no LPA in place the people that knew the person best were involved in making best interest decisions on their behalf. For example, the use of bedrails. Those people included the person's primary carer, (their family) and health care professionals. Each best interest decision was recorded in detail.

People can only be deprived of their liberty so that they can 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 Liberties Safeguards (DoLS).

The provider was following legal requirements in relation to the DoLS. Six of the 27 people who used the service for respite were not free to leave without support because of the risk this would pose to their safety. They were also under constant supervision as part of the care they required, which was a restriction on their liberty. Where people could not consent to the constant supervision applications had been made to restrict their liberty. None of the six applications had yet been authorised. The registered manager understood their responsibility to uphold people's legal rights.

People's nutritional needs were met in a safe way. Meals were chosen in accordance with which people were using the service at any one time. This improved the likelihood that people would enjoy the meals. Staff ordered food via the internet which they said provided flexible food options.

One person was able to tell us how much they liked the food provided. The food options for each day were displayed in pictorial form for people to see. They chose their meal at the time.

For some people eating posed a risk, for example, of choking. Those risks were well understood and managed. We observed one person telling the staff member what level of thickened drink they needed at that time, as this varied. People were encouraged and supported to drink plenty of fluids and eat a

nutritious, healthy diet. One person was due to be admitted for their first respite visit. Their complex dietary needs had been assessed, staff had received specialist training prior to admission, and a previous care worker was to be there to support the Pine Park staff until they felt confident. These measures protected the person.

Staff were considered competent in their role. People's family members described staff as being "On the ball". One said staff were "Very impressive".

Staff received training in accordance with Devon County Council training arrangements and any training needs staff had identified. One staff member said, "They are very good at trying to find training we ask for".

Staff said they were always prompted to undertake training. The timescales for the training were part of a training matrix structure. Update training included all aspects of health and safety and that relating to specific conditions, such as epilepsy and autism. Three staff members were currently undertaking higher qualifications in care.

Staff received on-going supervision and appraisals in order for them to feel supported in their roles and to identify any future professional development opportunities. Staff confirmed that they felt supported by the management team. One said, "Supervision gives a confidential opportunity to get things off your chest".

People's health was well promoted. Records showed that health care professionals were involved in assessment of people's needs and in their treatment. For example, there was an arrangement for a district nurse to visit one person when they were receiving respite at Pine Park. Other health care professionals involved in people's care were occupational health workers and speech and language therapists. The registered manager said that if a person had a routine health care appointment whilst at Pine Park they would ensure this went ahead.

Is the service caring?

Our findings

People were treated with respect and dignity. For example, they were involved in decisions relating to their care and support. Staff asked one person how they wanted their drink thickened on that occasion, as this varied throughout the day. The staff member told us, "(The person) has capacity to make that decision". The person confirmed they were always asked what they wanted. Their independence was promoted and they were treated with respect. Staff members talked about promoting people's independence. One said, "We have always valued promoting independence. It is very rewarding".

One person's family member said how respectful staff were of people's belongings. For example, people's clothes were laundered and their bag packed neatly and in the same manner it was delivered for their respite visit. Staff ensured people's clothing was clean and they could present in a dignified manner.

People were complimentary about the standard of care and caring attitude of the staff at Pine Park. People's family members said, "The staff give their all in their job. They are enthusiastic and genuine" and "A high standard of quality of care". A support worker said, "All the staff work as a team. They get on and are caring people. Clients treat it like a home from home". We observed relationships between people and support workers were very relaxed, with people enjoying jokes and banter. One person said, "I enjoy coming here. I love it". They said they loved having a soak in the bath and the break from home.

People's privacy was upheld. Their records were kept securely and were only available to staff with a need to know the information. One person was able to tell us how support workers ensured their personal care was delivered in a way which they were comfortable with.

People's views were sought throughout their time in Pine Park. This included meetings and care plan reviews. For example, people's rooms were set out how they liked them and the layout was described in their care plan. Views were also sought through a house survey. The registered manager said they were considering holding meetings for people and their family members so their views could be sought in a timelier manner. This was because their survey results were not available to the registered manager for several months.

Is the service responsive?

Our findings

People's care was planned in consultation with them or another appropriate person. For example, one person had a very detailed plan to meet their dietary needs, which was produced in consultation with health care professionals. One person's family member said, "Staff are completely up front so I know exactly where I stand". Each person had a day book in which was written what they had done that day and any information which needed sharing with the person's primary carer (their family).

Care plans were very detailed so that support workers knew what each person needed and wanted and how to deliver that care. For example, one person liked to spend time watching films and soaking in the bath. Care plans were reviewed on a regular basis. A staff member said that a person's key worker would be involved in their care review because they had most in-depth knowledge of the person.

People's family members said how much people enjoyed going to Pine Park. The comments included, "He goes off so happily. He absolutely loves going", "He benefits greatly. He always enjoys himself and returns with a big beam on his face" and "His face lights up when he goes there".

People's lives were enriched through the activities available to them at Pine Park. These included visits to the town centre for shopping, café visits and visits to a donkey sanctuary. A support worker said, "Most people can express what they want to do. Most want to go shopping, Weatherspoon's or Otter nursery. We have been to see the Christmas lights at Beer and Cottley to see the Reindeer".

We saw examples of craft work, such as bunting and poppies made for Remembrance Day. There were photographs of people enjoying carnival night. People said they enjoyed the themed nights, which had included Mexican and Italian nights. People had games, quizzes and television available to them. One person was said to like cooking when they visited Pine Park.

People's respite visits, where possible, were planned so that friendships could be supported. Respite arrangements took into account people's needs and how best they could be met. For example, some people needed structure in their daily lives and some people were happy with more ad hoc arrangements for activities. One person's family member said, "He doesn't show any behaviours of distress when he is there. The staff there are super".

People felt able to take any complaint to the staff or management. People told us, "No reason to complain, but I would be happy to raise any complaint" and "I would be happy to talk to anybody if necessary but it has never arisen". Displayed was a pictorial complaints procedure and forms. People's family members said they did not need to complain because any issue would be dealt with straight away. One person said, "There's always somebody there. They are on (the person's) side and they will always deal with any crisis".

Is the service well-led?

Our findings

The registered manager is also the registered manager of another Devon County Council respite home for people with learning disability. They visited Pine Park two days in each week.

One person was able to tell us they felt the home was well managed. People's family members said the home was well-led. Their comments included, "They go beyond duty". There were several comments about clear and effective communication one person saying, "They always phone and keep you updated".

Information for people using the service stated that the service vision was to keep people safe and independent; to help them when they felt sad or happy, support medical needs and help people make choices. Our inspection found that this was being delivered.

There was a strong culture of putting the person using the service first and providing high standards. One staff member said, "We are a proud team". Staff members said the home was well-led and spoke with enthusiasm and pride in the work they did. One said, "(The registered manager) is no nonsense but she will explain why things need to be done. She listens to staff thoughts about things, such as problems solving". Staff said they felt well supported in their role. The registered manager told us "Staff are encouraged to think outside the box to improve people's (visit)".

People who use the service, their representatives and staff were asked for their views about their care and treatment and they were acted upon. One staff member said, "You could go to the management with anything. They are brilliant". The registered manager said and staff confirmed that the manager operated an 'open door' policy. This helped to bring to light any day to day issues or problems from which solutions were found. For example, deciding which room suited a person the best.

The manager told us that a questionnaire had been sent out to people who used the service and their families in 2016, to gather comments and feedback. The completed questionnaires were not available but would go initially to the County Council who will then give feedback to the service, although this was many months later.

A programme of audits and checks was in place to ensure a safe and effective service. For example, there were regular quality assessment officer audits and monthly meetings with a resource manager to review unit improvement plans at provider level. At service level there were monthly manager audits to check, for example, support plans, finance, housekeeping, medication, health and safety and training. The registered manager said that there were monthly manager's meetings to keep up to date with best practice, which was fed back to the team as appropriate.

The registered manager was meeting their regulatory responsibilities, such as informing us of incidents so that we can monitor risk.

