

## Partnerships in Care (Oak Vale) Limited

# Oak Vale Gardens

### Inspection report

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Date of inspection visit:  
14 May 2019

Date of publication:  
17 June 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

About the service: Oak Vale Gardens is a care home that was registered to provide personal and nursing care and accommodation, treatment of disease, disorder and injury and diagnostic and screening procedures for up to 18 people. It provides support to people who have a brain injury. At the time of the inspection there were 16 people living at the home.

People's experience of using this service:

Oak Vale Gardens is a care home that supports people who have had a brain injury. It aims to support people for a period of two years or less and as such does not consider itself a long term home for people but a treatment centre. People are able to stay there until such a time as they have regained as many skills and independence as possible. If possible, people are supported to visit their family home whilst staying at Oak Vale Gardens or to actively look for a new long term home when ready to move on.

Some people told us that they liked living there and had seen an improvement in their independence and skills due to the treatment and support they had received. Other people could not communicate verbally with us, however their non-verbal communication showed that they felt relaxed and confident around all members of the staff team.

People were protected from abuse and the risk of harm. Staff understood their responsibilities for keeping people safe and reporting any concerns that arose. Risks for individuals were identified and action taken to minimise them. People got their medication on time and as prescribed.

Robust recruitment practices were followed to check staff were suitable to work with vulnerable people. Staff enjoyed working at the home and took pride in supporting people with their everyday lives and to regain skills. They understood their roles and responsibilities and had received training to help them support people safely in line with best practice guidance. There was enough staff available to provide the support people needed.

A multi-disciplinary team worked at Oak Vale Gardens. Staff also worked well with outside professionals in supporting people. Staff said they felt part of the wider team and it was clear from records that the team worked well with other professionals to gain the best outcomes for people living there.

Staff understood and respected people's right to make decisions. Where people had their liberty legally restricted, every effort was made to support the person to take part in decision making. Staff were respectful when supporting people and skilled at changing their approach in accordance with people's individual choices and communication styles.

A clear management structure and experienced registered manager provided good role models within the home and kept a focus on supporting people as individuals to continually improve the quality of their lives.

Rating at last inspection: Good (report published 4 November 2016).

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: ongoing monitoring;

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

## 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 remained safe.

Details are in our Safe findings below.

**Good** ●

### **Is the service effective?**

The service remained effective.

Details are in our Effective findings below

**Good** ●

### **Is the service caring?**

The service remained caring.

Details are in our Caring findings below.

**Good** ●

### **Is the service responsive?**

The service remained responsive

Details are in our Responsive findings below.

**Good** ●

### **Is the service well-led?**

The service remained well-led

Details are in our Well-Led findings below.

**Good** ●

# Oak Vale Gardens

## Detailed findings

### Background to this inspection

#### The inspection:

'We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

This inspection was carried out by an adult social care inspector and an assistant inspector.

#### Service and service type:

Oak Vale Gardens 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 carried out on 14 May 2019 and was unannounced.

#### What we did:

As part of planning the inspection we looked at information the provider had sent us in their 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 any improvements they plan to make. We looked at information we held about the service as part of our ongoing monitoring; including any statutory notifications sent to us by the provider about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send us by law. We also asked the local authority their views of the home.

During the inspection we spoke with two people living at the home, a relative of one person and met with

several other people living there. We spent time observing daily life at the home and people's interactions. We spoke with nine members of staff and with a visiting professional. Following the inspection we emailed commissioners of services at the home and received two replies.

We looked at records including those related to recruitment and training of staff ,audits, medication and care plans for four people.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

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

Systems and processes to safeguard people from the risk of abuse.

- Information on understanding and reporting safeguarding concerns was clearly displayed in the home for everybody to access.
- Policies and procedures were in place to guide staff on recognising and reporting safeguarding concerns.
- Staff received training in understanding safeguarding and said they would always report concerns they had. People told us they felt safe living there.

Assessing risk, safety monitoring and management

- Systems were in place and followed to check the safety of the building and equipment.
- Individual risks for people were assessed and strategies for minimising risks were in their care plan and followed by staff. This included correct use of equipment and following guidelines for supporting people to eat safely.
- Plans were in place for dealing with emergencies and staff knew what action to take in the event an emergency arose.

Staffing and recruitment

- There were enough safely recruited staff working at the home to meet people's assessed needs.
- We observed staff to be unrushed and have time to spend with people meeting their social as well as care needs.
- Staff of different skills were employed or contracted to support people with their recovery. This included social worker, occupational therapist and physiotherapists.

Using medicines safely

- Robust systems were in place for checking medication was safely managed and people received it as prescribed.
- We checked a sample of medication and found it to be stored, recorded and administered as prescribed.

Preventing and controlling infection

- A visitor commented "The home is spotless, no smells." We also observed this during our inspection.
- Staff had access to aprons, gloves, colour coded cleaning equipment and used them when needed.
- A clear system was in place and followed in the laundry room for minimising the risk of cross infection.

Learning lessons when things go wrong

- Significant untoward incidents were recorded and reported.
- A system was in place and followed for auditing such incidents and making sure action was taken to

minimise recurrence.

# Is the service effective?

## Our findings

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

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 we spoke with told us that being at Oak Vale Gardens had improved their quality of life and helped them become more independent.
- People's needs were continually assessed and treatment plans altered accordingly. The results of this were clear in the advancements people had made with regards to managing the effects of their brain injury.
- The provider remained up to date with good practice guidance and the law through working in partnership with other professionals. This included being a key part of the Cheshire and Merseyside Rehabilitation Network and working closely with local hospitals and consultants.

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 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 can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met and found that they were.

- Staff had a good understanding of people's right to make decisions and how to support people who lacked the capacity to do so.
- Robust, clear assessments of people's capacity to make a specific decision were undertaken. A lot of consideration was given to providing the person with the best support and environment for making a decision. If needed the assessment took place over several sessions to support people's decisions making. Clear records were maintained of the pros and cons and the reason why a decision was considered best for that individual.
- Where people required the protection of a DoLS these had been applied for and staff were aware they were in place.

Staff support: induction, training, skills and experience

- One of the people living at the home told us, "Staff are lovely." Throughout the inspection we saw positive interactions between staff and people living at the home. The atmosphere was calm and unrushed with staff spending time talking with people as well as meeting their needs.
- One member of staff told us, "They keep on top of training." Staff all told us they received support from senior staff and the training they needed for their role.
- Training was clearly planned and delivered to meet the needs of people living at the home. Staff knowledge, and the practice that we saw showed that staff had the skills and knowledge to meet people's needs and choices.

#### Supporting people to eat and drink enough to maintain a balanced diet

- One person told us, "Meals are lovely" another person told us that they always had a choice of meals and we observed this during the lunchtime meal. People also told us they could have a drink or snack whenever they wished.
- The chef was knowledgeable about people's dietary needs and went to a lot of effort to ensure people received attractive meals that met their health requirements.
- Information about nutritional needs was recorded in care plans and we saw that staff were knowledgeable about this and followed it when supporting people. For example drinks were thickened to meet individuals requirements.

#### Staff working with other agencies to provide consistent, effective, timely care

- A social worker who worked with the care home said, "It's an integrated team, they can't be more helpful."
- Care records showed that staff worked well with other agencies and health professionals to provide the support people needed.

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

- People were able to personalise their bedroom to suit their needs and choices. One person told us how pleased they were with their bedroom and how it was decorated to suit their personality.
- The building was well planned to meet the needs of people who could not move around independently. There was a lift, plenty of space to use a wheelchair and lifting and bathing equipment available.
- An accessible garden at the rear of the home provided people with easy access to outdoor space. During the inspection we saw people being supported to make use of this.

#### Supporting people to live healthier lives, access healthcare services and support

- One of the people living at the home told us staff, including therapists, had helped them to gain mobility back in some of their limbs and how pleased they were with their progress.
- The provider monitored people's improvements each month and records showed that over a period of time people's physical and mental health continued to improve as a result of the treatment they received.
- Care records showed that people were supported to attend appointments and see relevant health professionals. They also showed that advice given, for example from speech and language therapists, was followed.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence 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; respecting equality and diversity

- Due to people's therapies and health care needs the home had restricted visiting hours. The registered manager told us, and a visitor confirmed that these were flexible if families were unable to visit at set times. We saw that this worked in practice.
- Staff spent time talking with people and socialising with them as well as meeting their support needs. All of the interactions we saw between staff and people living at Oak Vale Gardens were warm and respectful.
- One person showed us their bedroom and staff had taken time to lay their towels, nightwear etc out in way that looked warm and welcoming. The person told us this was usual and it made them feel valued.

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

- One of the people living at the home told us, "You are encouraged to do as much as you can. I make my own decisions."
- Staff routinely offered people choices in a way the person could understand and waited for the person to communicate their reply. Staff understood people's differing communication methods.
- People's views were sought in different ways, this included communication in a way the person understood, using best interest meetings where needed and involving people's families. People's views were listened to and respected.

Respecting and promoting people's privacy, dignity and independence

- One person told us "They tell me what they are doing, they tell me everything."
- People's families were invited to celebrate occasions with them. One visitor explained families were invited for occasions such as Christmas and Easter lunch and said staff put a lot of effort into making these enjoyable occasions for everyone.
- Staff celebrated people's successes with them. One person had recently begun eating again and we saw their face light up at mealtime. A number of staff we talked with were clearly happy to have supported the person to reach this milestone and took pride in the support they had provided.
- One member of staff commented, "There's lot of satisfaction supporting people and when we see people move on and [they] have progressed and you have had a part of that."
- Staff consistently supported people to use equipment that would increase their skills and independence. Therapies provided by all staff helped people to regain skills and thereby increase the control they had over their own lives.
- Throughout the inspection we observed staff interacting with people in a positive, friendly and respectful manner.

## Is the service responsive?

### Our findings

Responsive – this means we looked for evidence that the service met people's needs

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

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Commissioners of the service told us, 'The team are person centred when care planning and family are very much involved.' A member of the care staff team said, "There isn't just one person involved. There are lots, including the person and their family."
- People had detailed assessments of their needs undertaken and care plans were detailed in advising staff on how to meet the person's needs and choices.
- People and their relatives were involved in planning and regularly reviewing the care they received. This included planning for future support to enable the person to move back to their own home or to a find a new, longer term home once their rehabilitation at Oak Vale Gardens was complete.
- People's had busy days and needed rest time as part of their recovery. However, people were also supported with leisure activities including going out to local places and spending time in the garden or playing board games.
- Staff supported people to look at a range of technology that could aid their independence. This included using technology to help at mealtimes or with communicating.

Improving care quality in response to complaints or concerns

- People and visitors told us that they would feel confident to raise a concern or complaint and that they would be listened to.
- Information about how to raise a concern or complaint was clearly available within the home.
- Records showed that complaints were taken seriously, investigated and acted upon.

End of life care and support

- The home was not providing end of life support to anybody at the time of our inspection.

# Is the service well-led?

## Our findings

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

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

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility: Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The service had a registered manager who was knowledgeable about the service and knew people who lived there well.
- Staff and people living there knew the registered manager well and told us they and the rest of the management team were supportive and approachable.
- People received a service based on their personal needs and choices. The support people needed was continually reviewed by all staff.
- There was a clear management structure within the home and wider organisation. Staff understood their roles and how they contributed to providing quality care for people.
- Systems were in place for checking the quality of the service on both an informal and a formal basis. Action plans were compiled and followed when areas for improvements were noted.
- The registered manager was open and transparent about how the home was operating. Notifications of incidents were sent to CQC and if applicable the Local Authority in a timely manner. Ratings from the last CQC inspection were clearly displayed at the home and on the website.

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

- People living at the home and a relative told us their views and opinions were regularly obtained. This included at formal care reviews, informal meetings and in daily life. People said their views were listened to and acted upon.
- One of the people living there told us, "The chef listens. He visits every day, sometimes sits with us, even those who can't talk he will explain, pick things out. Makes an individual effort with everyone."
- Although feedback was obtained from people and their relatives some of this was on an informal basis. We discussed with the registered manager making a record of the consultations carried out with people so there was a clearer audit trail
- The views of staff were regularly obtained via staff meetings and informal walk-arounds and discussions. Staff told us they felt confident to raise issues and queries with senior staff.

Continuous learning and improving care

- Training was provided to staff in specialised areas relating to the people who lived at the home. Training

was monitored by the registered manager to ensure staff were up to date and receiving appropriate training for their role.

- Accidents and incidents were monitored and reviewed for any future learning.
- The provider monitored the service on a monthly basis via visits and a monthly report. Any learning or areas for improvement were noted and acted upon.

Working in partnership with others

- The registered manager and staff worked closely with other professionals to ensure good outcomes for people.
- A number of staff told us they felt a valued member of the multi-disciplinary team within the home.
- The registered manager also worked with outside agencies and partnerships to remain up to date with current best practice and continually improve the service they provided.