

# Parkcare Homes (No.2) Limited

# Stable Cottage

## Inspection report

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Date of inspection visit:

27 August 2019

27 September 2019

30 October 2019

Date of publication:

29 November 2019

## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Stable Cottage is a residential care home providing personal and nursing care to three people aged up to 65 at the time of the inspection. The service can support up to three people who may have learning disabilities and/or autism.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

### People's experience of using this service and what we found.

People enjoyed living at Stable Cottage and were cared for by staff who understood their preferences and were kind.

People's individual risks had been assessed and action taken to mitigate them to ensure people stayed safe.

Staff administered people's medicines safely. Staff provided people with support to have their medicines needed to remain well.

The provider and management checked the quality of care provided and developed action plans to improve people's care.

We found the service met the characteristics of a "Good" rating in all areas;  
For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection.

The last rating for this service was Good [last report published on 19 August 2019].

This focused inspection was brought forward was prompted in part due to concerns received about medicine management and a safeguarding concern. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe section of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Stable Cottage on our 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?**

**Good** ●

The service was safe.  
Details are in our safe findings below.

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

**Good** ●

The service is well-led  
Details are in our well-led findings below.

# Stable Cottage

## 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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the care Act 2014.

#### Inspection team

The inspection team consisted of two inspectors on the 23 August 2019, 27 September 2019 one inspector and Specialist Advisor who is a pharmacist. On 30 October 2019 one inspector and an inspection manager returned to the service.

#### Service and service type

Stable Cottage is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. 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 before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We reviewed information we had received about the service since the last inspection. We sought feedback

from the local authority and professionals who work with the service. We used all of this information to plan our inspection.

During the inspection-

We spoke with two people living at the service and one relative. In addition we spoke with the operations director the deputy manager, and a support worker.

We reviewed a range of records. This included multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has now remained the same. This meant people were safe and protected from avoidable harm.

At this focused inspection we reviewed this key question of 'Safe' because the Care Quality Commission [CQC] had received specific concerns about the management of medicines and medicine administration errors.

### Using medicines safely

- People received their medicines as prescribed.
- When we checked the balance of how many rescue medications were stored at the home they did not tally with the amount on the stock record sheet. We found four bottles of rescue medication but on the stock sheet it stated two bottles. We brought this to the attention of the operations director to rectify.
- We found the medicines were securely stored in a locked cupboard.
- After the inspection, the provider ensured the appropriate staff were trained and assessed as competent to support people with their medicines.

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

- Where safeguarding concerns had been identified, staff worked in partnership with the local authority and others to protect people.
- Since our last inspection one person had chosen to move out of the home, however when we spoke with other people living at the home one person told us. "I like living here." A relative described how they felt their family member was very settled at the home.

### Assessing risk, safety monitoring and management

- People had personalised risk assessments that guided staff on ways to minimise risks as much as possible. For example, each person had a person-centred behaviour support plan to help staff alleviate any anxieties they may have.

### Staffing and recruitment

- Staff were visible around the home, they spent time with people, worked at their pace and didn't rush them. People living at the home described the staff as kind.

### Preventing and controlling infection

- People were protected from cross infection. The home was clean and odour free and staff followed daily cleaning schedules.
- Staff had completed infection control training and used protective clothing such as gloves and aprons during personal care. This helped prevent the spread of healthcare related infections

### Learning lessons when things go wrong

- Accidents and incidents were reported, which the acting manager monitored to see if additional steps were needed to keep people safe, and to identify any trends.

# 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.

At the last inspection this key question was rated as Good. At this inspection this key question has now remained the same.

This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality person-centred care.

Since our last inspection the registered manager had left their post. The provider had arranged for temporary management cover from their other establishments, whilst they recruited a new manager.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Staff felt supported by the management team in providing good care. Staff told us "I enjoy working here at Stable Cottage.". Staff told us they had regular staff meetings and could ask the acting managers for support.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider and management team understood their responsibilities to notify us of any changes to the services provided or incidents which affected people who lived at the home.
- Quality auditing procedures had been reviewed and new procedures implemented, with grater oversight by senior management.
- A relative we spoke with told us they felt the home was making improvements.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- We saw the management and provider had sought the opinions of people and their relatives using the service through customer satisfaction questionnaires. We saw all the responses received were positive.

Working in partnership with others

- The management team worked with, specialist healthcare services and local authority commissioners to continually improve the service. This enabled people to access the right support when they needed it and we saw working collaboratively had provided staff with up to date professional guidance.

