

Parkcare Homes (No.2) Limited

Wigginton Cottage

Inspection report

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Wigginton
Tamworth
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27 November 2019

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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

Wigginton Cottage is a residential care home providing accommodation and personal care to eight younger people who have a learning disability. The provider specialises in providing care and support for people who have Prader-Willi syndrome. Prader-Willi syndrome is a rare genetic disorder that results in a number of physical, mental and behavioural disorders.

People at the home have their own bedroom and had access to bathrooms, a lounge, dining area and a kitchen. A garden at the rear of the property was accessible to people.

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

Three out of four people told us they did not feel safe living in the home because of the behaviour of one person. The provider was aware of this and had taken action prior to our inspection visit to ensure people's safety. The risk to the individual was assessed and a risk assessment put in place to mitigate the risk. People were cared for by sufficient numbers of staff who had been recruited safely. People were supported by staff to maintain hygiene standards within the home. The provider was able to demonstrate when things went wrong that action was taken to avoid a recurrence.

The provider had systems in place to monitor the quality of service provided to people. There was a clear management structure in place and people knew who was running the home. People who used the service had the opportunity to be involved in the running of the home. The provider was able to demonstrate they engaged with other agencies to ensure people received a seamless service.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them

having as many opportunities as possible for them to gain new skills and become more independent.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Good published (18 April 2019)

Why we inspected

We received concerns in relation to the management of medicines and people's care needs. As a result, we undertook a focused inspection to review the Key Questions of Safe and Well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other Key Questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those Key Questions were used in calculating the overall rating at this inspection.

The overall rating for the service is Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Wigginton Cottage on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re inspection programme. If we receive any concerning information 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service well-led?

The service was always well-led.

Details are in our well-Led findings below.

Good ●

Wigginton 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 one inspector.

Service and service type

Wigginton 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. The registered manager was not present during our inspection visit.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

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 the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information

helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with four people who used the service about their experience of the care provided. We spoke with two staff members, the operations director and two healthcare professionals.

We reviewed a range of records. This included one person's care records and multiple medication records. We looked at four staff files in relation to recruitment and staff supervision. We also looked at a variety of records relating to the management of the service, including quality audits.

After the inspection

The registered manager sent us documents that were not accessible to us during our inspection visit.

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 remained the same.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Three out of four people we spoke with told us they did not feel safe living in the home. We found one person who lived at the home had recently become anxious and required support with their behaviour. The provider was aware of the negative impact this had on other people. The provider was able to demonstrate what action they had taken to support the person and others.
- One person told us, "If I was sad I would speak to the manager or the senior." They said, "I feel safe here because of the lovely surroundings and I am able to do what I like."
- Staff demonstrated a good understanding about how to recognise abuse and how to safeguard people from this. Staff were aware of external agencies where they could share concerns of potential abuse to protect people.

Assessing risk, safety monitoring and management

- Risk assessments were in place to mitigate the risk of harm to people.
- One person required support to manage their behaviour. A staff member told us that even though they had not read the risk assessment they were provided with a detailed handover from a senior staff about how to safely manage the person's behaviours.
- At the time of our inspection visit a positive behaviour support specialist was carrying out an assessment on the person who had recently required support to manage their behaviour.
- We observed that personal emergency evacuation plans were in place. These told staff about the level of support the person would require to leave the building in an emergency.

Staffing and recruitment

- People were supported by sufficient numbers of staff who had been recruited safely.
- People told us staff were always available to support them when needed.
- One person told us they had been allocated hours to receive one to one support from staff. They told us this level of support was always provided. We spoke with two other people who also confirmed they received their allocated hours for one to one support.
- A staff member told us there were always enough staff on duty and people were provided with the support they needed.
- People's involvement in staff recruitment ensured they had a say who worked with them.

Using medicines safely

- People were supported by skilled staff to take their prescribed medicines.

- We observed medication administration records had been signed accordingly to show when medicines had been given out.
- Written protocols were in place for the use of 'when required' medicines. These are medicines prescribed to be given only when needed. For example, for the treatment of pain.
- We observed medicines were stored securely and in accordance to the pharmaceutical manufacturers instructions.

Preventing and controlling infection

- People were supported by staff to maintain the hygiene of their home. We observed all areas of the home was clean and tidy. One person told us they received one to one support to clean their bedroom and to do their laundry.
- Staff told us they had access to essential personal protective equipment (PPE) such as disposable gloves and aprons. The appropriate use of PPE should help to reduce the risk of avoidable infections.
- Staff told us they had received infection, prevention and control training and the records we looked at confirmed this.

Learning lessons when things go wrong

- Discussions with the operations director identified where they had suddenly experienced concerns about a person's behaviour, action was taken to safeguard both the person and others. On the day of our visit we observed several healthcare professionals providing both the person and staff with support.
- A staff member told us, "When things go wrong we deal with it very quickly." Another staff member told us, "When things go wrong the management are very supportive."

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 remained the same.

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

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider had systems in place to monitor the quality of service provided to people.
- Audits were in place to review and monitor the hygiene standards within the home. We observed the fridge temperature where medicines were stored were regularly monitored.
- Audits were in place to review and monitor the management of medicines.
- Meetings with people who used the service and staff enabled the provider to find out about the service delivery and where improvements may be needed.
- There was a clear management structure in place and people who used the service and staff were aware of who was running the home. One person who used the service described the registered manager as, "A lovely manager." Another person told us, "The manager is brilliant."
- A staff member told us, "The management support is very good, and the registered manager is supportive."

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

- Staff told us about the current concerns regarding the recent behaviour of one person who used the service and the impact this had on others. However, one staff member described the culture of the home as, "A happy atmosphere." They told us they would be happy for their loved one to live in the home.
- One person who used the service expressed their concerns about being assaulted by a person who lived at the home. However, they told us, "It's really good living here and I enjoy it."
- We observed the home was warm and friendly. However, some people who used the service appeared tensed with regards to one person's presence due to their recent behaviours. The provider was taking action to improve this.
- We found care plans and risk assessments were person centred to reflect the individual's specific needs.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- Discussions with the operations director confirmed they were aware of the duty of candour and we found they had taken immediate action when things went wrong, and people were at risk of potential harm. With regards to the recent behaviour of one person which had an impact on others. The provider had engaged the support of the GP, positive behaviour support practitioner and informed the local authority safeguarding

team of these concerns.

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

- People were encouraged to have a say about how the home should be run.
- People told us monthly meetings were carried out. One person said, "We discuss any repairs needed, health and safety, menu choices, social activities and to find out if everyone is happy."
- One person told us that during these meetings they were listened to. For example, they told us they had raised concerns that the dryer was not working, and the provider purchased a new one.
- A staff member told us some people did not have the confidence to speak in these meetings and would write their views down instead.
- People who used the service had been allocated hours where they received one to one support. All the people we spoke with told us these hours were often used to go out into their local community. This enabled them to have links with their local community.

Continuous learning and improving care

- The provider had systems in place to obtain people's and staff views and used this to improve the quality of service provided.

Working in partnership with others

- The provider worked with other professionals to ensure people received a seamless service. This included mental health nurses, GPs, advocates and social workers.