

Pathways Care Group Limited

The Knoll

Inspection report

115 Southchurch Boulevard
Thorpe Bay
Southend On Sea
Essex
SS2 4UR

Tel: 01702586684

Date of inspection visit:
25 April 2018
26 April 2018

Date of publication:
24 May 2018

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 25 and 26 April 2018, it was unannounced and carried out by one inspector.

The Knoll is a 'care home without nursing'. People in care homes receive accommodation and personal care as a 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 is registered to provide care and accommodation for up to seven people who may be living with a learning disability, mental health condition and/or physical disability. There were seven people living in the service on both days of the inspection. The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice and promotion of independence. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

At the last inspection, the service was rated good and at this inspection, we found the service remains good.

There was a registered manager in post. 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 safe care and support. Staff knew how to support people and protect them from the risk of harm. The service had a safe, robust recruitment system and employed sufficient numbers of staff to meet people's assessed, and changing needs. There was a good medication system in place and the records were of a good standard. Staff had been trained and had their competency to administer medication assessed. People received their medication safely as prescribed. Infection control measures were in place and staff were trained and demonstrated a good knowledge of infection control procedures. The environment was well maintained, clean and hygienic.

People's needs had been fully assessed and their support plans updated when their needs changed. Staff were well trained and received formal and informal supervision and knew how to care for people effectively. People had a choice of sufficient food and drinks, which they had helped to shop for and people chose what they wanted to eat and drink on a daily basis. Staff ensured people's healthcare needs were met. They worked well in partnership with other professionals to ensure that people received the healthcare they needed.

The service worked in line with other legislation such as the Mental Capacity Act 2005 (MCA) to ensure that people had as much choice and control over their lives as possible. Appropriate assessments had been carried out in line with legislation. Where people were deprived of their liberty, the service had made appropriate requests for authorisation. People's independence was encouraged and supported while

minimising risks to help keep them safe.

Staff were kind and caring and listened to what people had to say. They treated people with dignity and respect and ensured they had the privacy they needed. People and their families were kept fully involved in decision-making. Advocacy services were available if needed. An advocate supports a person to have an independent voice and enables them to express their views when they are unable to do so for themselves.

People received personalised support that was responsive to their needs. They had good community links and enjoyed a range of indoor and outdoor activities. The support plans and daily notes were detailed and informative. There was a good pictorial system in place for dealing with complaints and people had confidence that their complaints would be dealt with appropriately.

People and their families knew the registered manager well and had confidence in them. Staff felt well supported by the registered manager and discussed issues with them on a daily basis. There was an effective quality assurance system in place. The service recognised the need for improvements and ensured people received a good quality service. Confidential information was stored safely in line with data security standards.

Further information is in the detailed findings below.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

The Knoll

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 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.

The inspection took place on 25 and 26 April 2018, was unannounced and carried out by one inspector.

Before the inspection, the provider completed 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. We also reviewed information that we hold about the service such as safeguarding information and notifications. Notifications are the events happening in the service that the provider is required to tell us about. We used this information to plan what areas we were going to focus on during our inspection.

We spoke with four people, one family member, a visiting healthcare professional, the registered manager and four members of staff. We reviewed four people's care files and four staff recruitment and support records. We also looked at a sample of the service's quality assurance systems, training records, medication system, staff duty rotas and complaints records.

Is the service safe?

Our findings

At this inspection, we found the same level of protection from abuse, harm and risks to people's safety as at the previous inspection and the rating remains good.

People told us they felt safe and we saw they were relaxed and happy. One person said, "I am really happy here and the staff make sure I am safe." A visiting family member told us, "I am so happy with my relative's care and support. I know they are kept safe and well cared for. My family now have peace of mind." There were systems in place to safeguard people, staff were trained and demonstrated a good knowledge of safeguarding procedures. One staff member said, "It is my job to keep the people I care for safe and if I had any worries I would report these to the social services or CQC." Safeguarding records showed the service had taken prompt action to protect people from the risk of abuse.

There were personal risk assessments in place for a range of identified areas that included community access, behaviour, nutrition and preparing drinks and snacks in the kitchen. Staff knew the people they supported well and how to manage risks to their health and safety. They had been trained in fire safety and first aid and knew to call the emergency services if needed. There was an emergency contact list pinned to the office wall, which all staff were aware of. People had detailed fire evacuation plans and regular fire drills had taken place. Safety certificates for the electrical, gas and water systems were up to date. The building was well maintained and records showed that repairs were carried out in a timely way.

Staffing levels were good. There were four support staff on duty during the day and the registered manager worked Monday through until Friday. People told us there were always enough staff and the duty rotas confirmed this. Support staff carried out household tasks such as cooking and cleaning, together with people who used the service. The registered manager had a robust recruitment process and had completed all of the appropriate checks to ensure staff were suitable to work with vulnerable people.

The medication system was good and two members of staff administered and signed for medication. We saw they administered medication in an encouraging and supportive manner allowing people the time they needed. Staff had been trained, and records were of a good standard. There was guidance and information available to support staff to ensure that people received their medication as prescribed.

The registered manager had infection control policies and procedures in place and the service was clean and tidy. Visitors told us the service was always fresh and clean. We saw that staff wore protective clothing when supporting people.

Staff knew to report accidents, incidents and near misses and understood their responsibilities to record them. The registered manager told us they monitored accidents and incidents and shared their analysis with staff to ensure that lessons were learnt and measures put in place to prevent re-occurrences.

Is the service effective?

Our findings

At this inspection, we found staff had the same level of skills, experience and support as they did at the previous inspection and the rating remains good.

People had lived at the service for a number of years so their pre-admission assessments had been archived. However, we could see from the support files that people had on-going assessments to ensure that the service continued to meet their needs. People and their families had been fully involved in the assessment and care planning process. People's preferences were detailed in the support files and they had been updated as and when their needs changed.

Advocacy services were available should people need them and they had been accessed in the past. They help ensure people are not discriminated against on any grounds such as their protected characteristics under the Equality Act. People were able to have visitors when they wished and visitors told us they were always made to feel welcome and we witnessed this throughout our visit.

People felt that staff were well trained and the records confirmed that staff received a wide range of training that was appropriate for their role. Staff told us that they were satisfied with the training they received. One staff member said, "We mainly do learning on the computer (e-learning) and are tested to show that we have understood it, then a manager from another service checks our answers." Staff had the knowledge, skills and experience to deliver effective care and support.

Staff said they felt supported by the registered manager and supervision had taken place, however not as regularly as stated in the service's policy. The registered manager told us they had plans to improve the level of supervision and was in the process of developing an appraisal system. Staff said they saw the registered manager every day and were able to, and had, discussed any issues or training needs informally. This showed that staff were supported and the registered manager had recognised the need to improve their recording of discussions.

People told us they liked the meals and that they had enough food and drink to meet their needs. One person said, "I really like the food here. It is shepherd's pie today, which is one of my favourites. We can have what we want to eat and we decide if we want our dinner at lunchtime or in the evening." We saw the mealtime experience was pleasant and people enjoyed their food and drink. Where staff supported people to eat their meals, they did so in a sensitive and unhurried manner.

People received appropriate healthcare support. They told us they saw their GP when needed and were helped to attend hospital appointments. A visiting family member said, "The staff are very quick to recognise that my relative needs health support in any way. They make sure they get the help they need as soon as possible." The records showed that people received the healthcare support they needed.

The registered manager and staff worked well in partnership with other organisations to ensure that they delivered effective care and support. They knew the people they supported very well and demonstrated

good communication when liaising with other professionals such as district nurses, GP's, social workers and hospital staff.

The building suited people's needs, as there was plenty of space for them to have some privacy when they wanted it. We saw that people's personal space was decorated to their individual tastes. Their bedrooms contained many personal belongings and people told us they were happy with their rooms. There was good secure outside space with a choice of two garden areas, one had a nice shaded place where people could sit and enjoy the sunshine.

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation 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 or authorisations to deprive a person of their liberty were being met.

Staff had a good understanding of how to support people to make decisions. Mental capacity assessments had been completed to ensure that decisions were made in people's best interests in line with legislation. Appropriate DoLS applications had been made to the local authority. People had signed their support plans and we saw and heard staff asking people for their consent throughout our visit.

Is the service caring?

Our findings

At this inspection, we found people continued to be supported by kind, caring and compassionate staff and the rating remains good.

People said that staff treated them well. They told us they were treated respectfully by staff who were kind and caring. Visitors said that there was a consistent staff team and that they were always respectful, kind, treated people with dignity and respected their privacy. One visiting family member told us, "The staff here are all brilliant. They make sure that my relative has all that they need and are very kind and caring." A visiting healthcare professional confirmed that all of the staff were nice and welcoming and that they were always respectful when talking with people. The atmosphere was good, with laughter and friendly banter throughout our visits.

Staff demonstrated a strong person centred culture. For example, they approached people in a friendly way, smiling and engaging with them using the individual's preferred method of communication. We could see that people had confidence in the staff as they responded positively throughout their interactions with them. People and their families were kept involved in decision-making. We saw that people were asked for their views throughout our visits and the records showed that resident's meetings had been held.

People were encouraged to maintain their independence. They were supported to access the local community, choose their own shopping and carry out household tasks. For example, one person said they regularly went out shopping and helped choose the food. People said staff helped them to tidy their room, do their laundry and make a drink or snack. People looked well cared for, were happy and relaxed and they told us they liked living in The Knoll.

Is the service responsive?

Our findings

At this inspection, we found that people continued to receive personalised, responsive support that met their individual needs and the rating remains good.

People's support plans were developed from their original assessment and had been regularly reviewed and updated. People and their families were fully involved in the process. The support plans were detailed and informative and provided staff with the information they needed to support people correctly. Staff knew people well and there was information about their history in the support files. For example, staff were able to tell us about people's personal likes, dislikes and preferences. They knew where people liked to go and how and where they liked to spend their time. People said they had known staff for a 'long time', and that staff knew what they liked. This showed that staff and people knew each other well and staff were able to respond quickly to people's changing needs.

People enjoyed a range of activities both in the service and in the local community. The service had a mini-bus available for travel and people said they liked going out for rides, shopping, to college and to the seafront. People told us they played bingo, watched films, played board games and took part in Zumba (dancing to music) classes. This showed that people had access to the local community and participated in activities that suited their individual need and choices. A visiting family member told us about a visit to an allotment where people were enjoying a fireworks display but one person was getting distressed at the loud noises. They told us that a staff member supported the person to return to the mini-bus where the noise was much quieter so they became less distressed. This showed that staff were responsive to people's individual needs whilst ensuring that other's needs continued to be met.

People had access to new technology. One person regularly used a games console; others had computer tablets and had the use of a desktop computer when they attended college. Another person regularly used an on-line communication tool to keep in touch with a family member.

People told us they would tell staff if they had any concerns or complaints. A visiting family member told us that they would feel comfortable complaining about their loved one's care and support and that the registered manager and staff listened to them and took any concerns seriously. There was a good complaints policy and procedure that was also in a pictorial format to aid people's understanding of the process. Although there had been no written complaints, there was a system in place to log and analyse them for any trends. The registered manager told us they would discuss any complaints at staff meetings to ensure that lessons were learnt and improvements made.

Although there were no end of life care and support plans in place, none of the people living at The Knoll were nearing end of life. However, the registered manager had devised a suitable document to record the information. They told us that they would be discussing the support plans together with people and their families to ensure that people received the support they needed when the time came.

Is the service well-led?

Our findings

At this inspection, we found the service still provided people with a well-led good quality service and the rating remains good.

There was a registered manager in post and people knew them well. They had good relationships with people's families and friends and offered them support when needed. We saw people reacted positively and were very comfortable when interacting with them. Visitors told us the registered manager was highly visible and always available should they need to discuss anything. We saw this during our inspection with a visiting family member and a visiting healthcare professional, as conversation flowed freely between them, and the registered manager was responsive to their requests. One visiting family member said, "I am so happy with the care and support my relative receives. The service is top notch. Staff know how to care for them and they are much healthier and happier since moving here. I would recommend this service to anyone." The registered manager told us their vision was to provide people with good quality, person centred care while encouraging their independence in a homely environment.

Staff told us they felt the service was well-managed. They had confidence in the registered manager, shared their vision and felt well supported through both formal and informal supervision. One staff member said, "I see the registered manager every day and we always discuss any issues when they happen. I don't need to wait for a supervision session." The staff we spoke with had worked at the service for some time and said they were very happy with the way it was run.

The service worked well in partnership with other organisations such as GP's, psychiatrists, social workers and hospital staff. One visiting professional told us they had visited the service for years and that staff worked with them to provide people with the healthcare they needed.

There were clear safeguarding, whistle blowing and complaints procedures in place and staff knew how and when to apply them.

The service sought the views of people who used the service, their relatives and other interested parties. People had completed quality assurance surveys in 2017 and the registered manager had analysed the responses and taken appropriate action where required. Regular quality audits of the service's systems and practices had taken place to ensure that quality was maintained. The registered manager made continuous improvements to ensure people received a good service.

People's confidential information was protected and their personal records were stored securely in locked cabinets. There were policies and procedures for dealing with confidential data. Staff had received training in confidentiality and were aware of the new General Data Protection Regulations (GDPR) that come into effect on 25 May 2018.