

The Norfolk And Norwich Association For The Blind

Thomas Tawell House

Inspection summary

CQC carried out an inspection of this care service on 12 November 2018, 13 November 2018 and 16 November 2018. This is a summary of what we found.

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?	Requires Improvement ●

The inspection at Thomas Tawell House was undertaken on 12, 13 and 16 November 2018. The first day of the inspection was unannounced.

Thomas Tawell House 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.

Thomas Tawell house is a care home supporting people living with visual impairments. The home was designed to support the independence of people living there. The home was a large one-story building with communal areas to allow people opportunity to have varied spaces in which they could relax, dine, undertake activities and even host events.

The home was registered to support 37 people, at the time of the inspection there were 24 people living in the home. Following the last inspection, the provider had taken the decision not to admit any further people to the home until improvements had been made. Shortly before this inspection new people had begun to be placed at the home.

Thomas Tawell had a registered manager who had been in post for approximately six months. 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.

At the last inspection we found six regulations to be in breach of the Health and Social Care Act (Regulated Activities) 2014. The home was found to be inadequate in the key questions of safe, responsive and well led and to require improvement in the key questions of effective and caring. The home was rated as inadequate overall. Since the last inspection there has been a change in the management structure of the home with a newly appointed registered manager and deputy in place. The nominated individual has also taken on a more proactive role in ensuring the service improved. The provider had recruited a consultancy company who had supported the service and had introduced basic and emergency plans including risk assessment and care planning to ensure people were kept safe.

Since the introduction of the new registered manager these were to develop and become a more comprehensive assessment tool which in turn would feed into more person-centred care plans. Work had begun to put this in place. We found the new management team including senior managers and the board members motivated and committed to continually drive improvement at the home.

Previous breaches had been found in regulations associated with staff and we had concerns about both the number of available staff and the training and support staff had received. We had concerns around how risks were assessed and mitigated and how restrictive practice had been assessed for people who lacked capacity. We found breaches in the regulation associated with person centred care and found people were not involved as they should be with deciding their care. We found their preferences had not been met once they had moved into the home. We also found a lack of dedicated and appropriate activities. We had concerns that complaints procedures were not accessible to people and complaints had not been handled appropriately or recorded. Lastly, we had concerns around how the provider had monitored the service delivered and the accuracy of any monitoring undertaken as it had not been effective at identifying concerns.

A consistent approach to service improvement had been adopted since the last inspection. A comprehensive action plan had been provided to the Care Quality Commission following the last inspection and we were given an up to date one at the start of the inspection. This showed us ongoing systems were in place to identify, discuss and action any concerns or issues. The new registered manager had come into post after the initial support of the consultancy company ensured standards did not continue to worsen. This immediate and ongoing approach to take action to address concerns, had been sustained and had improved provision. This inspection found the provider had met all the identified breaches of the last inspection in November 2017.

As part of this inspection, we have made two recommendations to support the continued improvement of new systems and procedures as they were developing. We have recommended, people's care needs and associated risks were more frequently reviewed and care planning and assessment tools become more inclusive. The registered manager had taken steps to address this by the end of the inspection. The second recommendation has been given to ensure that the current system of monitoring and audit continued to develop and allow any analysis to identify themes and trends. This in turn would focus ongoing development where it was most needed.

This inspection found there were enough staff on duty, at all times. Staff had been safely recruited and were motivated and supported to deliver good quality care and support. People living in the home told us the support they received was appropriate and met their needs. People's nutritional and hydration needs were met with steps taken to provide additional support as required.

People were supported with their mobility and appropriate equipment and support was provided as required. Where people lacked the capacity the principles of the Mental Capacity Act were followed and best interest decisions were made to ensure appropriate consent was provided. Those living with capacity were involved and agreed with the development and changing of care plans used to support them. People are supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice.

Medicines were managed and administered safely and people told us they felt their preferences were respected and their health and wellbeing was promoted. Where people had complained these had been managed and successful outcomes had been provided. People were given choices and a programme of specific and appropriate activities were provided.

Staff who worked directly with people in the home showed us personable relationships had begun to embed and it was clear they considered people's needs throughout their day.

We saw risks had been assessed of the environment and all health and safety aspects of the service had been considered and risks managed. This included professional testing of equipment and ongoing monitoring of the service provided.

Meetings were held with both staff, people living in the home and relatives and everyone we spoke with told us they were kept informed and felt involved in decisions made in how the home was run. There was a system of audit and quality assurance that gave the management team information they needed to drive improvement in provision at the home.

You can ask your care service for the full report, or find it on our website at www.cqc.org.uk or by telephoning 03000 616161