

Kisimul Group Limited

Tigh Calman

Inspection report

Wisbech Road
Thorney
Peterborough
Cambridgeshire
PE6 0TD

Tel: 01733271312
Website: www.kisimul.co.uk

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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:

Tigh Calman is a care home providing accommodation and personal care for up to six people in an adapted two storey building. It provides a service to younger adults and people living with autism and a learning disability. At the time of our inspection there were six people using the service.

Peoples experience of using this service:

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. People were kept at the centre of their support and all the decisions made about their care. Staff and managers had a passion for promoting people's independence. There was a focus on supporting people to live their lives free from restrictive practices. People were supported to celebrate their achievements and achieve good outcomes.

People were supported to be independent in a safe way. Trained and competent staff managed and administered people's prescribed medicines. We observed staff wore their personal protective equipment (PPE) correctly and systems were in place that promoted good infection prevention and control. Lessons' were learned when things went wrong, and learning was shared across the staff team.

Staff knew how to keep people safe and communication strategies were in place for people to be able to raise any safeguarding concerns. Staff were safely recruited and there was a robust process to ensure there was always enough staff. The manager told us how unplanned staff absences were covered.

The service did not have a registered manager in place. However, the manager had applied to be a registered manager. They were supported by the provider's health and safety, compliance and management teams. They knew their responsibilities and had developed a positive, open and honest staff team culture. Quality assurance processes and governance systems were effective in driving improvements.

The manager worked well with others to provide people with joined up care and support. The staff team promoted the provider's equality and diversity policies and treated people equally well. The manager and staff team supported people to have a say in how the service was run.

Why we inspected:

The inspection was prompted in part due to concerns received about risks to people's safety and the

management of the service. A decision was made for us to inspect and examine those risks.

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.

This focussed inspection looked at the Safe and Well-led domains. The overall rating for the service has remained Good. This is based on the findings at this inspection.

Rating at last inspection

The last rating for this service was Good (published 11 September 2018). At our focused inspection in December 2020 we looked at infection prevention and control procedures only, but we did not provide a rating.

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

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, 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?

Good ●

The service was safe.

Details are in our Safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our Well-led findings below.

Tigh Calman

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 was planned to check 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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was undertaken by one inspector.

Service and service type:

Tigh Calman is a care home. People in care homes receive accommodation and nursing or 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 did not have a manager registered with the Care Quality Commission (CQC). However, the manager had applied to the CQC to be a registered manager. This means that the provider is 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. We gave the service a short period of notice. This was to ensure it was safe for us to enter the premises.

Inspection activity took place between the 20 May and 26 May 2021. We visited the service on 20 May 2021 to see the manager.

What we did before this inspection:

The provider completed 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 checked the information we held about the service and the provider, such as notifications. A notification is information about important events which the provider is required to send us. We used this information to assist with the planning of the inspection.

We sought feedback from the local authority and professionals who work with the service. No concerns were reported.

During the inspection:

We spoke with the manager, three care staff, a social worker and two relatives. We looked at various records, including risk assessments for two people, as well as other records relating to the running of the service. These included one recent staff recruitment file, supervision planning records, training records, medicine administration records and audits. We were not able to speak with people who used other communications, so we sought information from the manager, staff and relatives.

After the inspection

We requested the manager send us records for staff recruitment, people's pastimes and hobbies and to clarify people's risk management plans. This information was provided in the timescales given.

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. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded by trained staff who understood how to recognise and report any concerns to the appropriate authorities including the local safeguarding authority and the Care Quality Commission.
- Staff knew when to alert the manager who then took appropriate actions. One staff member told us, "If I identified or suspected any type of abuse, I would report this to my senior. I know I can call the manager."
- Staff effectively supported people to remain safe by using calm language or other known strategies people responded well to including a favourite pastime or going outside for exercise. A relative told us, "Since my [family member] started using the service, they have come a long way. Staff know exactly what any triggers for behaviours are and how to prevent these."

Assessing risk, safety monitoring and management

- Health care professional's advice to manage risks was implemented and acted upon including for any behaviours which could challenge others.
- The manager and provider identified risks and managed these by creating risk assessments and ensuring that these were understood and followed by the staff team
- Staff received support with training and shadowing experienced staff regarding how to manage risks safely.
- One relative told us of the difference staff had made to their family member by supporting them with their health conditions. The relative said staff responded quickly and calmly and their family member was safe.

Staffing and recruitment

- Staff were recruited safely and the process and checks in place ensured only suitable and staff were employed. One staff member said, "I did not start work until my criminal records check (DBS) came back clear. I had two weeks work experience at the service to ensure I fitted in."
- The manager based the level of staffing and support to people on their needs. They deployed staff to ensure people had their care and support at a time most suited to the person. We found that staff support to people was based on the person's needs.

Using medicines safely

- Trained and competent staff administered people's medicines as prescribed when this was needed.
- One relative said, "I know my [family member] has their medicines. When I visit, they tell me staff are nice to them and help them if they have had [health condition]."
- Medicines administration records were accurate and provided a clear record. Audits of these records helped ensure safe practises were adhered to and actions taken if there were any errors.

Preventing and controlling infection

S5□How well are people protected by the prevention and control of infection?

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using personal protective equipment (PPE) effectively and safely.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured that the provider was accessing testing for people using the service and staff.
- The provider had systems, procedures and policies in place that helped promote good standards of infection prevention and control (IPC).
- Staff had enough PPE, they used this effectively and disposed of it safely. One relative told us, "The staff make sure we wear PPE when visiting, make sure our COVID-19 rapid test result is negative and promote social distancing in a separate building before we can meet [family member]."

Learning lessons when things go wrong

- There were systems in place to identify when things had gone wrong. Lessons were learned, shared amongst the staff team and improvements were put in place to prevent further occurrences. One staff member said, "We are supported in a positive way if we identify an issue. It is good that we can all then learn to prevent any other occurrences."
- A social worker told us how effectively the manager had implemented changes to a person who was new to the provider's care and this had prevent recurring safeguarding incidents.

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. This meant 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

- The service did not have a registered manager, but their application to become a registered manager was in progress. The manager understood their responsibilities, and they discharged these in a professional manner. They and the provider had notified us about events such as, safeguarding incidents and actions taken to prevent recurrence.
- The manager was clear about their expectations for staff to report mistakes, incidents and any matter that had the potential to impact the quality of people's care. One staff member said, "[Manager] is very good at listening. They then take whatever actions are needed. I feel very supported because of this."
- The openness of the manager and staff had led to an honest team culture. One staff member told us about the mechanisms for support to address any issues or ideas including one to one supervisions, observations of care practises and various meetings such as handovers at a shift change.

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

- The manager and their support team were passionate about always looking for ways to make improvements. They implemented effective changes such as, in the ways they had got to understand and know people.
- A social worker had praised staff for their commitment to people and their families was above and beyond anything expected. A relative also praised staff for their selfless attitude and willingness to go the extra mile. This had led to the person and their family being able to have photographs and memories after a long period of separation during the pandemic.
- Everyone we spoke with told us that support was well organised and responded to their needs well. One relative told us how their family member had grown into a confident person who was much more independent.
- Staff felt supported, worked as a team and were devoted to their role, and shared passion to make people's lives as meaningful as possible. One staff member told us the manager came up with suggestions to improve people's care and acted on suggestions from people's relatives.

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

- People and their relatives or representatives had a say in how the service was run. People's views were sought in a variety of ways depending on the ways they communicated.

- Compliments from health professionals, the provider and relatives had helped change working practises in a positive way. Positive examples of this included staff supporting people to access the community in ways such as looking after animals and visiting a boating lake.
- The manager completed observations of staff's care practices. This was to ensure staff responded to each person's individual needs and to make any reasonable adjustments were needed.

Continuous learning and improving care

- The manager shared good practice with the staff team including guidance for reduction in physical restraints and medicines administration. Lessons were learned and actions taken if areas for improvement following an incident were found.
- An open and honest staff team culture had been developed and this aided better learning. One staff member said, "When I notice a change in a person's independent living skills, I always feed this back to the manager. Every little thing we do can make a huge difference."
- Relatives told us how much more settled and calm their family member had been and how much staff had done to minimise the potential for behaviours which could challenge others by implementing improvements.

Working in partnership with others

- The manager worked well with others including health professionals, social workers and the local authority's safeguarding team. One social worker told us how effective staff's response had been in enabling a visit by a person's family after almost 18 months due to the pandemic.
- Guidance and involvement from health professionals was promptly sought and fully implemented. Systems were in place to check that these were effective in improving people's lives. Another social worker had informed the provider how impressed they had been due to joined up working leading to good outcomes for one person.