

Ultima Care Centres (No 1) Limited Chatsworth Grange

Inspection report

Hollybank Road		
Intake		
Sheffield		
South Yorkshire		
S12 2BX		

Date of inspection visit: 14 August 2018

Good

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Tel: 01142358000

Ratings

Overall	rating	for this	service

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

This inspection took place on 14 August 2018 and was unannounced. This was the first inspection of this service since the provider changed in June 2017.

Chatsworth Grange is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

Chatsworth Grange can accommodate up to 66 people who require accommodation and nursing care. The home consists of one adapted building which is split into four separate units across three floors. The home has a garden which surrounds the property. At the time of our inspection there were 61 people using the service.

There was a registered manager employed at Chatsworth Grange. A registered manager is a person who has registered with the CQC 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 living at Chatsworth Grange told us they felt safe. There were enough staff available to care for people safely and we observed staff provide care to people in a timely way.

Staff were kind and caring. They treated people equally and promoted people's cultural and spiritual needs. People were very positive about the staff at Chatsworth Grange and the care they received.

Staff completed a thorough induction and received regular training to support them in their roles. Staff had been provided with safeguarding vulnerable adults training and they had a good understanding of their responsibility to protect people from harm.

There were effective procedures in place for the safe management and administration of medicines. People received their medicines as prescribed.

People's needs were assessed before they moved into Chatsworth Grange and their care was reviewed to help make sure they always received the correct level of care and support. People were supported to have maximum control and choice over their lives and staff supported them in the least restrictive way possible. Policies and systems in the service supported this practice.

People were supported to maintain their health and access a range of community healthcare professionals whilst living at Chatsworth Grange. People received medical attention when needed.

People's complaints were recorded and responded to, in accordance with the provider's complaints policy.

The registered manager encouraged staff to learn lessons from any complaints received, to try to ensure similar incidents did not occur.

People, their relatives and the staff all spoke highly of the registered manager. Staff told us the registered manager was always available if they needed support.

The registered manager and staff completed regular audits of the service, to make sure action was taken and lessons learned when things went wrong. This meant systems were in place to support the continuous improvement of the service.

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.

There were sufficient numbers of staff deployed to meet people's needs.

There was a clear procedure in place to support staff to recognise and respond to any allegations of abuse. Staff had received training in this area and understood how to keep people safe.

Any incidents and accidents were recorded and analysed. This helped the service to learn from them and prevent similar incidents occurring.

People received their medicines safely, from trained and competent staff.

Is the service effective?

The service was effective.

Staff were provided with an induction, relevant training and regular supervision to give them the right skills and knowledge to support people.

People were supported to maintain a varied and balanced diet. The service worked closely with a wide range of health and social care professionals to support people to maintain their health.

The service was working within the principles of the Mental Capacity Act 2005. Staff had received training in this area and understood what it meant in practice.

Is the service caring?

The service was caring.

People and their relatives told us the staff were kind and caring. They were overwhelmingly positive in the comments they made about staff. Good

Good



People were treated as individuals. Their choices and preferences were respected. During this inspection we observed staff respect people's privacy and dignity.	
Staff spoke with knowledge about people's needs and their likes and dislikes. People living at Chatsworth Grange had developed warm relationships with staff.	
Is the service responsive?	Good
The service was responsive.	
People's care records accurately reflected their needs. People and their relatives were involved in planning and reviewing their care and support. This supported staff to provide person centred care.	
The service had an effective complaints policy in place. People's complaints were appropriately recorded and responded to.	
People were happy with the activities on offer. Some people's relatives felt there could be more activities provided to keep people entertained and occupied throughout the day.	
Is the service well-led?	Good
The service was well-led.	
People, their relatives and the staff said the registered manager was approachable. The staff felt supported by the registered manager and they told us they enjoyed their jobs.	
The provider had effective quality assurance systems in place to identify any issues and rectify them.	
People and their relatives were asked for their feedback about the service. The registered manager analysed this feedback to help drive improvements to the service.	



Chatsworth Grange 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.

This inspection took place on 14 August 2018 and was unannounced. This meant nobody at the service knew we were coming. This was the first inspection of Chatsworth Grange since the registered provider changed in June 2017.

The inspection team consisted of two adult social care inspectors, a specialist advisor and an expert-byexperience. The specialist advisor had clinical experience of nursing care. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service. The expert-by-experience had experience in caring for older people and people living with dementia.

Before this inspection we reviewed information available to us about the service. The registered manager had completed a Provider Information Return (PIR). The PIR is a form that asks the registered provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed safeguarding alerts and notifications submitted to us by the service. A notification is information about important events that the registered provider is legally required to send us. For example, where a person who uses the service suffers a serious injury. We took this information into account when we inspected the service.

Before this inspection we contacted social care commissioners who help arrange and monitor the care of people living at Chatsworth Grange, community healthcare professionals who visited people living at Chatsworth Grange and Healthwatch Sheffield. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. No concerns were raised by any of these organisations about the care and support provided to people living at Chatsworth Grange.

During this inspection we spoke with eight people living at Chatsworth Grange and 12 of their relatives. We

also spoke with 17 members of staff which included six care assistants, four nurses, three domestic assistants, the cook, the maintenance person, an activity coordinator and the registered manager.

People who lived at Chatsworth Grange used a variety of ways to communicate. During our inspection, we used a method called Short Observational Framework for Inspection (SOFI). This involved observing staff interactions with people in their care. SOFI is a specific way of observing care to help us understand the experience of people who could not talk with us.

We looked at five people's care records, a selection of medication administration records and three staff files which included recruitment checks, supervisions, appraisals and training records. We also looked at other records relating to the management of the service, such as quality assurance audits.

We spent time observing the daily life in the service. We observed care and support provided in communal areas and we looked around the building to check environmental safety and cleanliness. This enabled us to determine if people received the care and support they needed in an appropriate environment. With their permission we also looked in several people's bedrooms.

Every person we spoke with who lived at Chatsworth Grange told us they felt safe. Comments included, "I feel very safe as the staff look after me really well. When I get up [out of bed] they come with a hoist and lift me into my wheelchair. There is always two of them and they are really careful and reassuring", "This is a very safe place" and "I am safe".

Most people's relatives had no concerns about their family member's safety. Comments included, "My relative is very safe here. The staff are brilliant. They haven't had any falls at all since they've been here", "They are very safe here" and "I come in at all different times, so I would notice straight away if something wasn't right, but it's not like that. The staff are really careful with people and I know my relative is safe. Believe me, they wouldn't be here if I didn't think that." However, a few relatives told us they did have some concerns about their relative's safety as they felt there should be more staff available to support people.

Staffing levels were sufficient to keep people safe. The registered manager used a dependency tool to calculate the number of staff required to meet peoples' needs. The dependency levels were recalculated by the registered manager at appropriate intervals, so they could arrange sufficient numbers of staff for each shift. During this inspection, staff were visible and available to meet people's needs promptly. People told us, "I would say mostly there's enough around [staff] to help", "They come quite quickly. They don't keep me waiting", "During the day, they are always around so if you want anything you can just tell them. At night I don't often need any help, but they come quickly if I do" and "I don't wait long for somebody to come and help me".

Most relatives told us there were enough staff. Comments included, "I don't think they are short staffed. The staff are really good, but I suppose everyone could do with an extra pair of hands" and "They are not short staffed, at least from what I've seen". A few relatives felt there should be more staff on each shift. Staff told us staffing levels were sufficient to keep people safe and meet people's needs in a timely way.

Recruitment checks were completed to help make sure the staff employed at Chatsworth Grange were assessed as suitable to work at the service. Recruitment records evidenced that an application form had been completed, at least two references had been obtained and checks had been made with the Disclosure and Barring Service (DBS). A DBS check provides information about any criminal convictions a person may have. This information helps employers make safer recruitment decisions. The registered manager also checked each nurse's professional registration to ensure they were fit to practice.

One staff member's application form did not include the applicant's complete employment history. We discussed this with the registered manager during the inspection and they confirmed this error would be rectified and would normally have been dealt with during interview. We were satisfied the service's usual recruitment procedures were safe.

The provider had appropriate systems in place to safeguard people from abuse. Staff had been trained in their responsibilities for safeguarding adults and knew what action to take if they witnessed or suspected

abuse. The registered manager knew when incidents or allegations of abuse should be reported to the local safeguarding authority and to the CQC. The records we viewed evidenced this was being done appropriately.

Medicines were obtained, stored, administered and disposed of safely by staff. People received their medicines as prescribed by their GP. During our inspection we observed the nurses administering medicines to people in a patient, calm and professional manner. Appropriate policies and procedures were in place to support staff to manage and administer medicines safely. Staff were trained to administer medicines and their competency was checked.

Systems were in place to identify and reduce risks to people. People's care records included detailed assessments of specific risks posed to them. The risk assessments were reviewed each month or more frequently if a person's needs changed. They were person centred and provided staff with clear guidance on how to support people to manage the identified risks.

The provider had a system in place to learn from any incidents or accidents. This reduced the risk of them reoccurring. The registered manager kept a record of any incidents and accidents, such as when someone had a fall. They reviewed and analysed the records every month to identify any trends and common causes. Any identified trends were discussed in staff meetings to raise awareness amongst all staff, so appropriate action could be taken by the staff team to prevent incidents from reoccurring.

Chatsworth Grange was very clean and the service had an appropriate infection control system in place. People living at Chatsworth Grange had no concerns about the cleanliness of the home. The staff followed cleaning schedules and had access to personal protective equipment, such as gloves and aprons. Regular checks of the building were carried out to keep people safe and the home well maintained.

People's needs were assessed before they moved into Chatsworth Grange, to check the service was suitable for them. People living at Chatsworth Grange and their relatives were very positive about the care they received. Comments included, "They are very good. They help me to get dressed and they are very gentle" and "I am very happy here". A relative commented, "It's very nice here and I'm more than happy with my relative's care."

People were supported to access community healthcare services whilst living at Chatsworth Grange. People's care records evidenced the service had made appropriate referrals to health professionals when required. Any advice given to people by community health professionals was recorded in the person's care plan and staff were guided by this when supporting people to maintain good health. Staff told us they worked closely with healthcare services. A health professional who provided feedback about Chatsworth Grange prior to this inspection told us, "On the occasions that I have visited, staff at different grades have been welcoming and helpful and knowledgeable about the residents."

Staff received regular training to help them develop the skills and knowledge required to deliver effective care. Staff were required to complete a range of training courses which the provider considered to be mandatory. Staff told us they were happy with the training offered by the home. The registered manager monitored the training that staff completed, to make sure each staff member's training remained up to date.

Staff received effective supervisions which supported them to deliver care in line with best practice. Supervisions are meetings between a manager and staff member to discuss any areas for improvement, concerns or training. The supervision records evidenced that staff received supervisions and an annual appraisal in accordance with the provider's supervision policy. Staff told us they felt able to talk openly with their manager if any issues arose or if they required any guidance, and they therefore felt adequately supervised and supported.

People were supported to maintain a balanced diet. People were asked about their dietary needs and food preferences when they moved into Chatsworth Grange and they were provided with a range of good quality food and drinks in accordance with their preferences. Where people required a special diet, this was catered for and was clearly recorded in their care plan. Most people were complimentary about the food options at the home. Comments included, "The food is good. I really like the breakfasts here. You can have anything you want. Sometimes I have bacon and egg and sometimes I might just have porridge", "I think the food is alright, but we don't get enough meat or fish. I'd love a bit of steak, but we'd never get that. They do a lot of chips but they're always very greasy, so I ask for mashed potatoes instead which isn't a problem" and "There are a few different things at lunchtime. They ask you what you want."

During our inspection we observed the lunch service. People were supported to eat in the dining room or in their own rooms, according to their preferences. There was a relaxed atmosphere throughout the meal time and people were offered a choice of two meals and various drinks. Staff supported people in a calm and

dignified manner. A relative told us, "They [staff] are very patient with [relative] and they record everything they eat in the daily log." We spoke with the cook and they were knowledgeable about people who required a special diet and thickened fluids.

Most people residing at Chatsworth were living with dementia. The design of the premises was suitable for them and the environment supported people to navigate their way around the building. Bedroom doors were painted in different colours to look like 'front' doors, handrails were easy to identify as they were painted a contrasting colour to the walls and there were clear pictorial signs on the doors to the lounges, dining areas and toilets. The corridors were wide and easy to negotiate and people's bedroom doors contained a sign with their name and photo on so people could find their own room.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who 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 capacity to take particular decisions, any decisions 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 procedures 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 they were complying with conditions placed on authorisations.

The registered manager was making appropriate applications for deprivation of liberty authorisations, for people who required them. People's care records demonstrated the service was complying with conditions placed on authorisations. Staff had completed MCA training and during the inspection we saw staff asking for consent when providing care to people. People's care records evidenced their mental capacity had been considered and assessed, where appropriate, and any best interest decisions were clearly recorded.

People living at Chatsworth Grange and their relatives spoke very positively about the staff. People commented, "They are marvellous", "They're all very nice to us", "They are smashing", "They are very kind", "They are lovely people" and "If I'm feeling really down, one of the girls will always come and chat to me and listen to me." People's relatives told us, "The staff are fantastic. I come every other day and I've seen nothing but kindness towards people here" and "They're fantastic. They got to know [my relative] and they can pick up on their mood."

All staff we spoke with said they would be happy for a family member or friend to receive care at Chatsworth Grange. Staff told us they enjoyed their jobs and they were proud to work at the service.

Staff knew people living at Chatsworth Grange very well. Each person had a key worker and a named nurse who was able to spend time getting to know them. Staff described good relationships with the people they supported and they spoke with knowledge about people's needs and preferences.

People were treated as individuals and their choices and preferences were respected. Staff were trained in equality and diversity. At the time of this inspection there was nobody living at the service who practised a particular religion, however people living at Chatsworth Grange and their relatives told us they were able to discuss any needs that were associated with their culture and religion with staff. People told us they felt they were treated fairly and were free from discrimination.

People and their relatives were involved in planning and reviewing their care. One person told us "I tell them exactly what I want or don't want" and a relative commented, "It's been very hard because I never wanted [relative] to move into a home at all, but the manager here has been great. They are really kind and reassuring and have made sure that I have been involved from the word go in the care plan." This practice supported staff to provide person centred care to each person living at the home.

Staff were respectful of people's privacy and dignity. They knocked on doors and called out before they entered bedrooms or toilet areas. All staff had received mandatory training in dignity and respect and we observed staff to be kind and respectful throughout this inspection. The service also had systems in place to ensure people's personal information remained confidential. Care records were securely locked away so they could only be accessed by staff who needed to see them.

Relatives and friends were encouraged to visit people living at Chatsworth Grange. During the inspection we observed staff welcoming people's relatives into the home in a friendly manner and we could see staff knew the visitors well. Relatives told us they were made to feel welcome. One commented, "The staff here are really good. They try their best and visitors are made welcome as well. When I come, I stay for most of the day and I don't always come at the same time. Families do get involved here. For example, they're having a summer fayre in a couple of weeks and we've been donating things for raffle prizes."

The staff communicated well with people's families. Relatives told us, "Communication is really good. They

tell us straight away if [relative] is off colour or anything" and "They are good at communicating with us. They will always get in touch with us if [relative] isn't well or they are worried about them at all. They do involve us all the time." Where people did not have any family or friends to support them, the registered manager had information available for them about advocacy services. An advocate is a person who would support and speak up for a person who does not have any family members or friends to act on their behalf.

Is the service responsive?

Our findings

People's care plans accurately reflected their needs and the different levels of support they required from staff. People's life histories were recorded, which included information about their family and friends, significant events in their life and their likes and dislikes. This information helped staff to provide person centred care to each person.

People's support plans were reviewed each month or sooner if their needs changed. This helped to make sure people consistently received the correct level of care and support. Each person's care plan reflected their physical, mental, emotional and social needs. Care records were sufficiently detailed to guide staff's care practice.

People's communication needs were identified and recorded so staff knew whether people needed to be provided with information in a particular way. Staff considered using different tools that might assist people to communicate. For example, they used a whiteboard to communicate with a person with a hearing impairment. This helped to ensure people were given the information they needed, to remain actively involved in making decisions about their care.

People were happy with the activities at Chatsworth Grange. People took part in a range of activities according to their personal preferences. The service organised activities such as pamper sessions, exercises, puzzles and music and film sessions. We observed people had access to reading materials throughout the day. People told us, "I can do what I want. I love reading and I have my paper everyday", "They are ever so kind. Sometimes one of them will come in and sing with me. I love to sing, so they make sure that the music is on all day" and "We have a lovely singer who comes and he gets everybody joining in. He's really good."

Most people's relatives were positive about the activities on offer. Comments included, "My relative was always very sporty. The staff know that, so they make sure their TV has the sports on, whenever it's shown. They chat to [relative] about any football matches or athletics. It's a lovely place here" and "They are brilliant here with activities. They have musical activities and my [relative] has had hand massages as well, which I know they enjoy." A small proportion of relatives felt there were not enough activities on offer.

The provider supported staff to learn lessons from any complaints received, to help drive improvements to the home. The provider had a compliments, concerns and complaints policy which explained how people and their relatives could complain about the service and how any complaints would be dealt with. The registered manager kept a record of all formal complaints made, including details of how the complaint had been resolved. The complaints records evidenced that all complaints received had been investigated and a response had been provided in accordance with the policy. The registered manager discussed any complaints received with the staff in staff meetings. This supported staff to reflect on any issues raised and to make changes to their practice to try to prevent similar issues arising in the future.

The provider had appropriate systems in place to support people at the end of their life to have a comfortable, dignified and pain-free death. When people moved into the service they were asked about how

they would like to be cared for at the end of their life. One person commented, "I went through everything with them. They know all my preferences and they know what I want when I come to the end. My main wish is to die here."

A relative told us, "When my relative first came here, we went through everything. We talked about all of their likes and dislikes and also about their end of life wishes. It seemed a bit morbid at the time, but it was a good thing to do so everybody knows what they want and who to involve. The doctor went through it with us as well and was very kind." Promoting these early discussions allowed staff to support people to have a comfortable, dignified and pain-free death, in accordance with their own wishes.

There was a registered manager employed at Chatsworth Grange. A registered manager is a person who has registered with the CQC 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.

Staff said the registered manager was very supportive and approachable. Comments included, "[Registered manager] is very good and very supportive", "[Registered manager] is approachable. I feel it's a very well-run home", "[Registered Manager] is brilliant. They're firm but fair and always around" and 'I am well supported by the manager."

People living at Chatsworth Grange and their relatives provided positive feedback about the registered manager. One relative commented, "The manager is very good. I'd give them 12 out of 10. They roll their sleeves up and muck in. If they're in their office, the door is always open. They are often around the home seeing what is going on and checking things. You can always talk to them if you need to."

The registered manager and the staff monitored the quality of the service. Action was taken when issues were identified to drive improvements to the service. For example, the nurses reviewed people's weights every month to look for any signs of weight loss and enable immediate action to be taken. This meant they could be assured people were receiving the care they needed. They also audited a sample of care plans every month and completed a thorough audit of the medication administration system. Where audits identified something could be improved, an action plan was created and the registered manager checked the identified improvements had been made. This meant audits helped to drive improvements to the quality of the service throughout the year.

The registered manager completed a daily "walk-around" of the home every morning. This involved the registered manager looking at a selection of records, checking the home's environment and speaking with people living at Chatsworth Grange to check they were happy with everything or if they needed to raise any concerns. This provided people living at the home with a regular opportunity to provide feedback about the service.

People's relatives had been asked for feedback earlier in the year, via a satisfaction survey. The registered manager had analysed the responses to the survey to assess what areas of the service needed improving. As a result of the survey responses, the registered manager arranged additional feedback to be obtained from people living at Chatsworth Grange about various issues such as the activity provision and the food. The feedback was gathered by the activity coordinators and was used to develop the food menus and to tailor the activities on offer to people's individual preferences. The registered manager also arranged relatives' meetings so family members could be kept informed about any changes to the service. These meetings provided further opportunity for relatives to provide feedback about the service.

Regular staff meetings took place where the registered manager raised any issues with staff about the home

or the care provided. Staff were also given opportunity to provide feedback about the service. The minutes of the staff meetings evidenced that the service placed an emphasis of learning lessons from any mistakes. The staff team worked well together and morale amongst the staff was positive.

The staff team were supported to provide consistent care and work collaboratively with each other. They had regular opportunities to discuss people's care. A daily meeting took place where staff were updated on various issues such as whether anyone new had moved into the home, whether any health professionals were due to visit the service that day, what activities were due to take place and whether there were any issues on each unit that staff needed to be aware of. The staff told us they found these meetings effective.

The registered manager was aware of their obligation to submit notifications to CQC. Evidence gathered prior to the inspection confirmed that notifications had been received.

The provider had a range of policies and procedures in place, covering all aspects of the service provided. They set out what was expected of staff when caring for people and they were compliant with the law and current good practice guidance.