

Icon Care Ltd

Chamwood

Inspection report

2 Upwell Lane
Sheffield
South Yorkshire
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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

About the service:

Chamwood is registered to provide accommodation and personal care for up to eight people with a learning disability or autistic spectrum disorder. The service also supports people who need support with alcohol or drugs misuse. At the time of the inspection there were seven people living at the service.

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:

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. People had individual risk assessments in place, so staff could identify and manage any risks appropriately.

Safeguarding procedures were robust and staff understood how to safeguard people. Systems were in place to make sure managers and staff learned from events such as incidents, concerns and investigations. The provider completed pre-employment checks for new staff, to check they were suitable to work at the service.

Staff respected people's privacy and dignity and spoke to people with understanding, warmth and respect. There were enough staff to ensure people's care and support needs were met. Staff had undertaken training which was regularly updated to ensure they had the skills and knowledge to support people effectively.

Medicines were managed safely at the service. The service was clean and had a welcoming homely atmosphere.

People's needs were assessed, and care was planned in a way which met people's individual needs. People were supported with their health and dietary needs, where this was part of their plan of care. People were offered choices of what they preferred to eat.

People made positive comments about the staff and were satisfied with the quality of the care and support provided. People were encouraged to raise any concerns or worries they had.

People were encouraged and supported to engage in activities within the community. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

Staff made very positive comments about the staff team and registered manager. People told us the service was managed well. We received positive comments about the registered manager. People told us they were approachable, friendly and proactive at dealing with any issues that arose.

There were planned and regular checks completed at the service to check the quality and safety of the service provided.

Rating at last inspection:

At our last inspection Chamwood was rated good (report published 9 June 2017).

Why we inspected:

This was a planned inspection based on the previous rating.

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 any concerning information is received we may inspect sooner.

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

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 effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well led.

Details are in our well led findings below.

Good ●

Chamwood

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by an inspector and an assistant inspector.

Service and service type:

Chamwood is a 'care home'. People in care homes receive accommodation and nursing or personal care. The Care Quality Commission (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.

Notice of inspection:

This inspection was unannounced.

What we did:

Before this inspection we reviewed the information we held about the service, which included correspondence we had received and any notifications submitted to us by the service. Statutory notifications are information the registered provider is legally required to send us about significant events that happen within the service. The provider was not asked to complete 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 contacted social care commissioners who help arrange and monitor the care of people living at

Chamwood. We also contacted 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. We used all of this information to plan our inspection.

We spoke with four people living at the service. We spoke with three support workers. The registered manager was not working on the day of our inspection. The registered manager provided us with records following the inspection.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed. We spent time observing the daily life in the service and we looked around the building to check the home was safe and clean.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at training and supervision data and records relating to the safety of the service.

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

- Systems were in place to safeguard people from abuse. People were supported to raise any concerns with staff.
- Staff had undertaken safeguarding training and were knowledgeable about their roles and responsibilities in keeping people safe from harm.
- Each person had a 'Herbert Protocol'. The Herbert Protocol is a form is designed to make sure if someone goes missing, the police can get access to important information about that person as soon as possible.
- We found there were satisfactory arrangements in place for people who had monies managed by the service. Some people living at the service managed their own monies and used a safe in their rooms to store valuables.

Assessing risk, safety monitoring and management

- There were effective systems in place to assess, monitor and mitigate the risks relating to the health, safety and welfare of people who used the service.
- People's care records included assessments of specific risks posed to them, covering areas such as their physical and mental health.
- Care plans contained appropriate guidance for staff about how to support people to reduce the risk of avoidable harm.
- Risk assessments were regularly reviewed or more frequently if a person's needs changed.
- Regular checks of the building and the equipment were carried out to keep people safe and the building well maintained. We saw some large containers of washing detergent and softener had not been stored appropriately. Following the inspection, the registered manager confirmed they were now being stored in a locked cupboard.

Staffing and recruitment

- There were enough staff to keep people safe and meet their needs. During this inspection, we saw staff were available to meet people's needs in a timely manner.
- Staff said there were enough staff to support people effectively. People told us there were enough staff deployed to meet their needs.
- The provider completed pre-employment checks for new staff, to check they were suitable to work at the service.

Using medicines safely

- Medicines were managed safely at the service. People were receiving their medicines as prescribed. Staff kept records about what medicines they had administered to people and when.

- Staff who administered medication had received training and their competency had been checked.
- Some people were prescribed medicines to be taken as and when required, known as PRN medicines. We saw PRN protocols were in place for medicines that had been prescribed to be taken when required.
- Regular checks of medicines were undertaken to identify any issues and improve the management of medicines.

Preventing and controlling infection

- Chamwood was clean overall and the service had a daily cleaning schedule. We saw some areas within the kitchen needed cleaning. For example, the ovens in the range cooker and the cooker vent. We shared this information with staff. Following the inspection, the registered manager confirmed they had arranged for these to be cleaned.
- Staff had access to personal protective equipment (PPE) such as gloves and aprons. We saw staff using these appropriately during the inspection

Learning lessons when things go wrong

- The service had a process in place for staff to record accidents and untoward occurrences. These occurrences were monitored to identify any trends and prevent recurrences where possible.
- Staff handovers and team meetings were used to discuss learning points from incidents and changes to people's care plans, so people were supported safely.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's physical, mental and social needs were holistically assessed before they started using the service. Protected characteristics under the Equality Act were considered. For example, people were asked about any religious or cultural needs so these could be met.
- People we spoke with made positive comments about the care and support provided.

Staff support: induction, training, skills and experience

- Staff induction procedures ensured staff were trained and knowledgeable about the people they supported.
- Staff were supported to undertake the Care Certificate. The Care Certificate is an identified set of standards that health and care professionals adhere to in their working life.
- Care staff had received specialised training to meet the needs of the people who used the service such as supporting people who had behaviour that could challenge others and Parkinson's disease.
- Staff told us they were well-supported by the registered manager; they received regular one-to-ones and appraisals.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported with their health and dietary needs, where this was part of their plan of care.
- People participated in the planning of menus for the service. People we spoke with made positive comments about the food provided at the service. People accessed the kitchen area to make themselves drinks and food. Two people had a fridge in their rooms to store food and drink.
- People were offered a varied diet and were provided food from different cultures.

Staff working with other agencies to provide consistent, effective, timely care

- The service had clear processes for referring people to other services, where needed.
- The service worked closely with health professionals to support people's health needs. For example, the local GP and district nurses.

Supporting people to live healthier lives, access healthcare services and support

- In people's records we found evidence of involvement from other professionals such as the tissue viability nurse and neurologist.
- Some people had a hospital passport. A hospital passport provides key information about a person with a learning disability. The passport also includes important information about how a person communicates and their likes and dislikes, which can be crucial when they are first admitted to hospital.

- There was a system in place to track people's different appointments particularly when the person has complex needs.

Adapting service, design, decoration to meet people's needs

- There was a spacious communal lounge, activities room and dining kitchen for people to use. People's bedrooms were based on the ground floor and first floor, accessed by stairs. All the bedrooms had an en-suite and there was a communal bathroom for people to use.

Ensuring consent to care and treatment in line with law and guidance

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 to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- The service was working within good practice guidelines.
- People had signed to indicate their consent to their care plans.
- Staff described how people were promoted to be as independent as possible and to make decisions for themselves.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

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 supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- Staff were sensitive to times when people needed support. It was clear from our discussions with staff that they enjoyed caring for people living at the service and they found it rewarding.
- Staff gave positive feedback about the caring nature of the service and the quality of care and support provided. Staff gave constant thought and consideration to promoting inclusivity.
- People told us the staff were kind and caring. Comments included, "The staff are great," "If I'm struggling I go straight to staff and they come, they do loads for me" and "I trust them and they trust me, I'm happy."

Supporting people to express their views and be involved in making decisions about their care

- Care plans contained information for staff on how people expressed their views and how to support them to be involved in making decisions about their care.
- We observed staff interacting with people and found they offered choices and respected people's decisions.

Respecting and promoting people's privacy, dignity and independence

- People and staff felt respected, listened to and influential.
- We observed staff respecting people's dignity by knocking on bedroom doors prior to entering.
- People were encouraged to be as independent as possible. People's achievements were celebrated by the staff.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control:

- Staff knew people well and were able to ensure they received person centred care which met their needs.
- We looked at a sample of care plans and found they reflected the care and support people required. We noted some people did not have an oral care plan in place. We shared this feedback with the registered manager and they told us this would be put in place.
- People's care plans and risk assessments were regularly reviewed. People's risk assessments and care plans showed how people may behave when they were well or when they maybe becoming unwell. Care plans gave guidance to staff in how they should respond to promote wellbeing.
- Staff handovers enabled information about people's wellbeing and care needs to be shared effectively and responsively. The service provided an on-call service for staff to contact if they needed assistance and advice.

Improving care quality in response to complaints or concerns

- The registered manager kept a record of complaints received. The service had received one complaint since the last inspection. This showed appropriate actions had been taken.
- The complaints process was displayed in the main reception area.
- People felt comfortable to raise concerns with the registered manager and staff. People's comments included, "I would speak to [support worker] if had anything to say or needed anything" and "[Registered manager] is great and if I had any problems I would speak to her."

The provision of accessible information

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were identified, recorded and highlighted in care plans.
- There was easy read and pictorial documentation available at the service for people to look at.
- One person described how staff communicated information to them. They said, "If there is anything I don't understand I ask them [staff] and they talk to me like I want to be spoken to, not using big words."

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to follow their interests and take part in activities, including activities in the community. Two people regularly went to a community hub to take part in activities such as arts and crafts

and cooking.

- People were encouraged and supported to develop and maintain relationships with people that mattered to them.

End of life care and support

- There was no one receiving end of life care at the time of our inspection. People's wishes and preferences had been explored and were included in their care plans.

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; Continuous learning and improving care

- We observed a positive, welcoming and inclusive culture within the service.
- The service had an open culture. Staff were committed to providing person-centred care and learning from any incidents.
- The registered manager had a range of audits in place to ensure the service met the standards expected by the provider. Staff meetings took place to review the quality of the service provided and to identify where improvements could be made.

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

- People told us the service was managed well. We received positive comments about the registered manager. People told us they were approachable, friendly and proactive at dealing with any issues that arose.
- Staff were clear about their roles and knew when to raise things with their manager. Staff told us the registered manager was very supportive.
- Staff told us there was a good team of people working at the service and they worked effectively as a team.
- The registered manager was aware of their obligations for submitting notifications in line with the Health and Social Care Act 2008.

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

- We saw evidence that the registered manager actively sought people's views by sending out surveys and holding resident meetings at the service.
- The nominated individual carried out regular checks at the service. During these visits they spoke with people and any visiting relatives to obtain their views about the quality of care provided. They also spoke with staff to obtain their views.
- The service had developed strong links within the community such as district nurses, the local GP and community hub.