

Community Homes of Intensive Care and Education Limited

Sandsground

Inspection report

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Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service effective?	Good ●
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Is the service caring?	Good ●
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Is the service responsive?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

About the service

Sandsground is a residential care home providing personal care to five people with a learning and physical disabilities. The care home accommodates five people in one ground floor building.

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.

There were deliberately no identifying signs, intercom, cameras, industrial bins or anything else outside to indicate it was a care home. Staff were also discouraged from wearing anything that suggested they were care staff when coming and going with people.

People's experience of using this service and what we found

Not all the people living in Sandsground were able to directly tell us their experiences of living in the service. One person said they were happy living in the home. Interactions we observed showed people were relaxed with staff, expressed themselves freely and were supported in a kind and caring way.

Feedback from relatives and a social care professional was positive. Staff understood people's needs and the registered manager was keen to develop and support a stable staff team so that people received consistent support on a long-term basis. Staff vacancies were being filled and there were recruitment checks in place so that new staff were suitable to support the people in the service.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

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 were encouraged to make daily choices, which included how they spent their time and the meals they ate.

People took part in a range of activities both inside the home and in the community. People, where possible, or their relatives, knew how to make a complaint and we saw these were dealt with effectively.

Medicines were managed safely. People were supported in line with their care plans which meant risks to people were effectively managed.

Regular auditing took place to inform where improvements may be required. Staff confirmed they received support and training to carry out their roles effectively.

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

Rating at last inspection The last rating for this service was good (report published 26/09/2017)

Why we inspected

This was a planned inspection based on the previous rating.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below

Sandsground

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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Sandsground 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 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 inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with one person about their experience of the care provided. We spoke with the assistant regional director, registered manager, assistant care manager and the cook.

We reviewed a range of records. This included one person's care records and their medicine records. We also briefly viewed sections of a second person's care 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.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two relatives on the telephone to gain their views on the service and one social care professional emailed us with their comments about Sandsground.

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.

Staffing and recruitment

- There were enough staff to support people safely. There were four staff vacancies, with two of these posts having been recently recruited to. The registered manager confirmed agency staff worked in the home to cover some shifts. These had been regular agency staff, so they were familiar with the needs of people using the service.
- Relatives commented on the changes within the staff team but were confident people's needs were being met and would raise any concerns relating to staffing levels with the registered manager.
- The provider had appropriate procedures for recruiting staff. These included formal interviews and carrying out checks on their suitability and identity. We identified some gaps in employment which the registered manager addressed, shortly after the inspection, with the staff members. They confirmed they would review staff records to ensure these contained all the necessary information.

Systems and processes to safeguard people from the risk of abuse

- Staff had completed safeguarding training and were aware of their responsibilities to identify and report potential abuse or poor practice. Records were kept of concerns and the registered manager was fully aware of their duty to report safeguarding allegations.
- A social care professional spoke highly about the registered manager who had been supporting a person with particular needs relating to safeguarding. They told us, "In my experience working with [registered manager] has been positive. He has been diligent about keeping me informed of allegations and other concerns."

Assessing risk, safety monitoring and management

- There was a positive approach to risk taking, which balanced risk and independence. One person had requested their medicines to be kept in their bedroom and although staff gave the person their medicines, they felt more in control of their lives having medicines stored in the room of their choice.
- Risks associated with people's support had been recorded and measures put in place to reduce these risks. This was in areas such as choking and risk of eating items that are not for human consumption. These were regularly reviewed to ensure staff had up to date information when supporting people. A relative confirmed they were confident that staff knew what to do in the event of a person being placed at risk.
- The environment and systems associated with the safety of the premises, such as fire and water temperatures, had been assessed, recorded and monitored on an ongoing basis. Fire practices had been held with staff to use specialist equipment that some people needed to evacuate the home safely.

Using medicines safely

- People's medicines were safely managed. Records showed people had been appropriately assisted with

their medicines.

- We checked the quantity of 'as required' medicine for one person and this correctly matched the quantity noted on the records.
- Staff had received training in the safe management of medicines, and their competency had been assessed.

Preventing and controlling infection

- Staff received training in infection control and had access to personal protective equipment (PPE) such as gloves and aprons.
- We observed staff following safe infection control practices.

Learning lessons when things go wrong

- Systems were in place to record incidents and accidents. The registered manager and the provider checked for trends in order to make adjustments and improvements where this was needed. We saw action had been taken where a person had been falling out of bed and their bedroom had been made safer to minimise the risk to them.
- We saw where medicine errors occurred, the registered manager took steps to ensure lessons were learnt. They ensured that staff were competent when they were responsible for the management of medicines. For example, when staff had made a medicine error, observations of their practice and checking their knowledge on medicines took place.

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

- There had been no new admissions since before the last inspection. People were referred to the service by the local authority who provided information about the person. People and their relatives were involved in the assessment process and the transition into the home.
- A relative confirmed there had been a plan to introduce the person to the home and this had gone well.
- The provider had in place a referrals team who initially met with people to assess their needs. The registered manager also became involved in the assessment process if the referral was deemed suitable. The assessment document covered a wide range of subjects in line with best practice and was person centred to ensure details about a person's preferences, abilities and interests were all recorded.

Staff support: induction, training, skills and experience

- Staff received a range of mandatory, relevant training to ensure they were able to meet people's needs, including person centred care and oral health. Training specific to a person's needs was also provided such as, epilepsy and autism awareness.
- Staff told us they were happy with their training and felt well supported by each other and the registered manager.
- Staff gained support informally on a day to day basis and had one-to-one meetings with their line managers. This gave staff the opportunity to discuss any issues, identify their training needs and provide support where needed.

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

- People enjoyed a range of meals that met their needs and preferences. One person said the meals were, "Fantastic and wonderful." The provider employed a cook who had worked in the home for over ten years and understood what people liked to eat. They were clear if people had risks when eating and what measures to take to ensure they were safe.
- Relatives were happy with the meals provided in the home. If people could take part in making a drink or any other tasks in the kitchen, then staff supported them to engage in this activity.
- Meals and drinks were recorded so that the staff team could monitor what people were having so that a well-balanced diet was offered to people.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Each person had a health plan in place. These identified any support people needed to maintain their health effectively. Staff liaised well with external health and social care professionals to ensure people

received the support they needed to have healthier lives.

- Records showed that people were supported to attend health appointments, along with any treatment provided. One social care professional confirmed the staff team were, "Dedicated."

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

- One staff member said the home could be more homely. The registered manager was keen to make continuous improvements to the environment and the home was bright, airy and welcoming.
- Rooms were accessible to people. Equipment was available to mobilise people safely and to support people to have a shower or bath.
- People's bedrooms were personalised. We saw where one person responded positively to lights, these had been fitted in various areas of their bedroom. There was a room which was being developed into a sensory room for people who enjoyed seeing and hearing things in a quiet space.

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 when this is in their best interests and legally authorised under the MCA. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager had a good understanding of the principles of the MCA. Staff received MCA and DoLS training.
- People's records reminded staff to support people to be as independent as they can be. Staff confirmed they helped people make daily choices about their lives.
- Applications had been made to the local authority where people had restrictions and had limited capacity to understand the risks they faced. These applications were being monitored to ensure the least restrictive support was used whilst awaiting authorisation.

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

- People interacted in a positive way with staff. We observed people smiling and linking arms with staff to take them to where they wanted to be.
- There were various systems to ensure staff supported people with compassion and kindness. This included equality, diversity and inclusion training, and observational checks of staff and their practice.
- A social care professional told us that staff do their best to make people feel happy and were committed to supporting people. We saw staff recognised when people were becoming upset and sought ways to distract people and engage with them in order to help them become less stressed.

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

- Staff helped people be involved in their day to day care. One staff member commented on how a person had progressed with doing much of their own personal care with encouragement and support.
- For those people who liked having pets, staff helped people look after the animals and take responsibility for them, as much as they could.
- Relatives confirmed they were involved in their family member's life. They had seen people's care plans and been invited to review meetings.

Respecting and promoting people's privacy, dignity and independence

- We observed staff being courteous and respectful when talking with people. They readily went to help people and encouraged them to do things for themselves.
- The registered manager explained that people received varying amounts of one to one support. Staff understood what people enjoyed taking part in and we heard of an example of where a person had been taken to see animals in the community and had days out. Through having the chance to experience different sights and sounds staff described how the person expressed themselves in a more positive way and were less distressed than they had previously been.
- Staff told us people were encouraged to learn daily skills, for example, making a drink, sitting with other people to have their meal and walking using a frame rather than always being in a wheelchair. These opportunities for people encouraged them to feel more independent, calmer, and stimulated.

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 ensure people have choice and control and to meet their needs and preferences

- People's needs had been assessed and planned for, setting out each person's needs, personal preferences, and how staff should support them.
- People, where required, had a positive behaviour support plan in place. To ensure new staff could support people successfully, they would read these documents and then answer questions about people's needs to review if they had digested the details. This process also helped staff know what signs to look for if the person was unhappy or agitated and required more support to ensure they and others were safe.
- People's views were gained by reviewing support plans, having assigned key workers [named members of staff] and meeting with them at least once a month. These meetings aimed to help people set goals and hopefully achieve these goals.
- Review meetings were held with the person, relatives and external professionals to ensure any issues were discussed and that the staff team continued to meet the person's needs.

Meeting people's communication needs

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.

- The service was meeting this standard as people had support to meet their communication needs. Staff knew how to communicate with people, which might include, showing objects of reference, or picture cards so that people could make daily choices.
- In one person's care file there were photographs of Makaton signs (a form of communication that some people with a learning disability use). This was to help staff know what signs to use when communicating with the person.
- Information could be made available in 'easy read' formats. This included large text and pictorial forms.

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 see their relatives and relatives confirmed they visited their family member whenever they wanted to. Since the last inspection, the registered manager had employed a day care organiser. Their role was to ensure people engaged in meaningful activities and identify new places that people could access.
- Staff organised activities and holidays in line with people's likes and dislikes. One person said they enjoyed going out with staff. During the inspection, we saw one person listening to music, whilst another

person taking part in an arts and crafts session.

- Two people had their own transport and there was a general vehicle for anyone living in the home to access.

Improving care quality in response to complaints or concerns

- One person was clear what route they would take if they had a complaint and that they had raised issues with senior staff which had been dealt with.
- The provider and registered manager were mindful that some people raised regular concerns and complaints and that other professionals would need to be involved in these cases to ensure the person was protected and their views documented. A social care professional commented favourably on how the staff team and registered manager handled these sensitive issues as and when they came up.
- Relatives said they would talk with the registered manager if they had a complaint. One relative confirmed, "Complaints are listened to and resolved."
- Where complaints had been raised these had been investigated appropriately and consideration was given as to what could be improved to minimise any future complaints being made.

End of life care and support

- The registered manager confirmed no-one using the service was receiving end of life care. Where people had particular end of life wishes, these had been documented.
- A staff member confirmed that when staff had previously supported a person with end of life care, they had received appropriate training on this subject.

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.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager had been in post since April 2019. They had strong values and was committed to ensuring people received a good standard of support. Relatives were confident the registered manager had been making positive changes to the home, such as recruiting a stable staff team, to benefit people.
- Staff supported people to be confident in taking control of their lives. One staff member said the staff team provided "Person-centred" care.
- People, relatives and staff received a newsletter providing them with an update on any news, staff changes and information about the service. The provider also produced a paper giving a broader perspective on what had taken place in services.
- Feedback from people using the service and their relatives was sought, via satisfaction surveys. This feedback identified areas working well and where improvements needed to be made.
- Relatives were happy with the level of communication between staff and themselves. The registered manager was keen to keep relatives involved and informed and keyworker's [named staff member's] were due to start providing a monthly update to relatives to ensure any questions or queries were answered.

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

- The registered manager was clear of their responsibilities and had a good overview of the service and felt well supported by the provider. The registered manager could give additional responsibility to senior staff to aid the smooth operation of the home.
- There were senior staff in post to support the registered manager and all were involved in the running of the home on a day to day basis. Senior staff, worked with the main staff team and supported people with the care and support they needed. This helped senior staff observe practice and understand how to support people effectively.
- Auditing was clear and accountable, carried out by the registered manager, their line manager, staff and external visits from people who use care services. The audits were undertaken at varying frequencies to assess the safety and quality of the service. This included all areas of the service, for example checking people's care files, medicines and health and safety checks.
- Monitoring visits were held at different times of the day and night to ensure people received a quality service. The registered manager developed an action plan if shortfalls were identified. This ensured appropriate action was taken and nothing was missed.

Continuous learning and improving care

- Relatives were complimentary about the registered manager who had not yet been in post a year. One relative said, "The manager is making positive changes and has improved [person using the service] bedroom."
- The registered manager had clear plans to continue to make improvements to develop the home. They recognised that relatives felt there had been frequent changes with the staff team and were keen to retain and support staff so that people received a consistent service.
- The registered manager kept up to date with best practice through meeting other managers and studying for a leadership and management qualification.
- Staff meetings were held to share information and discussions were held to remind staff how to safely support people. For example, we saw staff had been reminded which people were at risk of choking, what action to take and how to report concerns if staff thought a person was at risk of harm or abuse.

Working in partnership with others

- The registered manager worked closely with external professionals. This included making referrals for assessments and reviews as and when this was needed.
- A social care professional spoke positively about the support staff provided to people using the service. They commented, "It is my view that the staff and management have gone above and beyond with providing appropriate support to [person using the service]."

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager knew the importance of being honest and open when mistakes were made, or incidents happened, or a serious concern was raised. They said they would investigate and readily address and report any shortfalls.