

Community Places Limited

Community Places-Clifton Drive

Inspection report

Clifton Drive
Sprotbrough
Doncaster
South Yorkshire
DN5 7NL

Tel: 01302788668

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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

Community Places - Clifton Drive is a care home providing personal care to up to 16 people. The service provides support to people with mental health conditions and some people also had a learning disability. At the time of our inspection there were 10 people using the service.

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

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

Right Support: Model of Care and setting that maximises people's choice, control and independence
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. Staff were trained in safeguarding to keep their knowledge of their responsibilities up to date. The registered manager reported any allegations to the local authority safeguarding team and reviewed safeguarding investigations, accidents and incidents and feedback on the service to improve. Health and safety checks were carried out of the premises and equipment to make sure they were safe. The premises were clean, tidy and hygienic and staff followed current infection control and hygiene practice to reduce the risk of infections.

Right Care: Care is person-centred and promotes people's dignity, privacy and human rights
People received the right support in relation to risks, such as those relating to mental health conditions and learning disabilities. There were enough staff to support people safely and staff knew people well. The provider checked staff were suitable to work with people through recruitment checks. Staff received training in infection control practices. We made a recommendation about medicines practices.

Right Culture: The ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives
The service was managed well and the registered manager was experienced and understood their role, as did all staff we spoke with. The registered manager oversaw the service with regular checks and reviews to ensure people received good quality care. We made a recommendation about strengthening medicines audits. Communication with people, relatives and staff took place and feedback was used as part of improving the service. Staff felt well supported. Care was provided in a person-centred way. The provider worked with local health and social care services to ensure people received the care they needed.

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 (published 25 December 2019).

Why we inspected

We received concerns in relation to the management and people's care needs. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good based on the findings of this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Community Places-Clifton Drive on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Community Places-Clifton Drive

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 Health and Social Care Act 2008.

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

The inspection was carried out by 2 inspectors and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Community Places – Clifton Drive is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Community Places – Clifton Drive is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the 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 (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 5 people who used the service and 6 relatives about their experience of the care provided. We spoke with 8 members of staff including the registered manager, team leader, senior support workers, and support workers. We looked at 2 care plans and associated risk assessments, medicines records, training records and audits.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles.
- Staff reviewed each person's medicines regularly to monitor the effects on their health and wellbeing and provided advice to people and carers about their medicines.
- The service had systems and processes in place for the safe storage, administration, and use of medicines. Staff had been trained and assessed as competent to manage medicines.
- Instructions for medicines that are given when required 'PRN' were not always fully detailed. This meant that staff who did not know people well might not know what specific dose needed to be administered and the intervals between doses. Action was taken to address this immediately after the inspection.
- Although, the service was carrying out audits of medicines management these had not always picked up on some of the issues found during the inspection.

We recommend the provider follows best practice guidance regarding medicines management.

Systems and processes to safeguard people from the risk of abuse

- There were suitable systems for safeguarding people from the risk of the abuse. Staff had training to understand about safeguarding. The staff knew what to do if they thought someone was being abused.
- People's relatives told us they felt people were safely cared for. They knew who to speak with if they had concerns and felt the staff helped to keep people safe.
- The provider had worked with the local authority and others to report and investigate allegations of abuse.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's safety and wellbeing were assessed, monitored, and planned for. These assessments and plans were regularly reviewed. Staff sought guidance from relevant professionals to make sure care was planned in line with best practice.
- People were supported to take some risks and make choices about their lives. The staff monitored their wellbeing to make sure care and support was being provided well.
- The staff had training to understand how to safely support people that were distressed. There were clear plans to help staff understand how to deescalate situations and enable people to feel safe. The staff had a good understanding of the triggers which might make people agitated or anxious. They understood the

strategies to help people to feel calm.

- Staff monitored and recorded any incidents so they could discuss and analyse what had happened, learn from these and improve care plans to help reduce the risks of further incidents.
- The environment and equipment were safely maintained. Staff carried out checks on safety and problems were rectified. There were procedures to be followed in the event of an emergency and staff understood these.

Staffing and recruitment

- People were supported by enough suitably qualified staff.
- The number and skills of staff matched the needs of people using the service.
- There were effective recruitment and selection processes in place. Staff had completed application forms and interviews had been undertaken. In addition, pre-employment checks, which included references from previous employers and Disclosure and Barring Service (DBS) checks, were completed. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- 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.

Visiting in care homes

- The provider made sure visiting arrangements at this service were in line with government 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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.
- Applications made to deprive people of their liberty had been properly made and authorised by the appropriate body. The provider was complying with the conditions applied to the DoLS authorisations. Authorisations were regularly reviewed to check that they were still appropriate by the registered manager.
- Staff were received training in the MCA and associated codes of practice to give them further understanding of their responsibilities under this Act.

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 our last inspection we rated this key question good. The rating for this key question has remained good. 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 promoted a person-centred culture where care was tailored to individual needs.
- People were encouraged to do activities they were interested in, and we observed various activities taking place during the day which people enjoyed.
- The service was open and inclusive. The registered manager had an open-door policy and people, visitors and staff could speak with them at any time to discuss issues or make suggestions. Staff told us they felt listened to and any issues they raised were acted on.
- The registered manager engaged with people, visitors and staff with meetings and surveys. Staff said, "[The registered manager] is so supportive and really cares. Since they have been in post here things have been so good."

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 displayed an understanding of duty of candour and had a system to review accidents and incidents.
- Overall, relatives told us they were happy with the service and the care provided. However, some feedback indicated relatives were unhappy with communication from the provider. We discussed this with the registered manager who demonstrated they were proactive and responsive to acting on feedback. Feedback request forms were being sent out to relatives as part of the annual gathering of feedback.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care;

- The registered manager monitored the safety and quality of the service through various checks and acted when needed to address any gaps or shortfalls at the service.
- Staff delivered good quality care. Staff understood people's individual needs well and we observed they were unhurried and engaged well with people.
- The registered manager submitted notifications to CQC of significant incidents as required.
- We found the provider was keen to improve the service in any way possible and was open to any suggestions we made.

We recommend the provider ensures governance systems are strengthened in relation to medicines.

Working in partnership with others

- Health care professionals had been consulted and their input sought to support people. Evidence of this involvement was recorded within people's care plans.