

Cambridgeshire County Council

# Cambridgeshire County Council - 8b Wagstaff Close Cambridge

## Inspection report

8b Wagstaff Close  
Cambridge  
Cambridgeshire  
CB4 2PS

Tel: 01223426368

Date of inspection visit:  
08 November 2019

Date of publication:  
16 January 2020

## 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

Cambridgeshire County Council 8b Wagstaff Close is a supported living service providing personal care to people with learning disabilities. At the time of our inspection two people were receiving personal care. The people lived together in one house and staff support was provided for 24 hours each day.

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

People were safe using the service because staff knew what they were doing, they had been trained and the building they lived in was secure. There were enough staff, and the then registered manager also visited people regularly.

People told us they always received their medicines and that staff knew how these should be given. Medicine records were completed accurately and with enough detail. Staff supported people with meals and drinks. Staff took action to reduce the risks of spreading infection. Staff followed advice from health care professionals and made sure they asked people's consent before caring for them.

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 liked the staff that cared for them. People told us that staff were "nice", and "lovely". They went on to tell us that staff supported them to live as they wanted. Staff were kind and caring, they involved people in their care and made sure people's privacy was respected. Staff worked well together, they understood the service's aim to deliver high quality care, which helped people to continue to live in their own homes.

Systems to monitor how well the service was operating were carried out well. Where concerns were identified, the registered manager followed this up to make sure action was taken to rectify the issue.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was good (Published 17 May 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 we receive any concerning information we may inspect sooner.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

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 ●

# Cambridgeshire County Council - 8b Wagstaff Close Cambridge

## **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 undertaken by one inspector.

### Service and service type

This service provides care and support to people living in a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had two managers 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

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

### What we did before the inspection

We reviewed information we had received about 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 visited the supported living house and spoke with the two people who used the service. We spoke with the registered manager and two care workers.

We reviewed a range of records including two people's care records and medicine records. We reviewed records relating to the management of the service, including audits.

# 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.

Systems and processes to safeguard people from the risk of abuse

- People were confident with staff during our visit and they were happy when they returned home after being out.
- The provider had effective safeguarding systems in place, staff understood what to do to protect people from harm and how to report concerns. Staff told us they had training and information about safeguarding and knew where to go for further advice.

Assessing risk, safety monitoring and management

- Staff assessed risks to people's health and welfare such as moving and handling and falls. Actions were identified to reduce risks and staff made sure these were put in place.
- Risk assessments in relation to people's environment, in and around their home had also been completed. These included those for fire safety and infection control, which made sure that risks had been identified and managed. One staff member told us they were the 'champion' for the service, which included responsibilities for safety checks and fire drills.

Staffing and recruitment

- People were supported by staff who had been safely recruited. The registered manager told us no new staff had started working at the service since our last inspection visit. However, they were in the process of recruiting new staff and would complete all the required checks before the new staff member started.
- Staff at the service said there were enough staff, except at weekends when there were not always two staff available. They told us that this meant people were unable to always go out when they wanted over this time period. Staffing rotas showed that there were two staff on duty at for at least one day each weekend. The registered manager explained that people's care was not funded for one to one staffing and therefore there were times when only one staff member was on duty. However, they also told us that another staff member was being recruited to help ensure people were able to go out when they wanted.

Using medicines safely;

- Systems were in place that ensured medicines were stored, administered and disposed of safely.
- People were supported with their medicines by staff who had received training and were checked to ensure they remained competent. One staff member told us how the 'champion' for medicines had responsibility for ordering new stock, so that people were always able to take their medicines.
- Senior staff audited medicines to check that people were receiving them in line with the prescribers instructions.

### Preventing and controlling infection

- There were effective processes in place to prevent the spread of infection.
- Staff received infection control training and were provided with personal protective equipment such as gloves and aprons.

### Learning lessons when things go wrong

- Staff were aware how to report accidents and incidents.
- The provider analysed incidents and accidents for themes or trends and any learning was shared with staff. Within this service, staff started to consider people's potential mobility needs when considering whether a person would be suitable due to rooms not being all on one level. This arose when one person had reduced mobility and had difficulty going up and down stairs. In another of the provider's services medicine room temperatures were very high and staff came up with a short term solution to reduce the temperature. This had been implemented in all of the provider's services.



# 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

- Staff completed assessments of people's needs before they started using the service. They worked with people and health and social care professionals when assessing and planning people's care. This enabled them to make sure they considered up to date guidance in how to meet people's individual needs.

Staff support: induction, training, skills and experience

- Staff had received training when they first started working for the service and this was updated each year. New staff completed the Care Certificate, which identifies a set of standards and introductory skills that health and social care workers should consistently adhere to and includes assessments of competency. One staff member told us they liked the training they received because, "It's all up to date".
- Staff members received supervision as individual meetings and they said that they could also contact the registered manager or senior staff at any time between meetings. They said they felt well supported to do their jobs.

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

- People were supported to eat and drink if this was needed. We saw that mealtimes were a social affair, with staff chatting with people while food was prepared. People were able to eat what they wanted and staff supported them by offering a range of choices.
- Staff had completed food hygiene training and they described how they supported people to maintain a healthy weight.

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

- Staff completed information in the form of a hospital passport with people. This recorded important information about them, their needs, daily routines and preferences. The information was made available when people visited other providers of care, such as hospitals. This meant that these details were available if the person was not able to tell others about their preferences and they did not have a staff member to help them with this.
- Staff told us they would go with people to their appointments and take copies of any additional records, such as medicine records, that may help other services care for people.
- Staff had access to information from health care professionals and they followed this advice, which was included in people's care records.

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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

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.

- People were supported by staff who understood the principles of the MCA. They knew how to support people to continue making decisions and who to go to if the person was unable to do so. Staff had clear information about how to support people to make decisions.
- Applications had been made to the Court of Protection and staff respected the outcome of the one application that had been returned.

# 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 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 were treated kindly by staff. People were comfortable in the presence of staff and enjoyed positive relationships with them. Staff treated people kindly; they were patient, they showed concern for people and made sure they had everything they needed. They were aware of people's individual needs and preferences, and they accommodated people's routines.
- People were supported to maintain relationships with their families and friends.

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

- Staff continued to support people to make decisions about their care and these were recorded in their care plans. Staff told us that people were like a family and they made sure people were cared for in the way they wanted.
- Staff had enough time to support people properly and in the way they wanted, which also allowed them to spend time talking with people.
- People were supported to make choices about their care and support throughout the day. For example, they chose how and where to spend their time when they were at home.
- The registered manager said that two people who received care were using an advocate, they met with this person regularly.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and they ensured people were supported in a dignified way. This was because they closed doors and curtains, and covered people up as much as possible while supporting them with personal care. Staff knocked on people's doors before entering their rooms. One person returned after being out and staff supported them to their room but allowed the person to relax for a short period before returning to the communal areas.
- People's confidentiality was maintained; records were kept securely.

# 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 care needs were met and they were happy with the care they received. Staff were attentive and supported people with their care needs.
- People had care plans in place, which were personalised and written in detail. These gave staff enough guidance on how to respond to people's needs effectively and safely. Staff had built good relationships and knew people's likes, dislikes and preferences. There was also clear information about people's long-term health conditions to guide staff.

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.

- Staff had clear information about people's communication needs and how they expressed themselves. They had guidance about how to make sure people understood any information they were being given. We saw that these records were accurate and staff used the communication methods that people understood.

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

- Staff supported people to take part in activities each day where they could learn new skills. People were able to usually go out when they wanted and staff supported them to take part in their favourite activities. They had arranged for one person to go shopping on the weekend, which the person was looking forward to and getting excited about.

Improving care quality in response to complaints or concerns

- People knew who to speak with if they were not happy with the care they received. Staff said they knew from people's body language if people were not happy and worked to resolve any issues with the person.
- The service had a complaints procedure that had been adapted into alternative formats so that people using the service could follow the process. No complaints had been received by the service since our last inspection visit.

End of life care and support

- Guidance was available in people's care records about their end of life wishes, although there were no people receiving end of life care at the time of our visit. A staff member told us that they would also consult

with people's relatives in the event this care was needed, if the person was unable to tell them.

- Staff told us that additional guidance would be sought from visiting health professionals.

# 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

- The registered manager and staff were committed to providing a person-centred culture within the service. They understood their responsibilities to ensure people received the care they needed.
- Staff were also committed to providing high-quality care and support. Staff told us how staff supported each other and they went on to describe how they provided person-centred care and that they wrote care and support plans with this in mind.

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 provider sent us information about events and incidents that happened, such as possible harm, and what action they had taken to resolve or improve things. They displayed their inspection rating and told people and visitors what they had done to improve and develop the service.

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

- The registered manager told us how responsibilities were split between both registered managers and how they made sure that they service ran well even when one was away. One staff member told us how they were able to speak with either registered manager if they had any questions.
- Staff understood their roles and any extra responsibilities they had, such as a senior care assistant position or champion role. They explained these to us and staff told us how this meant they knew who to go to for specific advice or information.

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

- Staff completed reviews of people's care, which provided people with the opportunity to feed back about their care. The registered manager told us contact with people's families was limited but people received support from an independent advocate so that their views could be heard.
- Staff attended meetings regularly, which gave them support and information was shared quickly with them.

Continuous learning and improving care

- Processes to assess and check the quality and safety of the service were completed. The registered

manager and the organisation's internal audit team carried out audits and quality monitoring visits. These showed they identified areas of the service that required improvement and made those improvements in a timely way.

#### Working in partnership with others

- Information available to us before this inspection showed that the staff worked in partnership with other organisations, such as the Learning Disability Partnership. The registered manager contacted other organisations appropriately.