

Dolphin Homes Limited

# Camberley Cottage

## Inspection report

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## Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

**Inspected but not rated**

Is the service effective?

**Inspected but not rated**

Is the service responsive?

**Inspected but not rated**

Is the service well-led?

**Inspected but not rated**

# Summary of findings

## Overall summary

### About the service

Camberley Cottage is a care home providing accommodation and personal care for up to six adults with learning disabilities and/or a variety of associated health and support needs. People live in one large house built to meet people's mobility needs. At the time of the inspection the service was supporting six people.

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

There were good systems in place to keep people safe. People were safeguarded from the risk of abuse or avoidable harm. Staff had appropriately assessed risks and took action to protect people.

People were cared for by a committed team of managers and staff who had the skills and knowledge to support them effectively. 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.

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.

### Right Support

The model of care and setting maximised people's choice, control and independence. People were encouraged to develop their skills and independence. Staff had a good understanding of people's individual needs and provided support that enabled them to lead happy and fulfilling lives.

### Right Care

Care was person-centred and promoted people's dignity, privacy and human rights. People received individualised care that was responsive to their changing needs. Staff were knowledgeable about people's emotional needs and understood the link between their anxiety and behaviours and were skilled at managing these.

### Right culture

Ethos, values, attitudes and behaviours of leaders and care staff ensured people using services lead confident, inclusive and empowered lives. The culture of the service was open and transparent with staff and managers working together and with other professionals to deliver a service which placed people at the heart.

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 the service was good, report published on 13 April 2018. We also carried out a targeted inspection on 9 March 2021 to look at the standards of infection, prevention and control at the service.

### Why we inspected

The inspection was prompted in part due to concerns received about staffing, management of risks and people's health needs and how complaints were handled. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the Safe, Effective, Responsive and Well-Led sections of this full report.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively. This included checking the provider was meeting COVID-19 vaccination requirements.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Camberley Cottage on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### 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?**

At our last inspection we rated this key question Good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question, we had specific concerns about.

Details are in our safe findings below.

**Inspected but not rated**

### **Is the service effective?**

At our last inspection we rated this key question Good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question, we had specific concerns about.

Details are in our effective findings below.

**Inspected but not rated**

### **Is the service responsive?**

At our last inspection we rated this key question Good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question, we had specific concerns about.

Details are in our responsive findings below.

**Inspected but not rated**

### **Is the service well-led?**

At our last inspection we rated this key question Good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question, we had specific concerns about.

Details are in our well-led findings below.

**Inspected but not rated**

# Camberley Cottage

## 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. This was a targeted inspection to look at some specific concerns that had been raised about the way the service was being staffed and managed.

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

One inspector and an Expert by Experience carried out the inspection. 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

Camberley Cottage 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 all information we held about the service. This included stakeholder complaints, feedback received from our partner agencies, and statutory notifications that had been submitted. Notifications are changes, events and incidents that the service must inform us about.

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 used all of this information to plan our inspection.

#### During the inspection

We met with all the six people who used the service and spoke individually with three of them. We spoke with four members of staff, including the registered manager. We reviewed a range of records. This included the care plans for three people. Documents relating to complaints and the management of risks were also viewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. Our Expert by Experience made telephone calls to six relatives to gain their views of the service. We gathered feedback from commissioners and two health professionals who regularly visit the service. We also looked at training data and quality assurance records.

# 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. We have not changed the rating of this key question as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check specific concerns we had about staffing levels and the management of risks. We will assess all of the key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- People told us they felt safe living at Camberley Cottage. One person told us, "Staff are brilliant at just being there, and I feel very safe with them." Another person nodded and laughed when we asked if they felt safe, adding, "Oh definitely."
- With the exception of one family member who was not happy with their loved one's care, the other relatives we spoke with all expressed their view that people were kept safe from harm. One family member told us, "[Person's name] is well supported. I am extremely happy and have no worries at all." Another relative described how staff had supported a person to appropriately safeguard their finances.
- Staff understood their roles and responsibilities in protecting people from harm and were committed to keeping them safe. Staff told us they had completed training in safeguarding and were able to talk about different types of abuse and what they would do if they ever had concerns.
- There were clear policies and procedures in place for identifying and reporting abuse and the registered manager demonstrated her knowledge and commitment to safeguarding the people.

Assessing risk, safety monitoring and management

- People were involved in managing risks to themselves and in taking decisions about how to keep safe. For example, one person talked to us about how they had strong social links away from the service and spent each weekend away from Camberley Cottage. They understood the risks associated with their independence and explained the steps they took to keep themselves and others safe.
- With the exception of one family member, relatives told us that they thought risks to people were managed well. Some people were unable to express their feelings verbally, but their representatives highlighted the non-verbal cues which showed them their loved one was safe and received appropriate care. For example, one relative explained, "[Person's name] has complex needs and used to frequently self-harm. Recently there have been no outbursts and their tantrums and [incidents of] self-harm have much reduced. That's because they [staff] understand them."
- Staff understood the risks associated with individuals and how to support them safely. For example, staff knew people well and how to recognise signs that people may need either personal space or additional support.
- Care records included a clear assessment of the risks associated with people's needs and detailed

guidelines about how to manage identified risks. For example, one person living with epilepsy had a safety helmet which was required to be worn at certain times to minimise risk of injury in the event of a seizure. Risk assessments in respect of this were clear and staff knowledge reflected the information recorded in the person's support plan.

- Staff knew how to safely support people in the event of an emergency, and each person had a Personal Emergency Evacuation Plans (PEEPs) which outlined how they would be safely evacuated from the service if needed.

### Staffing

- People told us they received the right support from staff and that they were there when they needed them. One person commented, "They are all fantastic, absolutely brilliant." Likewise, another person was observed joking with staff and said told us, "Staff are great, a lot fun."

- Feedback from relatives on staffing levels was mixed. Some family members highlighted that they had no concerns and that there was always sufficient and competent staff on shift. Other relatives made comments such as, "There isn't enough staff at the moment."

- Staff spoke candidly with us about an ongoing situation that had resulted in a high number of staff leaving their employment at the service. One staff member told us, "I love working here, and we are well supported by the management team. But the pressure the whole team is under at the moment is having such a negative effect on all of us."

- The registered manager and provider representatives were working closely with a number of external professionals to resolve the situation but acknowledged the impact this was having on the retention of staff.

- Our inspection was unannounced, and the numbers and skills of staff matched the needs of people using the service. Two of the four staff on duty were supplied by a local employment agency. They regularly worked at Camberley Cottage and demonstrated a good understanding of people's needs.

- Every person's record contained a clear one-page profile with essential information to ensure that new or temporary staff could see quickly how best to support them.

### 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 meeting shielding and social distancing rules.

- 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 accessing testing for people using the service and staff.

- 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.

- People were supported to receive visits from family and friends in accordance with the current guidance.

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency. The Government has announced its intention to change the legal requirement for vaccination in care homes, but the service was meeting the current requirement to ensure non-exempt staff and visiting professionals were vaccinated against COVID-19.



# 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. We have not changed the rating of this key question as we have not looked at all of the effective key question at this inspection.

The purpose of this inspection was to check specific concerns we had about how people's healthcare needs were met and whether principles of the Mental Capacity Act were followed. We will assess all of the key question at the next comprehensive inspection of the service.

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

- People told us that staff supported them to maintain good physical and mental health. One person told us, "Things have improved a lot for me from living here, I'm healthy and staff arrange my appointments. Like today, I am seeing the chiropodist." Likewise, a relative commented, "They call the GP quickly when needed."
- People were appropriately referred to health care professionals to support their wellbeing and we received consistently positive feedback from the other professionals involved in people's support. One professional commented, "Staff know the clients very well and respond to their needs as individuals." Likewise, another healthcare worker said, "Any suggestions I have made regarding residents' care have always been taken on board and implemented."
- People had health passports and care records which reflected the specialist support and guidance provided by other health care professionals.

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.

- Staff empowered people to make their own decisions about their care and support. People told us that staff respected their right to make their own choices and decisions. One person confirmed, "Camberley Cottage has been so good for me. I make my own choices and I am really independent now."

- A relative praised the service for supporting their family member to make their own choices during the pandemic. They told us, "They allowed [Person's name] to make an informed choice, be in control and know the individual consequences of their decision."
- Throughout the inspection we observed staff continuously offering choices and respecting people's decisions about their daily routines.
- Staff understood people's capacity to make decisions through verbal or non-verbal means and communicated effectively with people. For example, we saw a staff member using Makaton to support a person to make a choice about their day. Makaton is a language programme that uses signs together with speech and symbols.
- Care records highlighted that where people had been assessed as lacking the mental capacity to make decisions about their care and treatment, appropriate DoLS referrals had been made.
- Steps were taken to ensure care was provided in the least restrictive way. For example, one person liked to be independent in their room, but would sometimes forget to request staff help when mobilising. With the person's agreement a sensor beam had been installed which alerted staff if the person needed support.

# 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. We have not changed the rating of this key question as we have not looked at all of the effective key question at this inspection.

The purpose of this inspection was to check a specific concern we had about the way complaints were handled. We will assess all of the key question at the next comprehensive inspection of the service.

Improving care quality in response to complaints or concerns

- People could raise concerns and complaints easily and staff supported them to do so.
- People did not report any concerns to us during our visit but confirmed that they felt happy to raise any issues with staff if they needed to. One person told us, "I can talk to them about anything, they are all fantastic, absolutely brilliant."
- Staff were responsive to people's non-verbal cues that they were dissatisfied. For example, one person was not happy about being introduced to us whilst enjoying a drink. Staff immediately recognised this, apologised to the person and suggested we return at another point in the day.
- Staff were committed to supporting people to provide feedback. The complaints policy was available in formats that were accessible to people and agendas and meeting minutes were produced with pictorial symbols to make them easier for people to read.
- The provider had a system for people using their services to be recognised auditors. One of the people at Camberley Cottage was proud of their 'Service Expert Auditor' role and used this position to formally gather other people's views and interview staff about their jobs and how the service was run.
- Relatives shared with us their different experiences of raising complaints about the service. One relative told us, "I made a complaint and they handled it well and I felt very reassured." Likewise, another family member told us they'd once raised concerns and, "They managed this complaint very well and were very apologetic."
- One relative spoke at length with regards to their dissatisfaction of the service. The issues raised were not reflective of the experiences either people or other relatives shared with us. The Local Authority are engaging with all parties to seek a resolution to these ongoing concerns.
- The service treated all concerns and complaints seriously, investigated them and learned lessons from the results, sharing the learning with the whole team and the wider service. For example, a complaint had been made about a person's nail care and the registered manager had found a creative solution which now enabled the person to receive appropriate nail care.
- The management team maintained a written record of the feedback they had received. In addition to the formal logging of complaints, we saw relatives had also sent compliments expressing thanks for the care staff provided to people.

# 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. We have not changed the rating of this key question as we have not looked at all of the effective key question at this inspection.

The purpose of this inspection was to check a specific concern we had about the management of the service. We will assess all of the key question at the next comprehensive inspection of the service.

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

- People spoke fondly of the registered manager who was observed to have positive relationships with all those who lived at Camberley Cottage. One person said, "She's a really good manager." Likewise, another person laughed and said, "Oh yes, she's great."
- With the exception of one relative whose concerns about the service are being handled separately, people's family members had high praise for the registered manager. One relative told us, "She's a good manager and she's doing blinking well [under difficult circumstances.]" Likewise, another family member expressed, "She is a good manager and has coped well over the last 2 years."
- The registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs and oversight of the services they managed. Staff praised the support and leadership they received. For example, one staff member told us, "Our manager is excellent and very supportive and caring towards staff and people."
- Other healthcare professionals spoke highly of the management of the service. One such professional said, "The home manager has always been very transparent with us and appears proactive in the management of residents health needs, if she has any questions, concerns or needs any information she approaches us or seeks support from appropriate health services." Similarly, another commented, "She has always been thoroughly involved to ensure she knows what programmes are being set up and supported in them being carried out."
- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support. The provider had a variety of reviews and audits in place to continually monitor and review the quality and safety of the service.
- Services that provide health and social care to people are required to inform the Care Quality Commission of important events that happen in the service. The registered manager had submitted notifications of this nature in a timely way which meant we could check that appropriate action had been taken.