

Steps Rehabilitation Limited

STEPS Neurological and Trauma Rehabilitation Centre

Inspection report

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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

STEPS Neurological and Trauma Rehabilitation Centre is a purpose-built care home providing specialist rehabilitation services to people living with neurological conditions, stroke, spinal cord injuries, acquired brain injuries, orthopaedic and other complex trauma injuries. The duration of stay is dependent upon each person's rehabilitation programme. At the time of the inspection there were 21 people living at the home. The service can support up to 23 people.

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

People told us they felt safe living at STEPS Neurological and Trauma Rehabilitation Centre. There were systems in place to recognise and respond to any allegations of abuse. Staff had received training in safeguarding adults and children. Medicines were stored safely and administered as prescribed. Safe recruitment procedures made sure staff were of suitable character and background. There were enough staff deployed to meet people's care and support needs in a timely way. We were assured there were effective systems in place to reduce the risk of infections.

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 service was well-led. There were multiple systems in place to regularly ask people, their relatives, staff and stakeholders for their views on the service. Actions were taken in response to feedback received. Comments about the managers were positive. The service had up to date policies and procedures which reflected current legislation and good practice guidance. There were effective systems in place to monitor and improve the quality of the service provided.

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

Rating at last inspection and update

The last rating for this service was 'inspected but not rated' (published 11 November 2020). This was a targeted inspection and we found two breaches of regulation 12. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

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.

We carried out an unannounced targeted inspection of this service on 29 September 2020. Two breaches were found. The provider completed an action plan after the last inspection to show what they would do

and by when to improve their provision of safe care and treatment.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions of safe and well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion (effective, caring and responsive) were used in calculating the overall rating at this inspection. The overall rating for the service has remained good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for on our website at 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?

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.

STEPS Neurological and Trauma Rehabilitation Centre

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.

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 team was made up of one inspector and one specialist advisor. The specialist advisor was a specialist nurse with experience of rehabilitation services.

Service and service type

STEPS Neurological and Trauma Rehabilitation Centre 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 clinical director was managing the service and in the process of registering as the manager with CQC. The clinical director was also the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

Notice of inspection

This inspection was announced.

What we did before the inspection

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 reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, clinical commissioning group and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used this information to plan our inspection

During the inspection

We spoke with four people who were staying at STEPS Neurological and Trauma Rehabilitation Centre about their experience of the care provided. We met with the nominated individual and head of nursing. We spoke with eight members of staff.

We looked around the building to check environmental safety and cleanliness. We looked at written records, which included five people's care records and four staff files. A variety of records relating to the management of the service were also reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. This included reviewing feedback about the service 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 inspected but not rated. At this inspection this key question is rated as good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection the provider had not ensured the proper and safe management of medicines. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Medicines were stored securely within safe temperature ranges and disposed of properly. Clinical rooms were clean and organised.
- People received their medicines as prescribed. We checked four people's medication administration records and found they had been completed appropriately.
- Registered nurses took responsibility for dispensing medicines and their competency in this area was checked. Regular audits of medicines management were undertaken. Actions or recommendations were acted on and shared with the relevant staff.
- People were supported to manage their own medicines where appropriate. Best practice guidance was followed that staff should assume a person can self-administer unless a risk assessment proves otherwise.
- There was guidance for staff on when 'as required' (PRN) medicines may be needed by the person.

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

At our last inspection the provider had not ensured risks to people had been fully assessed. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12

- People's care records contained risk assessments. They included guidance for staff on how to reduce each risk. Staff clearly knew people well and were able to tell us how they would support people to manage any identified risks.
- Accidents and incidents were recorded and investigated. The type and frequency of incidents were analysed and regularly reviewed by managers to see if there were any lessons to be learnt. Staff received an 'incidents and feedback' email each month which included an overview of all the previous months incidents

with actions taken. Staff told us these were discussed and reflected on in team meetings.

- Risks to people in the event of a fire had been addressed. There were regular checks of firefighting equipment. Staff took part in regular fire drills.
- The premises were well maintained. Regular checks of the buildings and the equipment used were carried out to keep people safe.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. Comments included, "It feels safe here. I have got everything I could possibly need" and "They [staff] are like family while I am away from my family. I couldn't have picked a better place to come to."
- There were systems in place to help keep people safe. Staff were aware of how to report unsafe practice. The provider had clear safeguarding policies and procedures.
- Staff knew how to protect people from the risk of abuse. Staff confirmed they had received online training in safeguarding. Focus groups had been introduced to give staff the opportunity to discuss what they had learnt online. Staff told us they found this useful to apply what they had learnt to real life situations.
- The nominated individual kept a record of safeguarding concerns raised with the local authority, action taken and any outcomes. Staff were confident any concerns they raised would be taken seriously by managers and acted upon accordingly.

Staffing and recruitment

- The process of recruiting staff was safe. The provider kept clear records of the recruitment process for every member of staff. These contained enough information to help ensure people employed were of good character.
- There were enough staff deployed to help keep people safe. One person told us, "Staff are very caring and there are enough of them."
- Staffing levels were kept under constant review. The varied and often complex needs of the people staying at STEPS Neurological and Trauma Rehabilitation Centre frequently changed as people completed their rehabilitation.
- Staff confirmed there were enough staff employed. Comments included, "There has been a real improvement with staffing levels. Much better now" and "I feel there are enough staff now, when we had concerns in the past the staffing numbers were raised as a result."

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.

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 inspected but not rated. At this inspection this key question is rated as good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection we recommended the provider review their policies and procedures and update their knowledge about their regulatory requirements. At this inspection we found the provider had made improvements.

- The service was well-led. There was an effective management structure in place. Staff were clear who their line manager was and how they could access support.
- The provider had a comprehensive set of policies and procedures covering all aspects of service delivery. We saw these were up to date with a clear revision history and therefore reflected current legislation and good practice guidance.
- The provider had effective quality assurance and governance systems in place to assess the safety and quality of the service. Managers were aware of which audits they were responsible for. The electronic system emailed reminders to the relevant manager when audits were due for completion. The board kept an overview of these systems.
- The nominated individual understood their responsibility to act on the duty of candour. They were aware of their obligation to submit notifications to CQC line with the Health and Social Care Act 2008. A number of notifications had been received since the last inspection.
- The provider continued to ensure the ratings from their last inspection were clearly displayed on the premises.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Continuous learning and improving care

- There was an open and positive culture. Staff told us they felt part of a team and were valued by management, regardless of their role in the service. Comments from staff included "I love it [working here]. The staff and the clients really make it", "The rehabilitation assistants work well as a team. We support each other" and "We [staff] all help each other."
- Feedback about the nominated individual and management team was positive. Comments included, "Their [managers] door is always open. We have a 'High 5 scheme' which recognises good work. I have not worked anywhere else this good", "There is a weekly support session any member of staff can go to" and "There is always time made to talk through any issues."
- The nominated individual knew everyone living and working at STEPS Neurological and Trauma

Rehabilitation Centre well. They took time to stop and greet everyone they saw. The nominated individual talked about the people the service supported with compassion. They were knowledgeable about their life histories and support needs.

- Relatives, stakeholders and visiting professionals had provided positive feedback about the service and the outcomes it had achieved with people.

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

- There were multiple systems in place to regularly ask people, their relatives, staff and stakeholders for their views on the service so they could continually improve. For example, 'monthly catch up emails' were sent to all staff from their line manager requesting feedback. These were used to inform their planned three monthly supervision sessions and yearly appraisals.
- Regular meetings were held with different staff groups. For example, there were records of monthly therapy team meetings. Staff told us they could add items to the agenda for discussion. There were records of staff wellbeing and diversity being discussed.
- People were asked for their feedback at regular intervals during their stay and exit interviews were offered when they left. People were involved in regular reviews of their care and support needs. These reviews were also an opportunity for people to comment about the service they received.
- Managers responded proactively to any suggestions and feedback regardless of who made them. The nominated individual kept a track of actions taken. We found there was a strong commitment from all staff to continually improve the service.

Working in partnership with others

- The nominated individual had established good working relationships with their local GP practice and pharmacy.
- The nominated individual had collated recent testimonials from visiting professionals. They included positive feedback about working in partnership with staff at STEPS Neurological and Trauma Rehabilitation Centre.