

Cambridge City Council

Cambridge City Council Care - Ditchburn Place

Inspection report

Cambridge City Council
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Cambridge
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Tel: 01223457199

Date of inspection visit:

23 January 2020

27 January 2020

05 February 2020

Date of publication:

03 March 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:

Cambridge City Council Care - Ditchburn Place is a domiciliary care agency. It provides personal care and support to people living in their own flats in a specialist 'extra care' housing scheme in the centre of Cambridge. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of our inspection 22 people were receiving the regulated activity personal care.

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

People were happy with the service and the staff that provided their care.

People felt safe because staff knew what they were doing, they had been trained, and supported people in the way people wanted.

Staff assessed and reduced people's risks as much as possible. There were enough staff to support people with their care and support needs. The provider carried out key recruitment checks on potential new staff before they started work.

People received their medicines and staff knew how these should be given. Staff used protective equipment, such as gloves and aprons to prevent the spread of infection. Staff followed advice from health care professionals and made sure they asked people's consent before providing care and support.

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.

People liked the staff that supported them. Staff were kind and caring, they involved people in their care and made sure people's privacy was respected.

Staff kept care records up to date and included national guidance if relevant.

The service was well managed by a registered manager. The senior staff team were passionate about giving people a high-quality service.

People and their relatives were asked their views of the service and action was taken to change any areas that they were not happy with. The provider had systems in place to effectively monitor and bring about improvements in the service. Concerns were followed up to make sure action was taken to rectify the issues raised.

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 26/07/2017).

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?

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.

Cambridge City Council Care - Ditchburn Place

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

One inspector carried out this announced inspection.

Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

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

We gave a short notice period of the inspection, prior to visiting the service, because we wanted to speak with people who use the service.

Inspection activity started on 23 January 2020 and ended on 05 February 2020. We visited the office location on 27 January 2020.

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. 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 two people about their experience of the care provided. We spoke with four members of staff including the registered manager, care support supervisor, care worker and a volunteer. We received feedback via email from three relatives, two social care professionals, and a volunteer during the inspection period. We reviewed a range of records. This included two people's care records and a variety of records relating to the management of the service.

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

- Staff had received training and understood how to safeguard people from harm or poor care. Staff knew how to recognise, report and escalate any concerns to protect people from harm. They were confident the registered manager would take any concerns they raised seriously.
- People and relatives told us that they felt safe.

Assessing risk, safety monitoring and management

- People had risk assessments and guidance in place to support staff to reduce the risk of harm occurring. Staff used the information from risk assessments to help keep people safe. For example, one risk assessment informed staff that the person needed full support to take their medicines.
- Staff encouraged and referred people to use assistive technology to increase their safety and independence. One person told us they had a sensor mat and a watch which alerted staff if they fell. This ensured that staff were aware of their fall immediately and could provide immediate support.
- People had risk assessments to support them to stay safe in the building and evacuate safely in an emergency.

Staffing and recruitment

- The provider had a recruitment process that ensured that staff were suitable to work at the service. Staff told us the process had involved a Disclosure and Barring Service (DBS) record check and previous employment checks. Staff who had worked at the service for several years also told us that the DBS check was updated regularly.
- Staff told us there were enough staff on duty to meet the needs of the people requiring support. Relatives also told us that staff were always available to help their family member and were, "Very prompt".

Using medicines safely

- People and relatives were satisfied that staff supported them with their medicines safely. A relative told us that they, "Were happy" with the support that their family member received with their medicines.
- Staff received training and senior staff checked their competency to administer people's medicines safely.
- The registered manager audited medicine records to check medicines were given in line with the prescriber's instructions. Where audits had identified any concerns, the registered manager had investigated and taken appropriate action, this included providing staff with additional support or training.

Preventing and controlling infection

- Staff had completed training in how to reduce the risk of infection and followed good practice guidance.

- Staff used personal protective equipment, such as gloves and aprons, to help prevent the spread of infection. One person confirmed that, "Staff wear gloves and all the protective stuff."
- People were satisfied that the service was clean. One relative told us that their family member's flat was always clean and tidy.

Learning lessons when things go wrong

- The senior staff had carried out audits which identified if something was not working well and used their learning to change and inform their practice. For example, following an increase in medicine errors, the registered manager introduced daily medicine audits to identify what was causing the errors. Because of the audits, the registered manager introduced additional training and a visit from the nominated pharmacy to review the medicine administration procedure.
- Any learning was shared with the staff team via meetings, supervisions and training.

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 assessed people's needs prior to them using the service, and regularly reviewed them thereafter, to ensure they could meet people's needs. External professionals were very positive about the staff team and the support provided, one professional told us, "The staff are very friendly and cooperative especially when we have some challenging cases."
- Care plans contained information about people's diverse needs and included any preferences in relation to culture, religion and diet. Staff received training in equality and diversity.
- The management team ensured that staff delivered up to date care in line with good practice and current guidance. An external care professional told us, "The records are accurate."

Staff support: induction, training, skills and experience

- Staff said that they had received enough training to do their job properly and support people effectively. Staff told us that the management team ensured that their training was up to date.
- Staff told us that the provider extended additional training opportunities to the staff team. The staff were positive about this as they felt the provider invested in them.
- Staff told us that they felt well supported. Staff received formal support during regular supervision, mid-year appraisals and an annual appraisal of their development and performance.

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

- The service was not responsible for providing people's food and drink. However, staff supported people to access the dining room and ensured they received meals if they stayed in their flats. Staff supported people to have enough to eat and drink and were aware of people's dietary needs.

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

- Staff were proactive at ensuring people received the care and treatment they needed from other professionals. People and relatives were satisfied that staff would contact health professionals when necessary.
- Staff followed external health professional's advice. This helped to ensure that people received effective care to support their health and well-being.
- A relative told us that the service had recently recognised that their family members mood had changed and requested an immediate re assessment of their medication by the GP. The family expressed how, "Grateful" they were to the service for managing this.

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 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

- At the time of our inspection no person living at the service was subject to a DoLS.
- Staff had all received training in MCA and DoLS and understood how it applied to their work. Staff understood the importance of ensuring people were given choice.

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 were happy with the support they received. One person told us that the service was, "Very nice indeed, and the staff are very nice and helpful."
- Relatives were satisfied that their family member was treated well, a relative told us that, "All the staff are very kind and compassionate people and appear to go the extra mile for my [relative]," and another relative told us, "I feel that the care and support meets my [relatives] needs admirably."
- Staff told us that they would be happy for a family member to be cared for by the service. A member of staff told us this was because, "The Staff team are all so dedicated. We promote independence, and we all sing the same tune, we give people a quality of life."

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

- Staff knew each person well and understood what was important to the individual. Staff told us that they got to know people well by spending time with people and talking to them.
- Staff understood the importance of offering people choice and involving people in making decisions about their care. One member of staff told us, "We can only know someone and what they want by asking, we can never assume."

Respecting and promoting people's privacy, dignity and independence

- Staff fully respected and promoted people's privacy, dignity and independence. Staff offered personal care discreetly and made sure that people's dignity was respected. One person told us that the support they had to shower, "Was done excellently; [staff] respects my privacy".
- Relatives told us that staff always knocked on doors before entering.
- Staff encouraged people to be as independent as possible. The registered manager showed us how they had designed the corridor to have chairs sat next to windows. This was designed so that someone could walk from their flat to the dining room and take breaks along the way. Before this was introduced this person had relied on being supported with a wheelchair.
- Relatives were satisfied that people were supported to be independent. One relative told us, "[Person] is encouraged to be independent where possible and can be on their own when they choose to do so."

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 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.
- Relatives told us that people could make choices about how they were supported, and that staff respected this. Relatives were satisfied that their family members were listened to and treated well by staff.
- Staff told us that they worked with people to ensure that they had choice and control over the way people wanted to be supported. Staff told us that they worked with healthcare professionals to ensure that they could support people with their choices when needed.

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 used different ways of communicating with people depending on what people needed. Staff told us that some people preferred information read aloud to them or be provided with information in a different format.
- People had been provided with 'easy read' documents and policies in their care plans. Easy read documents included; Keeping adults safe from abuse and neglect, Infection prevention and the complaints procedure. This ensured that people had access to important information.

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 attend activities and groups in the community which they wanted to attend. Relatives were happy with the arrangements made for people to attend activities and one person told us, "I believe this is a lifeline for [person], as it is routine, and gives a structure to [person's] life. "
- The service arranged in house religious services for those who wished to attend. This was also open to members of the community which enabled people living in the service to maintain local community links.

Improving care quality in response to complaints or concerns

- People knew how to complain and had confidence they would be listened to. People and relatives said they were very satisfied with the care and support they received.
- The provider had systems in place to deal with any concerns or complaints. Complaints had been investigated and responded to.

End of life care and support

- The registered manager and staff had given people the opportunity to discuss their end of life wishes and these had been recorded in people's care records. Staff were not supporting anyone with end of life care at the time of our inspection.
- Staff had received training from NHS East of England in 'End of life and palliative care'.

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 senior staff team, were committed to developing a person-centred culture within the service. They understood their responsibilities to ensure people received the care they needed and stepped in to support staff wherever necessary.
- People and relatives told us how nice the service was due to the culture the registered manager and staff promoted. One relative told us, "Currently, there is a happy family atmosphere, and I do pray this can continue." And another said, "What I will say is that I have always found the staff to be approachable. I can always ring [the registered manager] or email if I'm concerned about anything and they will get back to me."
- Staff all told us that they enjoyed working at the service, one said, "I am really happy here and I am just hoping that it will stay the same".

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

- The registered manager understood the requirements of their role and was up to date with the latest best practice guidance. This included guidance in relation to oral care, which the staff had included in peoples' care plans.
- Staff were clear about their roles and knew when and how to raise any concerns. Staff were held to account for their performance when required.
- Processes to assess and check the quality and safety of the service were completed. The registered manager and senior staff carried out audits, which meant they regularly identified areas of the service that required improvement. Actions put into place following these audits ensured that improvements were made.
- The provider had fulfilled their legal obligations in relation to notifying CQC of important events they are required to. The provider had displayed their inspection rating clearly in the service.
- The registered manager and the staff team knew people and their relatives well which enabled them to have positive relationships and good outcomes for people using the service.

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

- People had been given the opportunity to provide regular feedback. This included reviews of people's care with staff and their relatives, if people wanted them present. The service also held regular service user

meetings, which people could also invite their relatives too.

- The registered manager told us that people and their relatives had been involved and consulted on proposed changes to the future provider of the service. The registered manager and staff had supported people to prepare for the meeting and develop questions which were important to them to ask the new provider.
- Staff told us that they attended regular team meetings. The registered manager had held team meetings weekly throughout the consultation period to offer staff support and give staff a safe forum to raise concerns and discuss openly as a team the changes involved.

Continuous learning and improving care

- The registered manager worked closely with other providers and registered managers to share good practice and continuous learning. The registered manager had developed an action plan to reflect on their own development and implement changes within the service.
- Records of incidents and accidents were analysed and recorded to find themes. The registered manager shared these findings with a health and safety officer to review whether any changes or action were needed.

Working in partnership with others

- Staff and the registered manager worked in partnership with other professionals and agencies, such as the GP, social workers, other health care professionals and the local authority to ensure that people received joined-up care.