

Community Integrated Care Holmdale

Inspection report

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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

The service is registered to provide accommodation and personal care for up to six people. People who use the service have learning and physical disabilities. At the time of our inspection four people were living at Holmdale. The service is owned and managed by Community Integrated Care [CIC], which is a non-profit making organisation. Staff members are on duty twenty-four hours a day.

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

People were protected from abuse and the risk of abuse. Feedback from a relative and healthcare professional was very positive. They all felt that people were safe. Infection control practices were well managed and followed to minimise the risk of the spread of infection.

People received care and support from experienced staff who were supported in their role. People were offered a nutritious and balanced diet that met their cultural needs and wishes. Systems were in place to ensure that people's healthcare needs were understood and met.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. Care is person-centred and promotes people's dignity, privacy and human rights.

Right support:

The layout of the home supported people to live independently. Staff supported people to live lives that were fulfilling.

Right care:

The care provided was person-centred and promoted people's dignity, privacy and upheld their human rights.

Right culture:

The values and of well trained staff ensured people living in the home were leading more inclusive lives within their communities.

Staff knew people well and were knowledgeable about individual's needs and wishes and how they were to be met. People and their family members had access to information as to how to raise a concern or complaint about the service.

Systems were in place to monitor the quality of the service that people received. Staff felt well supported by

the management team, who they felt were very approachable.

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

Why we inspected

We undertook this inspection as part of a random selection of services rated Good and Outstanding to test the reliability of our new monitoring approach.

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.

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.

Holmdale

Detailed findings

Background to this 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 was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience caring for someone who uses this type of care service.

Service and service type

Holmdale 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. The registered manager 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 period notice of the inspection because some of the people using it could not consent to a home visit from an inspector. This gave the staff time to help reassure people of the inspection and people visiting the home.

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 reviewed a range of records which included one person's care records. A variety of records relating to the management of the service, including audits, health and safety checks and recruitment records. We met all four people who live at Holmdale and spoke with one person's relative, two professionals, the registered manager and three support staff. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked quality at 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. At this inspection this key question has remained as good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- There were safe systems in place to protect people from the risk of abuse. The staff team had a good understanding of safeguarding and had completed training in this subject.
- Feedback from visitors told us that they felt the service was very safe.

Using medicines safely

- People's medicines were managed safely.
- Staff responsible for managing people's medicines had completed training in this area. Staff fully respected people's choices on a daily basis regarding whether they wanted assistance with their medication or not.

Preventing and controlling infection

- Appropriate systems were in place for the prevention and control of infection. Staff had received training in how to use PPE and used it appropriately.
- The service was clean and offered a homely environment. Feedback from a relative and visiting professionals told us they were happy with the standard of hygiene maintained.

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

- Risks to individual's health and safety had been assessed and kept under review. Where risks had been identified, for instance in using ceiling track hoists, steps had been taken to keep people safe.
- People at risk of pressure ulcers had their skin monitored on a regular basis to minimise any deterioration.
- Staff kept family members informed of any incidents and accidents people had experienced. One family member told us that they were grateful for the strong communication channels between them and staff.
- Equipment and utilities were tested and serviced to ensure they continued to be safe to use.

Staffing and recruitment

- The recruitment of staff was safely managed. Identity and security checks were completed, before staff started work at the service.
- Sufficient numbers of recruited staff were deployed to meet the needs of people living in the service.

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 good. At this inspection this key question has remained as good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Adapting service, design, decoration to meet people's needs

- People's bedrooms reflected their personal interests. People were comfortable using the communal and private spaces of their home.
- Where necessary, appropriate aids and equipment were in place to meet people's physical and communication needs.
- The registered manager discussed plans about the development of the service and how they supported people with their interests when developing the service. The gardens had been adapted with lots of interactive planting and sitting areas.

Staff working with other agencies to provide consistent, effective, timely care. Supporting people to live healthier lives.

- Feedback from a range of health and social care professionals, was very positive. They fed-back on areas of good practice and values that they regularly noted within the service.
- One professional told us, "The care at Holmdale is excellent, staff are always attentive and demonstrate person centred care."

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.

- The registered manager had a clear understanding of Mental capacity assessments (MCA) and knew what actions to take to ensure that people's rights were upheld under the Act.
- Mental capacity assessments had been completed to identify when a person had capacity to make a specific decision.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were regularly assessed, so staff knew how to support them.
- Staff were knowledgeable about the support needs of people they worked with. One member of staff reflected on the culture of improvements that had been developed which helped the whole team to continue developing positive outcomes for people.

Staff support: induction, training, skills and experience

- Staff felt valued and appreciated the support and training they had received. They were committed to continuing to learn and share good practice.
- The training and support provided meant staff were confident in their abilities to support people with a wide range of needs and conditions.

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

- People received the support they required to enable them to have specific diets to better meet their needs.
- We observed staff providing individual support with meal and fluids in a respectful manner.

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 as good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- Staff fully understood people's communication needs and supported them to communicate their needs.
- The manager had collected a lot of positive feedback from professionals and a relative. The registered manager discussed how they worked closely with people to get their feedback. The registered manager advised they would look at how they could collate this ongoing feedback to show how it positively impacts on people's support.
- One professional shared very positive feedback and told us, "The home is the tenant's home and not a place of work this is so clear to me and my colleagues who visit the home."
- Staff supported people to maintain their important relationships. Throughout the pandemic people had been supported to stay in touch in ways that were meaningful to them

Respecting and promoting people's privacy, dignity and independence

- People's interests were promoted by staff who were committed, and inspired, to look for positive outcomes and opportunities for people to experience and enjoy.
- A relative told us that staff were kind, compassionate and treated people with respect.
- People were treated with dignity and respect. We observed respectful interactions from staff when they supported people.
- Personal records were stored securely.

Ensuring people are well treated and supported; respecting equality and diversity

- Throughout the inspection, we observed a positive and inclusive culture at the service. People were central to the running of their home.
- We observed caring and kind interactions throughout the inspection.
- People did not use words as their main means of communication and could not tell us about their experiences verbally. They indicated their comfort with staff with individual and unique behaviours that staff were fully knowledgeable of.

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 the rating for this key question has remained as good. This meant people's needs were met through good organisation and delivery.

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. The provider was meeting these standards.

- Information was made available in a variety of accessible formats.
- Staff had received training covering communication needs. They were fully knowledgeable in how each person communicated through their own individualised ways.

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.

- Staffing was planned to support people with activities and hobbies they enjoyed.
- People were supported to maintain relationships with people important to them.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Support plans reflected people's needs, likes and dislikes.
- A relative told us that they felt involved in their loved one's care.
- Staff spoke positively about how they had been able to personalise the support they provided. They supported people with things that mattered to people. Care plans and the support they needed was detailed to show clear guidance.

Improving care quality in response to complaints or concerns

- Staff fully understood people's behaviour's and explained how they responded when people needed support or reacted to something they didn't like.
- A complaints policy was available, however there had not been any formal complaints. This information was also available to people living in the home, and their relatives, in an accessible format.

End of life care and support

- The registered manager described the care and support they had in place especially with health care professionals if needed to help them with anyone needing specific support for end of life care.
- There was nobody receiving end of life care at the time of the inspection.

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 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, Continuous learning and improving care

- The provider had continued to assess quality and used their audits and action plans effectively to demonstrate good practice and good management within the service.
- A relative offered very positive feedback about the service and the manager, telling us, "The manager, she listens to me, I know all the staff names. I can ring her at her home if she's not at the home, she gave me her mobile number if I have any issues or need to talk. She said she's always at the end of the phone, amazing."
- Staff were clear about their roles and responsibilities and felt very supported by the registered manager.
- The registered manager understood the requirements of duty of candour, that is their duty to be honest and open about any accident or incident that had caused or placed a person at risk of harm.
- There was a commitment to continue to improve. Staff shared their opinions that the registered manager had completely developed the service to progress and develop good outcomes for each person.

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

- A relative and professionals spoke highly of the service. Staff were very supportive of the registered manager and their developments and the positive culture and impact this had on people.

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

- A relative commented on the communication they had with the team and felt it was very positive..
- Staff were positive about the responsiveness of the provider and management in progressing and developing the service.

Working in partnership with others

- The service worked well with other organisations. They had good relationships with local services, social care professionals and advocacy services.
- Professionals were very positive about the service. They told us they consistently observed good practice. They were confident that the staff supported people to achieve good standards of care that was personalised and well met people's needs.

