

Caretech Community Services (No.2) Limited

Wheatsheaf House

Inspection report

5 High Street
Cottenham
Cambridgeshire
CB24 8SA

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11 September 2019

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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?	Outstanding ☆
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Wheatsheaf House is a residential care home registered to provide personal care to eight people who have a learning disability. Accommodation is provided in one house with six bedrooms and two self-contained flats in the grounds. Six people were living at the service on the day of our inspection.

The service has been developed 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 the service and what we found

People continued to feel safe living at the service. Risk assessments had been completed to ensure that action was taken to keep people safe. Staffing levels were appropriate to meet people's needs in a timely manner. People received their medication as prescribed. There were systems in place to record, monitor and learn from accidents and incidents.

Staff had the knowledge, skills and support they required to meet people's needs effectively. People's physical, emotional and social needs were identified so staff could meet these. People received support with eating and drinking when needed. People were supported to maintain good health and were supported by or referred to the relevant healthcare professionals. People consented to their care or, when appropriate, best interest decisions were taken on their behalf.

People's needs and wishes were met by staff who knew them well and what made them happy. We saw and were told of many examples of staff going 'above and beyond' to help and support people they cared for. People's privacy and dignity was protected and promoted.

People, relatives and staff told us the service had strong leadership and an open and supportive culture. The service identified areas for improvement so that people received a good service.

The Secretary of State has asked the Care Quality Commission (CQC) to conduct a thematic review and to make recommendations about the use of restrictive interventions in settings that provide care for people with or who might have mental health problems, learning disabilities and/or autism. Thematic reviews look in-depth at specific issues concerning quality of care across the health and social care sectors. They expand our understanding of both good and poor practice and of the potential drivers of improvement.

As part of thematic review, we carried out a survey with the registered manager at this inspection. This considered whether the service used any restrictive intervention practices (restraint, seclusion and segregation) when supporting people.

The service used some restrictive intervention practices as a last resort, in a person-centred way, in line with positive behaviour support principles.

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 09 March 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?

Outstanding ☆

The service was exceptionally 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.

Wheatsheaf House

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 carried out by one inspector.

Service and service type

Wheatsheaf House is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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

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 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 four people who used the service. We spoke with three members of staff including the

registered manager, deputy manager and a support worker.

We reviewed a range of records. This included two people's care records and medication records. Records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We received feedback from three relatives of people who live at Wheatsheaf House

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 knew how to recognise abuse and reduce the risk of people suffering abuse. Staff had received training and had a good understanding of the providers safeguarding systems and procedures. They were confident the management team would address any concerns and make the required referrals to the local authority. The registered manager was aware of their responsibilities for reporting concerns to the CQC.
- All of the people that we spoke with told us they felt safe living at Wheatsheaf House. One person told us, "Yes I feel safe. If I want my space I can have it but if I need them staff are here." Family members told us that they were satisfied that their relatives were safe and staff knew how to support them. One family member told us, "I am very pleased with the way the carers use [relatives] coping and calming techniques."
- Information was available for people and for staff on adult safeguarding and how to raise concerns.

Assessing risk, safety monitoring and management

- Processes were in place to protect people from avoidable harm. Risk assessments were completed to identify risks to people's health and safety such as their risk of falls or road safety. Staff reviewed the risk assessments regularly and put actions in place to reduce these risks.
- The environment and equipment were safe and well maintained. Emergency plans were in place to ensure people were supported appropriately in the event of a fire.

Staffing and recruitment

- People we spoke with told us that they felt that there were enough staff available. Staff confirmed that they had time to support people with personal care and activities at a pace that suited the person.
- Safe recruitment practices were in place to ensure staff were safe to work with vulnerable people.

Using medicines safely

- Peoples' medicines were managed safely. Processes were in place for the timely ordering and supply of medicines and medicines administration records indicated people received their medicines regularly.
- Staff completed training to administer medicines and their competency was checked regularly.
- The management team completed monthly audits of medicines to ensure policies and procedures were followed and any errors or concerns were identified. Stock checks of medication were carried out on each shift and records were checked to ensure people had received their medicines as prescribed.

Preventing and controlling infection

- The home was clean, tidy and free of unpleasant odours.

- Staff had completed training in how to reduce the risk of infection and followed good practice guidance.
- There was a good supply of gloves and other protective equipment to reduce the risk of infection.

Learning lessons when things go wrong

- Staff followed the providers procedures when any accidents or incidents occurred. This included completing forms that the registered manager reviewed.
- The registered manager was analysing accidents and incidents to identify any trends. Where possible, action was taken to prevent a recurrence of accidents and incidents.

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 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 and documented people's physical, mental and social needs and preferences in relation to their care and they planned care based on this. People's outcomes were good. For example, one relative told us, "All the staff seem to genuinely care 100% that [family member] is not only cared for and safe but able to fulfil their potential and get the most possible out of life."
- People's care and support was regularly reviewed to ensure they were providing the right care and support in line with best practice and guidance.
- Where people were supported to manage their behaviour this was only done by asking them if they would like to spend some time on their own or would like any medication to help them to feel calm. No restrictions were placed on them and they were only given the medication if they wanted it and other supportive strategies had been tried.

Staff support: induction, training, skills and experience

- People and relatives told us that staff knew how to care for people and knew how to use equipment. Staff had received training when they first started working at the service and this was updated each year. One relative told us, "The care [family member] is given is excellent."
- Staff told us they received regular supervision on a one to one basis, and had an annual appraisal. The registered manager had improved the supervisions sessions so that they were more interactive and provided constructive feedback and acknowledgement of good work.

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

- People were supported to eat a varied and nutritious diet based on their individual preferences and dietary needs. People told us they were given a choice of food and drink that they enjoyed.
- Staff assessed people's nutritional needs and any risks related to their eating and drinking. They monitored people's weight and when they were at risk of losing weight they monitored the amount they ate.
- People were supported so that when their health affected their appetite they could choose their favourite foods to encourage them to eat. Staff sought the advice of specialist professionals when they identified a need.

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

- Staff supported people to attend appointments with health professionals such as GPs, dentists, chiropodist, opticians and hospital consultants. One relative told us, "When [family member] was unwell last year they [staff] went out of their way to help her access the care she needed."

- Relatives told us that they were consulted and kept informed about health issues. One relative told us, "Any issues regarding [family member's] health and well-being are discussed with me and dealt with promptly." Another relative told us they received, "essential updates I need on important issues like healthcare" from the registered manager.
- Staff had good relationships with other professionals who had contact with the service. One healthcare professional told us, "The staff are willing to change their approach based on advice, and actually I have noted that they are better at this than the majority of services that I come into contact with."

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

- Wheatsheaf House is not purpose built but at present meets the needs of the people living there. It is very homely and welcoming and people had chosen how they would like their bedrooms decorated. People could choose if they wanted a key to their bedroom.

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 obtained consent for people's care and support where possible. Staff had a good understanding of the principles of the MCA and people were supported wherever possible to make their own decisions.
- When people could not make a decision, staff completed a mental capacity assessment and the best interest decision making process was followed and documented. Staff tried to ensure that any action taken was done in the least restrictive way possible. DoLS applications had been made when required.

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 improved to Outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- There was a very caring and friendly atmosphere in the home between staff and people using the service. Staff clearly knew people very well and were able to tell us about individuals and their lives and families. One relative told us, "The current staff and management seem excellent to me. They are caring and responsive and keep me informed. [Family member] seems very happy there and considers the place their home." Another relative told us, "The manager always seems well organised and caring and proactive in dealing with situations that arise."
- People and their relatives told us that staff treated them with respect and gave them the level of support they wanted. One relative told us, "I am very happy to share my experience of Wheatsheaf House because the care my [family member] receives is outstanding. She has lived there for nearly 4 years and I just wish she had experienced this care previously."
- People's diverse needs were respected and care plans identified people's cultural and spiritual needs. For example, extra staff were provided every Sunday so that one person could be accompanied to church.
- People and relatives all told us they had felt they were treated fairly and were free from discrimination. Where people couldn't communicate with words staff had tried to use different communication aids. For one person this had not been successful and they communicated using different sounds. Staff had written down the sounds and what they meant so that the person could communicate with people that didn't know them as well as the regular staff did. This had meant that the person was able to express their likes, dislikes, how they were feeling and what they wanted to do.

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

- The registered manager and staff had gone the extra mile when trying to support one person with their dental care. The person had a phobia of dentists and had not visited one for several years. Their poor dental health had meant they had not been able to eat the foods they enjoyed. The staff team had taken time to mentally prepare the person to attend a dentist and stayed with them whilst they received treatment.
- People told us they were able to choose how and where they spent their day. We saw that one person had enjoyed a lay-in and had chosen to have a late breakfast. Another person told the staff that they would like to go to a local shop and this was arranged. Because the shop had poor access the registered manager had arranged with the shop staff that they would gather some items and take it to the person outside the shop to look so they could decide if they wanted to make any purchases. The person showed us what they had purchased when they returned from the shop. They told us that their purchases made them feel happy.
- One person told us how they had suffered the loss of a family member at the same time as being very unwell themselves. They stated, "If I didn't have the staff here to support me through it I wouldn't be here

today." They said they had told the registered manager that they wanted to raise money for medical research as a way of showing how thankful they were for their treatment. The registered manager arranged for them both to take part in an annual sponsored walk. The person told us, "It makes me feel proud that I'm doing something to help. It was brilliant having [the registered manager] to do the walk with me."

- One person told us they suffered with anxiety and in the past had used alcohol to help them cope with their feelings. They went on to tell us, "Staff know me very well, they can tell when I'm feeling stressed and help me to calm down, sometimes I just need someone to talk to". They explained that this had meant they hadn't had any alcohol for a long time which in turn had meant they were able to manage their own money and buy 'nice' things. They told us that this had made them feel "really proud."

Respecting and promoting people's privacy, dignity and independence

- One person told us that they had really enjoyed working in a voluntary role in a café at a local hospital. However, it took them two bus rides to reach the café and as they were getting older they found it too tiring. They then told us that they had shared their concerns with the staff and the staff had found a café nearer to Wheatsheaf House when they could volunteer. They stated that working in the café made them, "Feel brilliant". They also said, "When I moved here I was like a stranger but because of the job I have lots of friends."

- Staff maintained people's privacy and dignity when assisting them with personal care. It was done discreetly; staff told us they always closed doors and kept people as covered up as possible. The registered manager told us that all staff were told that they must knock on people's bedrooms doors and wait for a reply before entering. We saw staff doing this during the inspection.

- Staff told us that they tried to offer people choices and encourage them to be independent. One staff member told us that because the staff team knew people so well they were very good at knowing how to offer choices in a meaningful way and in way not to cause the person anxiety.

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

- The support plans were detailed and included information on each aspect of the person's needs such as, eating, personal care, communication and moving and handling. The information was person centred and described what the person was able to do and how staff should support them.
- People also had health support plans in place which detailed any health issues, appointments and treatment they had received. The registered manager stated in the pre-inspection information that they had worked with numerous health and social care professionals to ensure that people received the support that they needed. The records showed this to be the case.

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 registered manager was aware of the accessible communication standards and told us of ways in which the service was meeting the standards. Each person's care plan included a section about how information could be made accessible to that person. For example, one person's care plan had been read to them by a member of staff and they had then stated that they agreed with what was written and this was recorded.

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 undertake individual activities based on their interests and one to one time was allocated for some people. Some people choose to undertake voluntary work, attend community centres, trips out and social activities.
- People were supported to maintain relationships that were important to them. The registered manager kept people's relatives up to date with phone calls and emails and encouraged them to visit when possible. One relative told us, "When I visit around once a month I always feel so welcome and having arrived unexpectedly on more than one occasion I know that what I see is what happens all the time."

Improving care quality in response to complaints or concerns

- People told us if they wanted to complain they would speak to the registered manager, deputy manager or a member of the staff team. One person told us that they regularly left notes for the registered manager if

they wanted to check anything with them. They said that this helped them to manage any anxieties. The registered manager told us that they kept all of the notes and ensured they responded to all of them.

End of life care and support

- Where people were happy to discuss their wishes they had end of life care plans in place. The registered manager was working with people's families where appropriate to discuss their wishes for their family members.

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 deputy manager were both very passionate about providing a service that met people's needs and allowed them to reach their full potential. One relative told us, "[The registered manager] is fantastic as care home manager. She is superb at leading her team and has provided my [family member] with so many new opportunities." The manager had won "Caretech, The Most Inspiring Manager" award last year, both regionally, and then nationally. The Manager had also been nominated and got through to the finals of "The Great British Care Awards" an external Care awards.
- An open culture was encouraged where staff could learn from mistakes, good practice was recognised and staff were encouraged to progress through their career if they wished to.
- The manager was working two shifts a month to ensure that they were aware of the day to day culture of the home and was able to observe staff and offer guidance when needed.
- Staff were aware of the values of the service and how to achieve them.

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 had an action plan to take forward improvements to the service based on recent training they had attended and internal quality audits.
- The registered manager was clear about her responsibilities for reporting to the CQC and the regulatory requirements. Risks were clearly identified and escalated where necessary.
- Staff were extremely positive about the skills and leadership of the registered manager. A member of staff said, "I can ask [the registered manager] anything, she is very approachable. If I have a problem she solves it."

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

- People and staff were encouraged to contribute their views on an ongoing basis informally and through surveys.
- Formal house meetings had not been successful for the people that lived at Wheatsheaf House so people met and had chats with staff in smaller groups in a more informal way. Any ideas that were discussed such as somewhere they wanted to visit was then recorded on an outcome form. The task was then assigned to a member of staff including the action needed. This was then marked as completed when the task was

complete. For example, two people had wanted to go on holiday, so the staff helped them to arrange the trip.

Continuous learning and improving care; Working in partnership with others

- The management team completed a full range of quality audits on a monthly basis and we saw that actions were identified and addressed to bring about improvements. Audit results were monitored by the provider and representatives of the provider visited monthly to provide support and undertake their own quality monitoring.
- Information from analysis of incidents and accidents, feedback from people and their relatives and health and social care professionals and complaints were used to continually improve the service being offered.