

Active Care Homes Limited

Cantley House

Inspection report

12 Woodcross Avenue
Cantley
Doncaster
South Yorkshire
DN4 6RU

Tel: 01302537622

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16 August 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?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service:

Cantley House is a care home registered to care for three people who have a learning disability or autistic spectrum disorder. At the time of the inspection three people were living in the home.

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 positive behaviour support principles to support people in the least restrictive way. No restrictive intervention practices were used.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

We found the outcomes for people using this service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

People's experience of using this service:

People were safe and protected from avoidable harm and relevant risk assessments were in place. People told us they felt safe living in the home. People's medicines were managed well, and the home was clean and tidy throughout. There were enough staff on duty to ensure people's needs were met and they had been recruited in a way that helped to keep people safe.

People were supported to eat and drink. Where people had specific dietary needs, these were provided for. Communication was effective within the staff team and people were supported to access healthcare services as needed. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. All staff received appropriate training, support and supervision.

Staff were kind and caring towards people and had developed very strong and positive relationships with them, knowing them well, including their histories, likes and dislikes. People were treated with dignity and respect, they were involved in making daily decisions and encouraged to develop and maintain their independence.

Care plans were personalised and detailed. They included information about people's preferences and abilities. People were supported to make day to day choices and decisions about their lives and were able to participate in their hobbies and interests. Staff supported people to participate in a range of activities. There was a focus on treating people with equality and on involving and empowering those with communication difficulties, to ensure their voices were heard and valued. There was a system in place to manage complaints.

Leadership and management were of good quality and people who used the service, their relatives and representatives were involved in how the service was run and operated. Systems of governance were in place to monitor the quality of the service provided and staff felt supported and spoke positively about the registered provider and the registered manager.

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

Rating at last inspection:

The service was rated good at the last inspection in January 2017 (published February 2017).

Why we inspected:

This was a planned inspection based on the rating awarded at the last inspection.

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.

Cantley 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was undertaken by one adult social care inspector.

Service and service type:

Cantley House is a 'care home.' People in homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and care provided, and both were looked at during this inspection.

The service specialises in providing care and support to people with learning disabilities and other complex needs, such as autism. The accommodation is an ordinary family home in the community.

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 visited Cantley House on 16 August 2019. We gave the registered manager short notice that we were going to visit. This was because this is a small service and we wanted to be sure someone would be in when we visited.

What we did:

The provider had completed a Provider Information Return (PIR) in April 2019. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. This information was used to help inform our inspection.

Prior to the inspection we reviewed information we had received about the service. This included reviewing any notifications of accidents and incidents and information we had received from external agencies. We also received feedback about the service from one social care professional.

This inspection included spending time with two of the three people who lived at the home, the registered manager, two senior care workers and two care workers. We reviewed two people's care records, two staff personnel files, audits and other records about the management of the service. We spent time observing interactions between staff and people in the home.

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

- Systems in place to safeguard people from abuse were effective.
- We saw that people were comfortable in the presence of the staff and people told us they felt safe.
- Staff had received safeguarding training and were clear about what may constitute abuse and their responsibility to report any concerns. They were aware of the guidance about whistleblowing. Whistleblowing is one way a worker can report concerns, by telling someone they trust.

Assessing risk, safety monitoring and management

- Risks to people's health, welfare and safety were well managed.
- The management of risk was practical and proportionate and did not negatively impact on people's activities and freedom.
- Person centred risk assessments were in place ensuring risks to people's well-being were assessed. These were clearly documented and updated when people's needs changed.
- People were safely supported by equipment that was serviced and checked on a regular basis.

Staffing and recruitment

- There were enough staff to ensure people received prompt care, support and regular interaction.
- There were enough suitable, trained staff and they were very attentive to people's needs.
- People told us there were always enough staff to help and support them, and to accompany them when they wished to go out.
- The provider followed safe recruitment practices which helped to make sure people were protected against the employment of unsuitable staff.
- People told us they played a part in staff recruitment decisions. This meant they had some influence on who was employed to support them and staff retention was very good.

Using medicines safely

- People were provided with safe and appropriate support with their medicines, which were stored and managed safely.
- Staff completed training and were assessed as competent before administering people's medicines.
- People's plans included information about the medicines they were prescribed and clear guidance about the support they required from staff.
- Regular medicines audits were completed. Medicines records were checked by the management team to make sure people received their medicines as prescribed. The audits reflected that errors were very rarely made. In part, because there was a very stable staff team who were familiar with people's medicines and how they liked to take them.

Preventing and controlling infection

- Effective measures were in place to prevent and control the spread of infection.
- People told us they were happy with the way staff supported them to keep their home clean.
- Staff were trained in infection control.
- Gloves and aprons were readily available for staff, who used them when needed. This helped prevent the spread of infection.

Learning lessons when things go wrong

- The service learned from past incidents and accidents to enable them to support people better.
- The management team were keen to develop and learn from events and used this as an opportunity to improve the service for people and for staff.
- Accidents and incidents were recorded and analysed. This enabled possible trends to be identified and, where needed, action to be taken to reduce future risk.
- Regular staff meetings included discussion about any incidents, and lessons learned.

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

- People's needs were assessed, and care and support was delivered in line with people's choices and preferences.
- People and those important to them such as their close relatives, were involved in the assessment process.
- Everyone's feedback was very positive. One person told us, "[The staff are] good. They help me. They listen to me. This is my home."
- Care records and risk assessments showed people's support was provided in line with current good practice guidance.

Staff support: induction, training, skills and experience

- People were supported by staff who had the skills and knowledge to support them effectively.
- There was an effective, ongoing programme of training for staff. All staff members had completed nationally recognised vocational qualifications and attended regular training updates.
- Staff told us they received regular supervision and appraisal. This helped to monitor their performance and support them in their roles.

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

- People received a balanced diet, which took into consideration their preferences and dietary requirements.
- Staff knew people's likes and dislikes and people were offered a good choice of drinks and food.
- People told us they were happy with the food and one person said, "[Staff member] is a good cook."
- Where people's culture included specific dietary needs, people's wishes were facilitated and respected.
- Where people were at risk of not maintaining a balanced diet, there was information in their care plans guiding staff how this should be addressed.
- When needed, staff closely monitored people's food and fluid intake. and sought advice from relevant community healthcare professionals.

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

- Staff worked well with external professionals to ensure people were supported to access health services and had their health care needs met.
- People were happy with the way staff supported them to book and attend health care appointments. They told us if they felt unwell, staff were caring and helpful. One person said, "[Staff] look after me and get the doctor."

- Care plans included information about people's health so staff could provide appropriate support.
- People's health needs were assessed and planned for, to make sure they received the care they needed.

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 with appropriate legal authority. 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 service was working within the principles of the Mental Capacity Act 2005.
- Where people had been deprived of their liberty the home had requested DoLS authorisations from the local authority to ensure this to be lawful and people's rights were protected.
- People were supported by staff who were appropriately trained and knew the principles of the MCA.
- People's mental capacity to make decisions was assumed unless there was evidence to suggest otherwise and there was an emphasis on involving people and enabling them to make choices wherever possible.

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

- Cantley House was very homely in style and decorated to suit the needs and preferences of the people who used the service.
- People's bedrooms very much reflected their individual preferences and interests.
- Where there was a need to redecorate, this was identified and planned for.

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

- There was a person-centred culture, with staff ensuring people were treated equally and fairly.
- People told us staff treated them with kindness and respect and we observed this to be the case. One person said, "Staff are kind. They care for me."
- We saw very positive interactions between people and the staff supporting them. The staff members' approach was supportive, caring and inclusive and there was gentle, good humoured teasing between people and staff.
- People's diversity and individuality were respected, and their rights were considered when their care was being planned. Staff received training in equality and diversity and spoke to people with warmth and respect,
- Staff we spoke with had a very good understanding of people's individual communication, care and support needs.

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

- We saw staff consistently involving people, asking their opinions, and offering choices.
- People's feedback and care records showed people's views were central to how their care was planned and delivered. People told us they were involved in decision making in relation to their care and support.
- It was evident staff had a clear understanding of people's likes and preferences.
- People told us staff knew them well and they were encouraged to make choices in all areas of their lives. One person said, "I like the staff. They know what I like."
- People and those who were important to them, such as close relatives, and sometimes, independent advocates, were involved in planning their care. This meant people's care was planned as they preferred. An advocate is someone who can help people say what they want and make sure their rights are protected.

Respecting and promoting people's privacy, dignity and independence

- Observation, discussion and records showed us staff upheld people's dignity and privacy.
- People were supported to maintain and develop their independence.
- The service maintained their responsibilities in line with the General Data Protection Regulation (GDPR). The GDPR sets out guidelines for the collection and processing of personal information. People's confidentiality was respected, and their personal information was kept securely.

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 meet people's needs, preferences, interests and give them choice and control

- People benefitted from a service that provided personalised care.
- People's care records were person-centred and detailed. Care plans noted information about people's daily routines, including the tasks they could do independently and where they needed support.

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 enabled to participate in a diverse range of activities, to suit their individual preferences.
- Staff were proactive in seeking opportunities for people to have different experiences and to do things in the community. People's plans confirmed they had regular opportunities to access their local community and for trips and holidays, further afield.
- One person told us they were very happy with the support staff gave them to follow their hobbies and interests. They said they went out a lot.

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.

- We saw examples of different types of communication being used in the service to support people's understanding and engagement. People's care plans also provided information about this.
- Information on display was available in different formats to make it easier for people to understand.

End of life care and support

- People's care records included information from people and their families about their preferences for when people neared the end of their life.
- No one using the service was receiving end of life care at the time of the inspection.

Improving care quality in response to complaints or concerns

- People said they were happy with the care and support provided, but would not hesitate to tell staff, the registered manager and the company directors, if they had any concerns.
- Clear complaints records were in place detailing the actions taken following any complaints. There was evidence of an open culture and clear learning from complaints and adverse events.

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; 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

People and staff spoke highly of the managers, company directors and the support they provided. They told us the managers were always approachable and helpful.

- The culture at Cantley House was open, welcoming and inclusive of people's unique needs and diversity. People and staff told us they were a good team that worked together well.
- Staff told us they felt well supported. One staff member said, "I absolutely love my job. It's a like a home from home. The staff are all lovely and you couldn't wish for a better manager."

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

- All staff we spoke with were clear about their role and responsibilities and there was a focus on continuous improvement They were professional and open when speaking with us about their role and the people they supported.
- We saw a range of audits were completed at regular intervals by different members of the staff and the registered manager. These were effective in identifying and addressing areas for improvement.
- Audits were also carried out regularly by the company directors to assess the overall quality of the service. This included ensuring the registered manager was undertaking their role effectively and working in line with regulatory requirements. This contributed to a culture of continuous improvement within the service.
- The registered manager understood the responsibilities of their registration. Notifications had been submitted to CQC as required by law and the rating of the last inspection was on display within the home.

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

- Regular meetings were held with people who used the service and their feedback was discussed at staff meetings.
- The registered provider also asked people and their relatives to complete surveys about the quality of the service on a regular basis. The feedback the service received from people and their relatives indicated the home was well run, people were happy, and their individual needs were met. Any areas identified for improvement were used for further learning and making improvements.
- Staff meetings were held regularly and covered a range of topics. Staff we spoke with said information was shared effectively and they were able to make meaningful contributions during the meetings.

Continuous learning and improving care

- The service had maintained the person centred care, activities and independence for people seen at the last inspection in 2016, demonstrating that good management and leadership had been sustained over this time.
- The registered manager and the staff we spoke with were clear in their wish to learn and continually improve the quality and safety of the service provided to for people.
- The registered manager told us they attended regular meetings with members of the senior management team, an element of which was to ensure learning and good practice were shared.

Working in partnership with others

- People experienced care which was person centred, from a service that understood their needs.
- Discussion and records showed the provider, registered manager and staff team endeavoured to work in partnership with health care professionals, organisations and other community and social care providers.