

Taptonholme Taptonholme

Inspection report

14 Taptonville Crescent Sheffield South Yorkshire S10 5BP

Tel: 01142663440 Website: www.taptonholme.co.uk Date of inspection visit: 12 December 2023 21 December 2023

Date of publication: 01 January 2024

Good

Ratings

Overall rating for this service

Is the service safe?	Good	
Is the service well-led?	Good	

Summary of findings

Overall summary

About the service:

Taptonholme is a care home. It can accommodate up to 19 people in an adapted older building. It provides personal care for older people, including people living with dementia. There were 13 people using the service at the time of the inspection.

People's experience of using this service:

People told us they felt safe. Staff understood safeguarding and whistleblowing procedures. Relatives said their family members were kept safe. Staff knew people well and risks were identified. Staff told us there were enough staff on duty to meet people's needs, people told us there were always staff available and did not wait long for assistance. There was a safe recruitment process, which ensured only staff suitable to work with vulnerable adults were employed. Accidents and incidents were effectively monitored, which ensured staff learned when things went wrong. People were protected by the prevention and control of infection. Medication systems were in place and followed by staff to ensure people received their medicines as prescribed. We identified some documentation could be improved. However, this had already been picked up by the managers quality monitoring systems and was being addressed. We were sent evidence this had been completed following our site visit.

Staff we spoke with were knowledgeable about people needs. We observed that care provided was personcentred and individualised. Staff received effective training to ensure their knowledge was up to date. Staff were supervised and supported. 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 had access to health care professionals, staff worked closely with professionals to ensure people's needs were met. We observed interactions between staff and people who used the service these were positive, inclusive, respectful, and person-centred, promoting people's well-being.

There was a quality monitoring system in place. Audits were undertaken to ensure good quality care and support was provided and any improvements required implemented. Relatives felt listened to and said staff and management were approachable. People we spoke with told us their views were obtained to continually drive improvements. Feedback from staff was extremely positive, told us communication was very good and the registered manager and new deputy were approachable, visible, listened and took appropriate action.

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 11 November 2017).

Why we inspected:

2 Taptonholme Inspection report 01 January 2024

This inspection was prompted by a review of the information we held about this service. As a result, we undertook a focused inspection to review the key questions of safe and well led. For those key questions not inspected, we used the ratings awarded previously to calculate the overall rating.

The overall rating for the service remains good.

Follow Up:

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good •



Taptonholme 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 Health and Social Care Act 2008.

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 1 inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Taptonholme is a care home. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Taptonholme is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection The inspection was unannounced.

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 (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 6 people who used the service and 2 relatives about their experience of the care provided and obtained feedback from commissioners. We spoke with 6 members of staff including the registered manager, deputy manager, senior care worker, care workers and the cook.

We reviewed a range of records. This included people's care records, medication records and weight records. We looked at staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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 the rating for the key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

• People were safe. People told us staff made them feel safe. Relatives we spoke with told us people were safe. Everyone we spoke with told us the staff made them feel safe and provided good care and support. One person said, "I feel very safe, if I didn't, I would tell them [staff]."

• The provider had a safeguarding policy in place. The registered manager and staff knew the process to follow to report any concerns. Safeguarding concerns raised had been reported appropriately following procedures to safeguard people.

• Staff understood the importance of the safeguarding adult's procedure. Staff knew how to recognise and report abuse.

Assessing risk, safety monitoring and management

• Risks were assessed and managed to keep people safe. We observed people being supported to mobilise around the home safely and appropriately, and in a dignified manner.

• People told us they were extremely happy with the care and support they received. One person said, "The whole atmosphere is very welcoming, they [staff] are very good to me". Another person said, "They [staff] do look after me well."

• Care plans contained detailed risk assessments for staff to follow to ensure people's safety. People were supported to manage risks to maintain an independent lifestyle.

• People participated in their care planning as much as possible and care records detailed people's involvement and their relatives where applicable. Relatives we spoke with, told us they were extremely happy with the care and support people received.

Using medicines safely

• Medication procedures were in place to ensure people received medicines as prescribed. We observed staff administer medicines safely following protocols.

• Staff received training in medicines management and were competency assessed to ensure safe administration of medicines.

• People told us they received their medication as prescribed.

Preventing and controlling infection

• We were assured that the provider was preventing visitors from catching and spreading infections.

• We were assured that the provider was supporting people living at the service to minimise the spread of infection.

• We were assured that the provider was admitting people safely to the service.

• We were assured that the provider was using PPE effectively and safely.

- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

We have also signposted the provider to resources to develop their approach. Since our site visit the registered manager sent us confirmation these areas had been addressed.

Visiting in care homes

• People were supported to maintain relationships with family and friends who were welcome to visit the home without restrictions.

Staffing and recruitment

• Staff were effectively deployed to meet people's needs. We observed staff respond to people's needs in a timely way.

• Staff told us there were enough staff to meet people's needs safely.

• Relatives told us when they visited there was always staff available. People told us staff were around when they needed support. One person said, "When I press my call bell, staff come and attend to me, I don't wait long." We observed staff were available to support people when required and were visible in communal areas.

• Appropriate recruitment checks were conducted prior to staff starting work, to ensure they were suitable to work with vulnerable people.

Learning lessons when things go wrong

• The registered manager had a system in place to monitor incidents and understood how to use them as learning opportunities to prevent future occurrences. The local authority had identified the registered manager was over reporting and some incidents were not required to be reported. The registered manager was seeking further support from the local authority regarding incident reporting to ensure consistency.

• The registered manager ensured lessons were learnt to prevent or reduce incidents. For example, when audits identified shortfalls, this would be analysed, and any improvements required would be implemented.

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 good. At this inspection, the rating for the key question remains good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care; Managers and staff being clear about their roles, and understanding quality performance, risks, and regulatory requirements.

- Quality monitoring systems were in place that were robust and detailed. These were identifying issues and at the time of our inspection.
- Information from the quality assurance systems were used to inform changes and improvements to the quality of care people received. Lessons learnt were completed and shared with staff to drive improvements.
 Staff were happy in their roles and felt supported. Staff spoke highly of the team; they told us there was a consistent approach to ensure all staff were supported and well led.

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

• The management team demonstrated an open and positive approach to learning and development. They were passionate about improving the service to ensure positive outcomes for people they supported and staff. People told us they received person centred care that met their needs. One person said, "On one occasion, [staff] put a flower from the garden in a small vase for me, this was to cheer me up". Another said, "We are treated with dignity and respect, the staff are lovely to us."

• The manager understood their legal requirements and complied with their duty of candour responsibilities. People told us staff and management kept them informed of any issues and concerns and were open and honest. Relatives spoke highly of the staff and told us they were kept informed of all changes and updates.

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

• The provider engaged with people and their relatives. Quality monitoring questionnaires had been completed. We saw copies of these and the responses were extremely positive. One person said, "There is nothing the home could do better."

• Staff meetings were held to obtain staff's views and to share information. Staff confirmed meetings were held regularly and were effective. They also told us the management team were very approachable and listened and they felt valued. One staff member said, "We [staff] are very well supported." Another said, "We work well as a team, I like working here."

Working in partnership with others

• The manager had links with others to work in partnership to improve the service. This included commissioners, health care professionals and relatives.