

Bondcare (London) Limited

Chatsworth Grange

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

Chatsworth Grange is a care home that provides care and accommodation for younger and older adults; including people living with dementia. The home can accommodate up to 66 people in one adapted building. The home is split into four separate units, across two floors. A secure garden surrounds the home. At the time of this inspection there were 62 people living in the home.

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

People were happy with the care they received. People felt safe and well-treated by staff. Staff knew about people's needs and preferences, and this led to people receiving personalised care. People were treated with dignity and respect, and their independence was promoted.

People living at Chatsworth Grange, their relatives and staff said they would recommend the home to family and friends. A relative commented, "I would definitely recommend it; book us in! Staff are really friendly. It's like a home from home."

Risks to people were assessed and minimised, to help them remain safe from avoidable harm. People were happy with the support they received with their medicines. We identified some minor improvements could be made to medicines management records.

People were supported by staff who received a range of training to ensure they had the right skills and experience to carry out their roles effectively. Staff supported people to maintain their health and they sought timely advice from health professionals, when needed.

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 told us staff responded to them quickly and we found there were enough staff on each shift to meet people's needs. People said they would not hesitate to raise any concerns with staff. We found complaints were appropriately managed.

The home was well-run, by an experienced registered manager. A range of regular checks were made on the quality of the care delivered, to ensure people received good quality care, in a comfortable environment. The home was clean, and people had access to facilities and any equipment they needed.

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

Rating at last inspection

The last rating for this service was good (published 14 September 2018). Since this rating was awarded the registered provider of the service has changed. We have used the previous rating to inform our planning and decisions about the rating at this inspection.

Why we inspected

This was a planned 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.

Chatsworth Grange

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

This inspection was completed by an inspector, an assistant inspector, a specialist advisor and an Expert by Experience. The specialist advisor had clinical experience of nursing care. 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

Chatsworth Grange 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 CQC. This means the manager and provider are both legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This 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 Healthwatch (Sheffield). Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

The provider was not asked to complete a provider information return prior to this inspection, due to the timing of the inspection. This is information we require providers to send us annually, to give some key

information about the service, what the service does well and improvements they plan to make.

During the inspection

We spoke with 11 people who used the service and 10 relatives about their experience of the care provided. We spoke with 13 members of staff including the registered manager, deputy manager, nurses, care workers and other ancillary staff. We spoke with two community health professionals who visited the service during this inspection, to obtain their views about the care people received.

We reviewed a range of records. This included five people's care records, multiple medication records and various documents from one other care record. We checked a variety of records relating to the management of the service, including policies and procedures.

We spent time observing the daily life in the service and we looked around the building to check environmental safety and cleanliness.

After the inspection

We sought some more documents from the registered manager. They were provided in a timely manner and were used to inform our judgements.

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 good. At this inspection this key question has remained good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- People's medicines were ordered, stored, administered and disposed of safely. People received their medicines, as prescribed.
- Staff were patient and respectful when they supported people to take their medicines. They offered medicines to people in a discrete manner to promote people's privacy and dignity.
- Some improvements were needed to the management of 'as and when required' (PRN) medicines. Staff followed 'PRN protocols' which contained guidance about how to support people with each PRN medicine they were prescribed. However, some PRN medicines did not have a corresponding protocol for staff to follow and some protocols would have benefitted from additional detail.

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

- People were protected from avoidable risks and their safety was promoted. People's care records contained assessments detailing the specific risks posed to them, and guidance for staff about how to manage those risks.
- Staff completed regular checks of the building and the equipment they used, to ensure it remained safe. The home had safety certificates in place for the premises and the equipment they used.
- The provider had suitable systems in place to learn from any accidents or incidents. All accidents and incidents were recorded by staff and analysed by the registered manager, to try to identify any themes or trends. This information was used to help reduce the risk of repeat events and to make continuous improvements to the safety of the service.

Systems and processes to safeguard people from the risk of abuse

- People felt safe living at Chatsworth Grange. People and their relatives told us they had no concerns about their safety. Comments included, "Yes, the staff here make me feel safe" and "We have no anxiety at all about leaving [name of family member] here."
- The provider used appropriate systems to safeguard people from abuse. Staff received training about how to safeguard adults from abuse and they were all confident the registered manager would act quickly on any concerns they raised. The registered manager had made appropriate referrals to the local safeguarding authority, when required.

Staffing and recruitment

- There were enough staff available to keep people safe and to meet people's needs in a timely manner. There was a continuous staff presence throughout the home and staff engaged well with people throughout the day.
- People's relatives provided mixed feedback about staffing levels. Some relatives told us there were always

enough staff on shift, but others felt the home would benefit from increased staffing levels. Though this feedback was mixed, people told us staff responded to them promptly. A person commented, "If you buzz, you always get someone".

- The provider used safe recruitment practices when employing new members of staff.

Preventing and controlling infection

- People were protected from the spread of infection. The provider had a policy which staff were required to follow to promote effective infection control practices. Staff wore personal protective equipment, such as gloves and aprons, when delivering care, to help prevent the spread of infection.
- The home was clean and well-maintained. People told us the home was always "spotlessly clean".

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 good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Staff worked with other organisations to deliver effective care and support to people. Staff regularly sought advice from community health professionals such as the GP and falls prevention professionals. This supported staff to achieve good outcomes for people.
- Staff supported people to maintain their health. The community health professionals visiting the home on the day of this inspection provided positive feedback about the home. They said staff were very good at following any advice they gave to promote people's health, and staff made appropriate, timely referrals to their respective health services. One visiting professional commented, "Staff know people really well and will often request a visit from me where it's not immediately obvious what is wrong, but they've picked up on subtle changes to the person."
- People were happy with the support they received to access other services. A person commented, "If you're ill, the staff take action and knowing that makes you feel safe."

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and skilled; they carried out their roles effectively. Staff completed training in a range of different subjects to ensure they had the right skills, knowledge and experience to deliver effective care. Staff were happy with the training they received.
- Staff received regular support and supervision to review their competence, discuss areas of good practice and to consider ways they could continue to improve. Staff told us they felt well supported by the registered manager. They felt able to raise any concerns or questions with them.

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

- People's nutritional and hydration needs were met. When people required a special diet because of medical or cultural reasons, this was catered for. Kitchen staff were provided with information about people's dietary requirements and people's care records contained information about their dietary needs and preferences.
- A range of good quality food and drink options were provided. Hot drinks, juices, milkshakes and snacks were served throughout the day and people were afforded a choice of different food options at mealtimes.
- Staff supported people to eat their meals in a sensitive and caring manner.

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

- The premises had been adapted to meet the needs of people using the service, including people living with dementia. Bathroom doors and doors to communal rooms had appropriate signage displayed on them.

- Further improvements could be made to the signage displayed within the home, in accordance with good practice guidance. For example, research into dementia friendly environments suggests if people cannot find the toilet this can provoke anxiety. Directional signage that can be seen from all areas of the home could alleviate this, and support people to navigate around the home more effectively.
- People were happy with the facilities available in the building and they had been supported to personalise their bedrooms, so they felt at home. A person commented, "It's good, it's nicely kept and it's comfortable in terms of places to sit and relax."

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

- The provider used effective assessment tools to ensure people's needs were assessed and kept under review. Staff assessed people's needs before they moved into Chatsworth Grange and a detailed care plan was written for each person, to guide staff in how to care for them.
- People and their relatives were involved in the assessment and care planning process, to ensure care was delivered in accordance with people's needs and preferences.
- People and their relatives were happy with the care they received at Chatsworth Grange. A relative commented, "I'm very happy with the care [my relative] gets."

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, whether any deprivations of liberty had the appropriate legal authority and whether any conditions on authorisations were being met.

- Staff understood the importance of supporting people to make their own decisions and they obtained consent from people before they provided any care and support.
- People's capacity to make certain decisions had been assessed, where appropriate. Best interest decisions were recorded in people's care records and we were satisfied relevant people had been involved in making those decisions.
- DoLS applications were appropriately submitted to the local authority. Where authorisations were granted or were made subject to conditions, people's care records were updated to reflect this, so all staff were aware. Conditions on people's authorisations were complied with.
- We were satisfied the service was working within the principles of the MCA.

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 good. At this inspection this key question has remained good. 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

- Staff were kind, caring and compassionate and they treated people well. People and their relatives commented, "The staff are lovely", "I couldn't wish for better staff" and "It's first class here. The staff are marvellous."
- Staff demonstrated a very good knowledge of people's personalities, individual needs and what was important to them. It was evident staff knew people well, and this supported them to respect people's individuality and preferences. A relative commented, "Staff know [name of family member] very well; better than we do, actually."
- Staff were attentive to people throughout the day and provided effective support if people became distressed or anxious. They spoke to people in a calm, friendly manner and it was clear people had developed positive relationships with staff.
- Care and support was delivered in a non-discriminatory way and the rights of people with a protected characteristic were respected. Protected characteristics are a set of nine characteristics that are protected by law to prevent discrimination. For example, discrimination based on age, disability, race, religion or belief and sexuality.

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

- Staff supported and encouraged people to make decisions about their care. People were afforded choice and control in their day to day lives. We observed staff asking them what they wanted to do during the day and where they would prefer to spend their time.
- Relatives told us they were kept informed about their family member's care. People and their relatives had been involved in the assessment and care planning process. A relative commented, "They ring me straight away if they need to ask something, or if anything happens."

Respecting and promoting people's privacy, dignity and independence

- Staff were respectful of people's privacy and they treated people with dignity and respect. Staff knocked on doors and called out before they entered bedrooms or toilet areas. A relative commented, "Staff do respect [my relative] and make sure the door is closed whenever they're attending to them."
- People were encouraged to maintain their independence. Their care records explained what they could do for themselves and what they needed staff to support them with. We observed staff provided people with appropriate encouragement and equipment to enable them to complete tasks for themselves.

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 good. At this inspection this key question has remained good. This meant people's needs were met through good organisation and delivery.

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

- Staff welcomed people's relatives and friends into the home to support people to maintain important relationships. Staff supported people to celebrate events that were important to them, such as birthdays and anniversaries, with their family and friends.
- People were able to take part in different activities according to their interests. The provider employed three activity coordinators who arranged a programme of activities to keep people occupied and entertained. A 'pub' room had been created within the home which supported people to socialise and develop new relationships. Every Friday staff supported people to go to the 'pub' and take part in pub games.
- Most people and relatives told us there were enough activities and events that were of interest to them. Some people thought the home needed to provide more social stimulation for people at weekends when there was less going on.

End of life care and support

- The provider had systems in place to support people at the end of their life to have a comfortable, dignified and pain-free death. People were given the opportunity to express how they would like to be cared for at the end of their life.
- Some people's care records required improvement in this area, to reflect that although they did not want to discuss their end of life wishes, staff had regularly re-visited this topic with them, to ensure no opportunities to express their preferences were missed.
- Staff worked closely with community health professionals when providing care to people at the end of their lives, such as the GP and palliative care nurses. This helped to ensure people received consistent and coordinated support.

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

- People's care records were detailed, person-centred and accurately described the support they needed from staff. Care records were regularly reviewed to ensure they remained up to date.
- Staff knew people very well and delivered care in accordance with people's preferences. People's care plans contained information about their life history and interests; this supported staff to build positive relationships and bonds with them.
- We observed staff were responsive to people's needs during this inspection. Staff tailored their approach to people, based on their knowledge of each person. This enabled staff to care for people in a personalised manner. A person commented, "I get looked after the way I want to be."

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.

- People's communication needs were assessed and met. Where people needed support with communication, this was recorded in their care plan so staff knew how to communicate effectively with them.

Improving care quality in response to complaints or concerns

- Complaints were appropriately recorded, investigated and responded to. The provider had a suitable complaints procedure in place, which was followed by the registered manager and staff.
- People and their relatives told us they felt able to raise any issues or concerns with the registered manager and staff. A person commented, "Oh yes, I would talk to staff if there was anything worrying me."

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 this key question has remained good. 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

- The provider, registered manager and staff were all keen to provide high-quality, person-centred care. They were committed to ensuring people received personalised care which met their preferences. We observed a positive, welcoming and inclusive culture within the home.
- Staff morale was positive and they all told us they enjoyed their jobs. A staff member commented, "I would recommend Chatsworth Grange as it's really rewarding. I like giving something back." The staff team worked well together, and communication between the staff and managers was effective.
- Everyone we spoke with told us the home was well-run. Comments from relatives included, "Oh yes, it's definitely well-managed. I was absolutely buzzing when I knew [my family member] was coming here" and "I can't think of anything I'd change about the place."
- All staff told us the registered manager was approachable and supportive. A staff member commented, "I can talk to the manager about anything."
- The registered manager and provider were committed to improving the care provided and learning from any incidents or complaints. All staff told us they were confident the registered manager would act on any concerns they raised.

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

- Staff were clear about their roles and responsibilities. The registered manager understood the regulatory requirements and pro-actively provided information to CQC following significant events at the service.
- The registered manager and senior staff regularly completed a range of checks on the quality and safety of the service provided. This supported them to identify any areas for improvement. Where improvements were identified, we found they were acted on and implemented.
- The provider maintained oversight of the home to help ensure it continued to meet the provider's expectations. A representative of the provider regularly visited the home to undertake their own checks on the quality of the care provided and to make sure necessary improvements were being made.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Staff had opportunities to provide feedback about the home. They were able to share their opinions and ideas during regular supervision meetings, staff meetings or directly with the registered manager on a one-

to-one basis.

- People and their relatives were asked for their views about the care they received, and their feedback was used to continually improve the service. Resident and relatives' meetings were arranged on a regular basis and surveys were sent to people and their relatives.
- Staff worked closely with relevant health and social care professionals which helped to ensure people received effective care and support. The registered manager obtained about the service from visiting professionals via surveys. The responses received to a recent survey were all positive.