

Community Homes of Intensive Care and Education Limited

Cambria House

Inspection report

24 St Peters Street Winchester Hampshire SO23 8BP

Tel: 01962865226

Website: www.choicecaregroup.com

Date of inspection visit: 06 May 2021

Date of publication: 16 June 2021

Ratings

| Overall rating for this service | Inspected but not rated |
|---------------------------------|-------------------------|
| Is the service safe? | Good |
| Is the service well-led? | Good |

Summary of findings

Overall summary

About the service

Cambria House is a specialist residential service for people aged 18 plus who may be living with learning disabilities, autism, obsessive compulsive disorder, depression or schizophrenia.

The property contains eight ensuite bedrooms, two shared lounges, a dining area and facilities to provide sensory activities.

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

The provider had implemented effective infection control procedures which were followed by staff and visitors.

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

Appropriate safeguarding procedures were in place to protect people from the possibility of abuse.

Sufficient staff were deployed to meet people's needs at all times.

Risks associated with people's care were properly assessed and staff had received training in how to support people who displayed behaviours that challenged.

Robust governance systems were in place to identify areas for improvement.

External professionals and relatives were satisfied with the leadership within the service.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

Right support:

• We were assured the model of care and setting maximised people's choice, control and Independence.

Right care:

- We were assured care was person-centred and promoted people's dignity, privacy and human rights. Right culture:
- We were assured the ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives.

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

Rating at last inspection

The rating for this service is good.

Why we inspected

We inspected the service because a number of incidents had taken place where people's behaviours challenged, and we needed to be assured people were safe and that the service was well led. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Cambria House on our website at www.cqc.org.uk.

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 • |



Cambria 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 with the support of 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

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

The service had a manager registered with the Care Quality Commission. 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

This inspection was announced. We gave the service 48 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

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We sought feedback from the local authority and professionals who work with the service. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager and the manager, we requested a number of documents relating the quality and safety of the service including records relating to staff recruitment. People were unable to provide feedback because they were not all available.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We reviewed a range of records. This included two people's care records, and incident and accident records relating to behaviours that challenged others. We looked at staff recruitment records, staff supervision and training records including their induction. A variety of records relating to the management of the service, including policies and procedures were also viewed. We contacted five relatives and four external professionals to obtain feedback about the quality of care provided.



Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

Good - At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

Systems and processes to safeguard people from the risk of abuse

- Staff had been trained in safeguarding and supervision records demonstrated they were able to identify the possible signs and symptoms of different types of abuse.
- Safeguarding records demonstrated staff knew what actions they should take if they suspected abuse. The providers safeguarding policy was robust, provided useful details for raising concerns and was accessible in a variety of formats.
- Appropriate investigations were carried out when safeguarding concerns were raised. The provider had a clear method of investigating and positive working relationships with local multi-agency safeguarding teams.
- The provider had a robust whistle blowing policy and procedure.

Using medicines safely

- Safe arrangements were in place for the storage, recording and administration of medicines.
- Staff received effective training in how to administer medicines and their competency to do so was frequently assessed.
- Regular medicines audits took place which highlighted any areas for improvement.

Assessing risk, safety monitoring and management

- Risks associated with people's needs and the environment were assessed, and actions put in place to minimise possible harm. Care records contained extensive, and relevant, risk assessments including assessments on mobility, nutrition, communication and accessing the community.
- Identified risks were mitigated by thorough care planning. For example, people who had a high risk of displaying behaviours that may challenge others were supported by a network of professionals including the mental health team and the positive behavioural support team.
- Accidents and incidents were recorded and reviewed by the registered manager and the providers quality monitoring team. When necessary, incidents were notified to relevant agencies such as the Care Quality Commission and the Health and Safety Executive. Senior staff produced a report which commented on actions taken by the service regarding each incident and advised on additional actions when necessary. Risk assessments and care plans were reviewed following most incidents to ensure that these continued to be reflective of people's needs.
- Regular checks ensured that fire exits were clear of obstructions, a frequent fire alarm test ensured that the fire safety system was operational, and each person had a personal emergency evacuation plan, (PEEP) detailing the help and support they would need should they need to be evacuated from the home.

Staffing and recruitment

- Sufficient staff were deployed to meet the needs of people living in the home. Staff were available when people requested support. We reviewed staff rotas which showed that the number of staff on duty was in line with the numbers planned as required by the provider to meet the dependency needs of people.
- Robust recruitment procedures remained in place and ensured that only suitable staff were employed to work at Cambria House. Full employment records were obtained, appropriate identity documents were received, and two references requested.
- All staff had a Disclosure and Barring Service, (DBS), check completed before commencing in post. The Disclosure and Barring Service carry out a criminal record and barring check on individuals who intend to work with children and vulnerable adults, to help employers make safer recruitment decisions.

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 meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- 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.



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.

Good – At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

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

- There were robust audit systems in place which were carried out regularly. The registered manager and staff frequently reviewed systems within the home such as fire safety equipment. There were also comprehensive audits which covered all aspects of care planning and its delivery. These were carried out quarterly by senior management. Any shortfalls identified as a result of these audits had been actioned by the registered manager. Audits seen showed Cambria House had a good level of compliance.
- The registered manager had an open-door policy and staff were encouraged to talk through any concerns they might have. Staff attended regular meetings and had supervision and appraisals, so they were clear about their roles and responsibilities.

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

- Relatives were complimentary about the support people received. One relative told us, "Yes we have a meeting and they ask how we feel about things. We also get a monthly letter from staff about what X doing, he's taken up gardening recently, they put pictures in it as well'. Another relative said", "X doesn't take any medicines but has a yearly medical with the Doctor, and he allows the Doctor to weigh him once a year. They've had their jabs".
- Care records detailed how people were encouraged to take responsibility for developing their skills and becoming more independent. A relative said, "The staff try and get X involved as much as possible and they try to engage him in learning".

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 and manager were open and honest with us during and after the inspection. Notifications submitted to us demonstrated appropriate actions were taken when incidents occurred, and where required, the relevant external organisations were notified.
- Governance systems were effective in identifying areas for improvement and recognising when lessons needed to be learnt. Reflection documents demonstrated lessons had been learnt resulting from incidents of behaviours that challenged.

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

- Relatives told us they were asked for feedback about the care provided in the service and said they were sent surveys.
- The registered manager communicated regularly with external professionals including healthcare professionals and the mental health team. Feedback from external professionals was positive and comments included, "Cambria is in a much better place now" and "There is regular communication between myself and the home".
- The registered manager told us the COVID 19 pandemic and restrictions had impacted upon people's ability to engage in their usual chosen activities within the community. This was now improving and at the time of our inspection people were out in the community accessing their chosen activities.

Working in partnership with others

• Feedback about the quality of service was consistently positive. Comments from professionals included, "The manager has been very proactive and her input I understand was very important to settling things down, as there were some difficult dynamics with some of the residents, some of which have since moved on", "When (registered manager) started as Manager at Cambria, this is when I saw a real change in Cambria house. Communication improved significantly and I felt involved and kept up to date about everything regarding the service user we were commissioning, in a more than timely fashion. I had assurances that the service user was safe, and that appropriate action was being taken against the current issues. I believe this also impacted the staff, as when I visited the house, it was noticeable how staff were working together, in a positive and open way".