

Klearwater Adults Services Limited

# Klearwater Adult Services Limited

## Inspection report

43 Leander Road  
Thornton Heath  
Surrey  
CR7 6JY

Tel: 02086832960

Date of inspection visit:  
13 May 2019

Date of publication:  
07 June 2019

## 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:

Klearwater Adult Services Limited is a residential care home that accommodates up to three people in one adapted building. The service specialises in supporting people with learning disabilities. There were three people using the service at the time of this inspection.

People's experience of using this service:

People were safe at the service. Staff were trained to safeguard people from abuse and understood how to minimise identified risks to people's safety. The provider carried out health and safety checks of the premises and equipment to make sure they were safe. The premises was clean and tidy and provided a range of comfortable spaces for people to spend time in. Staff followed good practice when providing personal care and when preparing and handling food which reduced hygiene risks.

There were enough staff to support people. The provider made sure staff were suitable and fit to support people and provided them with relevant training to help them meet people's needs. Staff were supported to continuously improve their working practices.

People told us their needs were being met by staff who sought their views and respected their choices for how they wished their care to be provided. Staff supported people in a dignified way which maintained their privacy and independence. 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.

Staff helped people stay healthy and well. They supported people to eat and drink enough to meet their needs and to take their prescribed medicines. Extra help was sought for people if they needed this, for example when they became unwell. Staff worked well with other healthcare professionals to ensure a joined-up approach to the care people received.

People were satisfied with the quality of care and support they received. They knew how to make a complaint if needed. The provider investigated accidents, incidents and complaints and kept people involved and informed of the outcome. Learning from investigations was shared with staff to help them improve the quality and safety of the support they provided.

The registered manager was open and honest and encouraged people and staff to have their say about how the service could improve. They used this feedback along with other checks, to monitor, review and improve the quality and safety of the support provided. The provider worked proactively with other agencies and acted on recommendations to improve the quality and safety of the service for people.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk).

Rating at last inspection:

At the last inspection the service was rated 'Good' (29/11/2016). The service continues to meet the characteristics of a good service.

Why we inspected:

This inspection was planned based on the previous rating of 'Good'.

Follow up:

We will continue to monitor the service to ensure that people receive safe, compassionate, high quality care. Further inspections will be planned in line with our inspection schedule or in response to concerns.

## 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.

# Klearwater Adult Services Limited

## **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:

One inspector carried out this inspection.

#### Service and service type:

Klearwater Adult Services Limited 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:

The inspection visit took place on 13 May 2019 and was unannounced.

#### What we did:

Before the inspection we reviewed the information we held about this service including notifications the provider is required by law to send us about events and incidents involving people. We also reviewed the Provider Information Return (PIR). Providers are required to send us key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

During the inspection we spoke to one person using the service and a visiting relative. We also spoke to the registered manager, a care support worker and an office administrator. We looked at two people's care records, medicines administration records (MARs) for one person, two staff files and other records relating to the management of the service including policies and procedures.

# Is the service safe?

## Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- One of the people using the service told us they felt safe with staff. They understood how to report any concerns about their and others' safety if these should arise.
- Staff received training in how to safeguard people from abuse. They knew how to recognise signs that a person may be at risk and what they should do about this. The provider's safeguarding procedure was displayed at the service. This set out for people and staff how and when they should report safeguarding concerns to the appropriate person or agency to investigate.
- When safeguarding concerns had been raised, the provider assisted the local authority with their investigations and acted on any recommendations made about how they could improve working practices to keep people safe.
- The provider was open and transparent with people and their relatives during investigations and kept them involved and informed of progress and outcomes.

Assessing risk, safety monitoring and management

- The provider had systems in place to assess, monitor and review risks to people's safety.
- People were involved in discussions about the risks posed to them so that they had a say about how these should be minimised to protect them from injury or harm.
- Where risks had been identified there were plans in place instructing staff on how to minimise these to reduce the risk of people being injured or harmed.
- Staff were trained to support people to manage behaviour that might challenge them and/or others. Positive behaviour support plans helped staff use the least restrictive methods to support people in these instances to reduce the risk of them hurting themselves and/or others.
- Staff understood risks posed to people and how they could help people to stay safe. A staff member told us they were continually checking the environment for any risks this posed to people. We saw the provider was acting on suggestions to improve the safety of a set of glass doors to reduce the risk of people getting hurt if they should break.
- The provider undertook regular health and safety checks of the premises. Any issues found through these checks were dealt with promptly. The provider had arrangements in place for the premises and equipment to be maintained and serviced to make sure they remained in good order and safe for use.

Staffing and recruitment

- There were enough staff to meet people's needs. Staffing levels had been planned based on the level of support people required each day to keep them safe at home and in the community.
- The provider made sure staff on each shift were trained to deal with emergency situations and events to reduce the risk of harm to people and to themselves.
- We observed staff were present and accessible to people and responded promptly to any requests for help

and support.

- The provider reviewed staffing levels as people's needs changed to make sure there were enough staff at all times to meet these and keep people safe.
- The provider, as part of their recruitment and selection procedures, undertook checks on staff that applied to work at the service. Staff also completed health questionnaires prior to starting work. These checks helped the provider make sure staff were suitable and fit to support people.

#### Using medicines safely

- People were supported to take their prescribed medicines. There was current information on people's records about their prescribed medicines and how they should be supported with these. Our checks of stocks and balances of medicines and medicines administration records (MARs) showed people consistently received the right medicine, at the right dose and at the right time.
- Staff had been trained to manage and administer medicines and made sure these were stored safely.
- The registered manager undertook regular medicines audits to check these had been managed and administered safely by staff.

#### Preventing and controlling infection

- Staff were trained in infection control and had access to cleaning materials and equipment to help them reduce infection risks associated with poor cleanliness and hygiene.
- The premises was clean and tidy. Guidance was displayed in bathrooms encouraging people, staff and others to follow good practice hand washing techniques to promote good standards in cleanliness and hygiene.
- Staff followed appropriate safety procedures when preparing, serving and storing food to reduce risks to people of acquiring foodborne illnesses.

#### Learning lessons when things go wrong

- Accidents and incidents involving people were recorded and investigated by the provider.
- Learning from accidents and incidents was shared with staff to help them improve the quality and safety of the support they provided. We saw a good example of this where, following an investigation, all staff were reminded about the service's values and aims to ensure people received safe, high quality support from staff at all times.
- The provider analysed accidents and incidents to check for any trends or themes to help them reduce the risk of these happening again. We saw where plans had been put in place to reduce incidents reoccurring these were closely reviewed and monitored to check they were effective.



# 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.

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 care and support needs had been assessed with them prior to them using the service. Assessments took account of information provided by people, their relatives and others involved in their care about their current health conditions, the care they required, and the outcomes people wished to achieve from the support provided.
- The provider used the information from these assessments to develop care plans for people which set out their choices about how, when and from whom they received their support. This helped staff understand what support they needed to provide.

Staff support: induction, training, skills and experience

- Staff received relevant training to help them meet people's needs. This included specialist training to support people with a learning disability, autism and mental health needs.
- New staff had to complete a programme of induction before they could work with people unsupervised. A recently employed staff member told us their induction had been "good" and the provider would not let them carry out specific tasks and duties until they were trained to do so. We saw a good example of this where another new staff member was not able to prepare meals for people until they had completed relevant food hygiene training.
- Staff were supported to review their working practices and continuously improve in their role. They had regular supervision (one to one) meetings with the registered manager to discuss any issues or concerns they had about their role and any further training or learning they needed to help them provide effective support to people.

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

- People had a say in planning the meals they ate at the service. Staff used this information to prepare meals that people liked which encouraged them to eat well.
- There was detailed information about people's dietary needs on their records which included any specialist needs they had due to their healthcare conditions. Staff took this into account when planning and preparing meals.
- Staff supported people to make healthy food and drink choices and to eat nutritious and well balanced meals. They monitored what people were eating and drinking. Staff used this information along with other checks, such as people's weights, to look for any issues that people might be having with food and drink.

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

- Staff shared information with each other about people's current health and wellbeing at shift handover's.

This helped keep all staff informed about any specific concerns about a person and how these were being managed.

- People's records set out how staff should support them to manage their health and medical conditions and access the services they needed such as the GP, dentist or other healthcare specialists involved in their care and treatment.
- People were supported to attend their healthcare and medical appointments and outcomes from these were recorded and shared with all staff so that they were aware of any changes or updates to the support people required.
- Staff reported any concerns they had about a person's health and wellbeing promptly so that people received appropriate support in these instances. When people needed to go to hospital, staff made sure information was sent with them about their current health, existing medical conditions and their medicines. This helped to inform ambulance and hospital staff about the person and their needs when they had to make decisions about the person's treatment.

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

- The premises offered people a range of spaces they could spend time in. In addition to their own room, people could spend time in the communal lounge, dining room, sensory room and garden. In each area there was equipment and activities for people to take up and enjoy. For example, in the garden there was a large trampoline and in the sensory room there was a full sized drum kit.
- People's bedroom's had been decorated and furnished to their choice and reflected their hobbies and interests.

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. We checked whether the service was working within the principles of the MCA.

- The provider assessed people's capacity to make and consent to decisions about specific aspects of their care and support.
- There were processes in place where if people lacked capacity to make specific decisions the provider would involve people's relatives, representatives and healthcare professionals, to ensure decisions would be made in people's best interests.
- Applications made to deprive people of their liberty had been properly made and authorised by the appropriate body. The provider was complying with the conditions applied to the DoLS authorisations. The registered manager reviewed authorisations regularly to check that they were still appropriate.

# 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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- One of the people using the service told us staff were caring and looked after them well. A relative said, "[Family member] has a happy life here." They told us the service had a "family orientated feel" which they felt helped their family member feel comfortable, safe and well supported.
- People were relaxed and comfortable with staff and did not hesitate to ask for their help when needed. Conversations between people and staff were warm and friendly and indicated staff knew people well as they talked with people about things that were of interest or important to them.
- Staff were patient and prompted people to make decisions about what they wished to do. People were given the time they needed to do this, and staff respected their choices.
- When assessing people's needs the provider took account of their specific wishes in relation to how their social, cultural and spiritual needs should be met. These were recorded in people's care plans so that staff had access to information about how people should be supported with these. We saw for one person, staff had used this information to help them incorporate elements of the person's cultural heritage into their daily life and routine which was something that was important to the person and their family.
- Staff received equality and diversity training as part of their role. This gave staff knowledge and understanding of what discriminatory behaviours and practices might look like to help them make sure people were always treated fairly.

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

- There was detailed information for staff on people's records about how people wished to communicate and express themselves. This helped staff understand how to support people to say what they wanted in terms of their care and support.
- Staff used people's preferred communication methods when interacting with them. We saw for one person with complex communication needs, staff used pictures and other communication aids to indicate the support they wished to provide, for example helping the person to get washed and dressed ready for the day. The same aids were used to help the person understand the different activity options that were available to them so that they could pick the one they wanted to do that day.
- Records showed people were continuously involved in planning and making decisions about their care and support. People met with staff monthly to give feedback about the support they had received to help staff determine if this was helping people meet their care goals and objectives.

Respecting and promoting people's privacy, dignity and independence

- Staff were respectful when talking to people and listened to what people had to say.
- Staff asked people for their permission before providing any support. When providing support staff made sure people were not rushed so that they could do things at their own pace.

- When people wished to have privacy and spend time alone in their rooms, staff respected this. The sensory room provided additional space at the service where people could spend time away from others. The provider made sure the sensory room could not be overlooked and was furnished with items for people to use to help them unwind and relax in peace.
- People's records were stored securely so that information about them was kept private and confidential.
- People were supported to be as independent as they could be. Staff encouraged people to get washed and dressed each day, clean and tidy their room, do their laundry, their personal shopping and plan and prepare their meals and drinks. Staff only took over when people could not manage or complete tasks safely and without their support.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs

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's records contained information for staff about their preferences and choices for how their care and support should be provided. This included information about their likes and dislikes, their preferred routines and how they wished to spend their day.

- Staff understood people's care and support needs and how these should be met. We saw staff were able to anticipate what people wanted and supported people to do tasks and activities in the way people preferred.

- Staff undertook a monthly evaluation of the support provided to people to check this was meeting people's choices and preferences. When changes were needed to the support people received, staff were informed promptly. This meant they had up to date and relevant information to help them support people appropriately.

- People were supported to take part in activities and pursue interests that were important to them. These were tailored to meet their preferences. For example, people attended college courses that reflected their interests. One person liked listening to music so attended a music club. All the people enjoyed taking part in sports and fitness activities and we saw people attended organised football games and went swimming on a regular basis.

- To help people make new friends and maintain existing friendships people were supported to attend group outings and get-togethers in the community. For example, people regularly went bowling and had developed friendships with other people using similar services that also went.

- People were encouraged to maintain relationships with the people that mattered to them. A relative told us they were able to visit at any time and were always welcomed by staff. One person was helped by staff to plan a holiday with members of their family which had been very important to them.

- Staff had developed good relationships with relatives and kept them regularly informed of their family member's health and wellbeing.

Improving care quality in response to complaints or concerns

- People's feedback during this inspection indicated they had no issues or concerns about the quality of care and support provided by staff. One person said, "Yeah, everything is great. I'm pretty happy with things." A relative told us, "They do a fantastic job here. Without them I don't know what I would do."

- The provider had arrangements in place to deal with people's concerns or complaints if they were unhappy with any aspect of the support provided. People had been provided information about what to do if they wished to make a complaint and how this would be dealt with by the provider.

- We saw following a complaint made by one person, the provider undertook a thorough investigation and from this had identified some shortfalls in the support the person received. The provider took action to make improvements and the person was much happier and no longer had any issues with the support they received.

# 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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The provider's values and aims for the service were focussed on people experiencing high quality care and support.
- Staff understood how to provide people with personalised care and support tailored to their needs. A staff member told us, "We're really encouraged to get to know people and help them to progress. We're very focused and actively engaging people in relevant activities."
- The provider checked that staff were contributing to the values and aims of the service through regular staff supervision. Staff were asked to demonstrate how, through their work, they were helping to improve the quality of people's lives.
- The provider was open about things that went wrong. They investigated all accidents and incidents that happened and made sure people were kept involved and informed of the outcome.

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

- A staff member told us, "The [registered manager] is very attentive and knows all the people really well. They're very open and upfront as a manager and makes sure everyone works consistently and follows policies."
- There was a clear and well defined management and staffing structure at the service. The provider held regular team meetings with all staff to make sure they understood their role and responsibilities to the people they cared for.
- The registered manager understood their responsibilities with regard to the Health and Social Care Act 2008 and was aware of their legal obligation to send us notifications, without delay, of events or incidents involving people using the service.
- Records relating to the people, staff and to the management of the service were up to date and well maintained.

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

- People and staff were provided regular opportunities to have their say about the service and how it could improve. The provider sought people's views through 'residents' meetings' and reviews of their care and support needs. The provider made sure staff used people's preferred method of communication to gain their views so that people would not be excluded from having a say in how the service could improve.
- Staff's views about the service were sought through supervision and team meetings.

#### Continuous learning and improving care

- The provider monitored and assessed the safety and quality of the service. They undertook regular checks of key aspects of the service and acted to make improvements when required.
- The registered manager undertook regular unannounced spot checks of the service. This included visits at night and at weekends to check that the support provided to people was consistent at all times.
- The provider acted on recommendations made by other organisations to make improvements to the quality and safety of the service. Following a recent medicines audit by the dispensing pharmacy, the provider had implemented changes to the way medicines were managed to make sure these were in line with best practice.

#### Working in partnership with others

- We saw good relationships had been developed with a range of healthcare professionals involved in people's care and treatment. The provider made sure recommendations and advice from healthcare professionals was used to design the care and support provided to people. This helped to ensure that care and support was up to date with current best practice in relation to people's specific needs.