Key inspection report

CARE HOME ADULTS 18-65

Kingsbridge Way

9a, Kingsbridge Way
Chilwell
Nottingham
NG9 3LW

Lead Inspector
Mary O’Loughlin

Key Unannounced Inspection
25th November 2009  09:00
This report is a review of the quality of outcomes that people experience in this care home. We believe high quality care should:

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care home adults 18-65 can be found at www.dh.gov.uk or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: www.tso.co.uk/bookshop.

The mission of the Care Quality Commission is to make care better for people by:

- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.
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| **Address**             | 9a, Kingsbridge Way  
                          | Chilwell  
                          | Nottingham  
                          | NG9 3LW |
| **Telephone number**    | 0115 982 3823 |
| **Fax number**          | 0115 925 2918 |
| **Email address**       | nicolalindsay@nottscc.gov.uk |
| **Provider Web address**| Nottinghamshire County Council |
| **Name of registered provider(s)/company (if applicable)** | Nicola Jayne Lindsay  
                          | Jacqueline Skinner |
| **Type of registration**| Care Home |
| **No. of places registered (if applicable)** | 9 |
| **Category(ies) of registration, with number of places** | Learning disability (9) |
SERVICE INFORMATION

Conditions of registration:

Date of last inspection 18th December 2006

Brief Description of the Service:

Kingsbridge Way is a short breaks service for adults with a learning disability, operated by Nottingham County Council. The service is situated in the Chilwell area of Nottingham, and is located in a single storey building, which has been adapted to provide accommodation for up to nine people, who may have additional physical needs. Two people job share the management of the service - Jacquie Skinner and Nicola Lindsay. The building is divided into two halves with each comprising of a lounge/diner with a kitchenette, individual rooms plus bathrooms and toilets. Service users are admitted to the home for both planned short breaks and emergency care. Kingsbridge Way is situated in a residential suburb close to Nottingham; Beeston town centre is a short drive away, providing banks, pedestrian shopping, bars and restaurants. There is a small convenience shop a short walk away.

Fees: The fees are individually assessed by service user’s social worker
SUMMARY
This is an overview of what the inspector found during the inspection.

The focus of inspections undertaken by the Care Quality Commission (CQC) is upon outcomes for the people using the service and their views on the service provided.

This process considers the provider's capacity to meet regulatory requirements, minimum standards of practice and focuses on aspects of the service that need further development.

Prior to our visit an analysis of all the information we have received about the home since our last inspection was undertaken.

We looked at what the manager had told us in the Annual Quality Assurance document (AQAA) and the responses we received from our 'Have Your Say' surveys which we sent to residents, staff and external professionals at the home.

The main method of inspection used was called 'case tracking', which involves looking at the quality of care received by a number of people living at the home. We use evidence from our observations, from speaking to people about their experience of living at the home, talk to staff about their understanding of people's needs and the training they receive to support them in their role.

The quality rating for this service is 3* which means people receive excellent outcomes.

What the service does well:

The home is managed well, staff have a good understanding of risk assessment and use this to promote people’s independence and choice to make sure they receive a positive experience during their short break.

People are in safe hands from a well trained and supervised staff team.

Health care is managed well and there is access to healthcare specialists on site.

Service users told us that “It gives me a very happy and safe environment away from home for a short break”.

“The staff are very helpful” “They look after me well”.

What has improved since the last inspection?
The service continues to ensure that staff are trained in new ways of working which means people are in safe hands.

They have improved the information available for people to help aid communication with people using the service.

Information diaries have been introduced to help share information when people return home.

**What they could do better:**

No requirements have been made as a result of this inspection. The service continues to assess the quality of the services provided and continuously improve in line with new ways of working and changes in legislation.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details on page 4. The report of this inspection is available from our website www.cqc.org.uk. You can get printed copies from enquiries@cqc.org.uk or by telephoning our order line – 0870 240 7535.
DETAILS OF INSPECTOR FINDINGS

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Conduct and Management of the Home (Standards 37 – 43)
Scoring of Outcomes
Statutory Requirements Identified During the Inspection
Choice of Home

The intended outcomes for Standards 1 – 5 are:

1. Prospective service users have the information they need to make an informed choice about where to live.
2. Prospective users’ individual aspirations and needs are assessed.
3. Prospective service users know that the home that they will choose will meet their needs and aspirations.
4. Prospective service users have an opportunity to visit and to “test drive” the home.
5. Each service user has an individual written contract or statement of terms and conditions with the home.

The Commission consider Standard 2 the key standard to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

Standard 2
People using the service experience excellent quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Significant time and effort is spent planning to make admission to the home personal and well managed. An individual member of staff is allocated to each service user to give them information and special attention to help them to feel comfortable in their surroundings and enable them to ask any questions about life in the home.

EVIDENCE:

The manager gave us a lot of information in the AQAA about the process of arranging admissions to the service. This told us that they have sustained a strong focus on making sure people have a positive experience when they come for a short break.

We examined the records of two people who had recently arrived at the home for a short break. The records showed that staff had spent a lot of time consulting with the service user and their family before they came to stay, providing them with information about the home and opportunities to visit and meet their allocated contact worker.
The records show that information is obtained about each person from all external professionals that are involved in supporting the person at home. This information is used in consultation with the service user to develop a care plan that describes how they can be supported at the home and the most suitable methods of communication.

These are comments we received from service users in response to our surveys, “It gives me a very happy and safe environment away from home for a short break”. “The staff are very helpful” “The staff look after me well”.

We received survey responses from external professionals involved in the service and these are some of the comments they made, “The service is very person centred and the majority of the staff work very hard to meet the specific needs of the service users” “Provides person centred care, works well as a team and they communicate well with service users and families”.
Individual Needs and Choices

The intended outcomes for Standards 6 – 10 are:

6. Service users know their assessed and changing needs and personal goals are reflected in their individual Plan.
7. Service users make decisions about their lives with assistance as needed.
8. Service users are consulted on, and participate in, all aspects of life in the home.
9. Service users are supported to take risks as part of an independent lifestyle.
10. Service users know that information about them is handled appropriately, and that their confidences are kept.

The Commission considers Standards 6, 7 and 9 the key standards to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

6-7-9
People using the service experience good quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The staff continue to ensure that people using the service experience a variety of activities during their stay in accordance with their individual choice and preference.

EVIDENCE:

We looked at two care plans during this inspection and the records supported what the manager had told us in the AQAA, that each service user has a care plan and risk assessments, which reflect their personal needs and choices. The plans are produced in partnership with the service user (where possible), carers and other professionals, including the Short Breaks Health Care team were applicable.

Kingsbridge way provides a short break service and as described in the admission standards each person has a full assessment of their needs.
undertaken before they come to stay. A contact worker always calls the person or their carer before and after each short break to plan the activities and choices they would like during their stay.

The AQAA and care plans show that the staff are aware of the importance of recording the preferred communication style of each person. They work with professionals such as speech and language therapists to develop engagement with people who have communication problems, using symbols, photographs and other visual aids.

The manager told us she is aware of and working towards ensuring that new laws about how people are supported to make decisions are recorded within each care plan to ensure their rights and choices are respected.

The staff identify any risks to the service user including health risks to ensure that any activity a person takes part in is free from avoidable risks to their safety, any changes in health are monitored and action taken to ensure their wellbeing.

We saw people relaxed and happy, sharing a lunchtime meal and planning the day’s activities.

A relative told us “The home provides a very happy and safe environment away from home for short breaks”.
Lifestyle

The intended outcomes for Standards 11 - 17 are:

11. Service users have opportunities for personal development.
12. Service users are able to take part in age, peer and culturally appropriate activities.
13. Service users are part of the local community.
14. Service users engage in appropriate leisure activities.
15. Service users have appropriate personal, family and sexual relationships.
16. Service users’ rights are respected and responsibilities recognised in their daily lives.
17. Service users are offered a healthy diet and enjoy their meals and mealtimes.

The Commission considers Standards 12, 13, 15, 16 and 17 the key standards to be inspected.

JUDGEMENT – we looked at outcomes for the following standard(s):

This is what people staying in this care home experience:

12-13-15-16-17
People using the service experience excellent quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

There are activities and events provided and a suitably healthy diet is offered that suits the individual needs and choices of people using the service.

EVIDENCE:

Kingsbridge way offers holiday style breaks, they provide activity workers who help plan activities, outings and events.

A relative told us “My daughter loves her short breaks at Kingsbridge Way; there is a variety of activities to choose from”.

The manager tells us in the AQAA that they ‘have a diverse age range of staff and this helps new service user’s to identify with there age range. We also try and make bookings for people so they can stay with friends and peers. This way activities and outings can be arranged to match the needs and choices of
individuals. We purchased activity items like the Nintendo WII on the request of some of the younger service user’s.

The staff work hard to make sure that each person is treated individually, routines are made flexible and activities are person centred. They use a variety of methods to help people choose how they spend their holiday. There are many visual aids including visual symbols and books to support real choice for people who have communication difficulties.

We saw that each person has their own diary sheet which records what they have done each day of their holiday, they can take these home to share with their family.

To ensure the overall quality of the service, they have regular service users and carers meetings, and minutes of these were seen.

Each person had a nutritional record within their care plan and the manager told us that where people have specific dietary problems they are supported by the health care team staff and food charts are put in place to ensure the correct nutrition and hydration is provided.

Both the Environmental Health and the Local Authority Nutritional Balance Team Inspections undertaken in the last year have reported that they are “Pleased and impressed with the standards of food hygiene”.
**Personal and Healthcare Support**

**The intended outcomes for Standards 18 - 21 are:**

18. Service users receive personal support in the way they prefer and require.
19. Service users’ physical and emotional health needs are met.
20. Service users retain, administer and control their own medication where appropriate, and are protected by the home’s policies and procedures for dealing with medicines.
21. The ageing, illness and death of a service user are handled with respect and as the individual would wish.

**The Commission considers Standards 18, 19, and 20 the key standards to be inspected.**

This is what people staying in this care home experience:

**JUDGEMENT – we looked at outcomes for the following standard(s):**

18-19-20
People using the service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People receive personal and healthcare support using a person centred approach. The home has a good record of compliance with the receipt, administration, safekeeping, and disposal of medicines.

**EVIDENCE:**

The care plans we looked at show that the staff focus on recording all the information about how people wish to be supported with personal needs and the manager has considered matching the staff team to the people they are supporting by employing both male and female staff from different age groups.

The allocation of a contact worker ensures that information about usual routines and activities are continued if necessary for the appropriate management of each person and in agreement with them and their usual carer.
The service benefits from a full time trained nurse who is involved in assessing the health of each person that is referred for a short break at the home. The nurse ensures that any health needs are identified and provides staff with detailed plans of how to support their needs.

An external professional told us, “I think it works really well having a nurse based at the home, we can provide training for staff in the individual health needs of people, it helps the staff to understand the theory and put it into practice alongside health care plans”.

From the staff survey responses we received and staff training files we examined we know that the manager ensures that medicines are administered only by trained staff that are regularly assessed for their competency.

We saw that medicines were being safely stored and administered and staff have access to medicine policies which are in the process of review to ensure they reflect up to date practice and legislation.

A service user responding to our surveys told us, “They look after me very well”
Concerns, Complaints and Protection

The intended outcomes for Standards 22 – 23 are:

22. Service users feel their views are listened to and acted on.
23. Service users are protected from abuse, neglect and self-harm.

The Commission considers Standards 22, and 23 the key standards to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

22-23
People using the service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People feel their views are listened to and acted upon and the staff team are trained to protect people from abuse.

EVIDENCE:

We saw that a complaints procedure is displayed in the home and also within the information provided to each service user to ensure that people know what to do if they have concerns.

People responding to our surveys confirmed that they knew who to speak with if they had concerns and they told us that they felt listened to and taken seriously by the manager.

The commission has not received any complaints about the service in the last year. The manager has addressed one complaint within the agreed timescale and taken appropriate action to address this.

We saw records of staff training during our inspection which demonstrated that the manager is ensuring the staff team are trained to identify possible abuse and take appropriate action to safeguard people.
We also identified how the staff are also trained to manage difficult behaviours such as aggression to prevent people harming themselves or others. The manager told us in the AQAA that ‘All service users who display behaviour, that can be verbally or physically abusive to others, or they display self harming behaviours, have care plans, stating what the behaviour is and what can trigger it’.

A relative told us, “They let my daughter call me if she wants reassurance which I appreciate very much”.
Environment

The intended outcomes for Standards 24 – 30 are:

24. Service users live in a homely, comfortable and safe environment.
25. Service users’ bedrooms suit their needs and lifestyles.
26. Service users’ bedrooms promote their independence.
27. Service users’ toilets and bathrooms provide sufficient privacy and meet their individual needs.
28. Shared spaces complement and supplement service users’ individual rooms.
29. Service users have the specialist equipment they require to maximise their independence.
30. The home is clean and hygienic.

The Commission considers Standards 24, and 30 the key standards to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

24-30
People using the service experience excellent quality outcomes in this area.
We have made this judgement using a range of evidence, including a visit to this service.

The home provides a suitable environment that is safe and well maintained and has the specialist aids and equipment to support people’s needs.

EVIDENCE:

This is what the manager told us in the AQAA and our inspection supports her statement, ‘Kingsbridge Way was re-furbished in 2003 for it’s current use. It is a 9 bedded short breaks unit. All bedrooms have en-suite toilet and sink, 5 of the 9 have showers.
Each room has a bed (one has a double bed to accommodate tall or large service users) a wardrobe, chest of draws, desk and chair, bedside cabinet, easy chair and TV ariel point. Each room has curtains with co-ordinating bedding and towels. Some rooms have black out curtains to aid restful sleep. One bedroom has an over head track hoist to assist people with physical needs. 4 rooms have divan beds, and five bedrooms have profiling beds, these
beds are serviced yearly. We have two mobile hoists and one standaid. We have two lounge areas, they have a kitchenette, handwash basin, dinning table and four chairs, sofa and two easy chairs, beanbag and additional specialist seating. We have a multi purpose area with snooker table ,TV ariel point and table and chairs. We have a sensory room, front and back gardens with new patio furniture, sensory garden (work underway) three sheds and garden games’.

Throughout the inspection we saw that the building was well maintained and clean and people using the service tell us that the home is always fresh and clean. The home is designed to provide small group living where service users can enjoy maximum independence in a discrete non-institutional environment.

The two people we case tracked were found to have all the aids and equipment that they required to support them during their short break. Their bedrooms provided high levels of privacy with locks fitted for their use and keys provided where risk assessment allows.

The bathrooms are homely and contained aids and equipment for people with mobility problems.

An external professional told us how people were able to choose which room they wanted to stay in during their holiday.
Staffing

The intended outcomes for Standards 31 – 36 are:

31. Service users benefit from clarity of staff roles and responsibilities.
32. Service users are supported by competent and qualified staff.
33. Service users are supported by an effective staff team.
34. Service users are supported and protected by the home’s recruitment policy and practices.
35. Service users’ individual and joint needs are met by appropriately trained staff.
36. Service users benefit from well supported and supervised staff.

The Commission considers Standards 32, 34 and 35 the key standards to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

32-34-35
People using the service experience excellent quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The staff team are robustly recruited and trained beyond basic requirements to ensure people are in safe hands.

EVIDENCE:

We looked at staff recruitment files and saw that the manager ensures a robust recruitment procedure is followed in practice that ensures anyone known to be unsuitable to work with vulnerable adults is not employed.

The manager tries to match staff to the specific needs of people who use the service, ensuring a wide diversity of ages and cultures in the staff team.

Training and supervision records we looked at showed that there is an ongoing training plan in place and staff are trained and supervised beyond basic requirements.
The training records demonstrate a thorough induction is undertaken by all newly employed staff and the probationary period is properly monitored and supervised.

We saw records that show staff are trained in new ways of working to ensure their practice is up to date.

People responding to our surveys told us that there is always enough staff on duty to meet their needs and staff always treated them well.

An external health professional told us “The staff work really well as a team”.

We saw how people assessed as requiring one to one care where receiving this.
Conduct and Management of the Home

The intended outcomes for Standards 37 – 43 are:

37. Service users benefit from a well run home.
38. Service users benefit from the ethos, leadership and management approach of the home.
39. Service users are confident their views underpin all self-monitoring, review and development by the home.
40. Service users’ rights and best interests are safeguarded by the home’s policies and procedures.
41. Service users’ rights and best interests are safeguarded by the home’s record keeping policies and procedures.
42. The health, safety and welfare of service users are promoted and protected.
43. Service users benefit from competent and accountable management of the service.

The Commission considers Standards 37, 39, and 42 the key standards to be inspected.

This is what people staying in this care home experience:

JUDGEMENT – we looked at outcomes for the following standard(s):

37-39-42

People using the service experience excellent quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The home is managed in the best interests of the people using the service.

EVIDENCE:

The home has two registered managers in post and the arrangement has worked well for many years. One manager is presently off and the second manager has increased her hours to provide appropriate management arrangements.

The managers are well trained and have continuous training to update their knowledge.
The records we saw were of a high standard and held securely.

The information the manager provided in the AQAA was excellent and supported by a range of evidence. The manager shows she understands the importance of equality and diversity and has worked hard to make sure people using the service are helped to communicate their views on their experience at Kingsbridge Way.

There were full records of health and safety checks taking place and the commission have not been notified of any avoidable accidents since our last inspection.

The staff team are trained in all areas of health and safety.

Comments received from people using the service included, “We cannot think of much the home could do better, the staff are always pleasant and helpful”.
SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Care Homes for Adults 18-65 have been met and uses the following scale. The scale ranges from:

4 Standard Exceeded (Commendable)
3 Standard Met (No Shortfalls)
2 Standard Almost Met (Minor Shortfalls)
1 Standard Not Met (Major Shortfalls)

“X” in the standard met box denotes standard not assessed on this occasion
“N/A” in the standard met box denotes standard not applicable

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Are there any outstanding requirements from the last inspection?

No

STATUTORY REQUIREMENTS

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

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RECOMMENDATIONS

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

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<th>No.</th>
<th>Refer to Standard</th>
<th>Good Practice Recommendations</th>
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Care Quality Commission
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NE1 4PA

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