

SheffCare Limited

Knowle Hill

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

Knowle Hill is a residential care home that provides accommodation and personal care for older people and people living with dementia. The home can accommodate up to 74 people in one adapted building over three floors. At the time of this inspection there were 65 people using the service.

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

People told us they felt safe living at Knowle Hill. There were enough staff available to keep people safe and meet their needs. People were supported by staff who were trained and knowledgeable about how to safeguard adults from abuse. Risks to people were assessed and staff knew how to keep people safe from avoidable harm. People were supported to take their medicines as prescribed. The home was clean, and people were protected from the spread of infection.

People were cared for by staff who were knowledgeable and skilled. People were happy with the care they received. They were involved in developing their care plans and people's care plans were detailed enough so staff knew what care to provide to each person. 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's nutritional needs were met, and people were satisfied with the food provided at Knowle Hill, though some people told us they did not know what would be on offer at lunchtimes until lunch was served. People were supported to maintain their health and staff worked alongside community health professionals to ensure people received effective care.

People and their relatives were positive about the staff team. They told us staff were kind and caring. People were supported by staff who knew them well. We observed staff treat people with dignity and respect. People were supported and encouraged to remain involved in decisions about their care. People's privacy was respected, and their independence was promoted.

People's care plans were person-centred and contained information about their life history and preferences for receiving care. This supported staff to provide personalised care to people. However, some people told us they did not have enough to do, to keep them occupied throughout the day. We found some activities did take place, however improvements were required in this area. We have made a recommendation about the development of activity provision in the home. The provider had a suitable complaints procedure in place and we found complaints had been investigated and acted upon. The provider had systems in place to ensure people who received care at the end of their life were cared for in accordance with their expressed wishes and any pain was effectively managed.

The home was well-run. People were supported by a team of staff who were happy in their jobs and well-supported by their managers. An experienced registered manager and senior staff completed a range of regular checks on the quality and safety of the service. The provider, registered manager and staff all demonstrated a desire to provide person-centred, high-quality care. People, relatives, staff and visiting

professionals had regular opportunities to express their views about the service.

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 (and update)

The last rating for this service was requires improvement (published 26 October 2018). At the last inspection we identified one breach of regulation in relation to medicines management.

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of any regulations.

Why we inspected

This was a planned inspection based on the previous rating.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Knowle Hill

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 two inspectors and an assistant inspector.

Service and service type

Knowle Hill 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 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 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 the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with 10 people who used the service and four relatives about their experience of the care provided. We spoke with 11 members of staff including the registered manager, care staff and domiciliary staff. We spoke with two community health professionals who were visiting the service during this inspection and two members of the local church who regularly visited Knowle Hill to support people with their faith.

We reviewed a range of records. This included five people's care records and multiple medication records. We checked a variety of records relating to the management of the service, including three staff files and various 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.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection we found the management of medicines was not always carried out in a safe way. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014; safe care and treatment.

At this inspection we found improvements had been made and the provider was no longer in breach of regulation 12.

- The provider had systems and processes in place to support staff to manage people's medicines safely. Staff were required to follow a detailed medicines management policy to ensure they managed medicines in a safe way. Staff were trained in medicines management and their competency to administer medicines safely was regularly checked.
- We observed 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.
- Staff maintained accurate records of the support they provided people with their medicines. The records we checked showed people received their medicines as prescribed. Improvements had been made to the records kept by staff of the support they provided people with their topical medicines.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe at Knowle Hill. People's relatives told us they had no concerns about their family members' safety. A relative commented, "I am reassured with [my relative] being here. I wouldn't want them anywhere else."
- The provider used appropriate systems to safeguard people from abuse. Staff received training about how to safeguard adults from abuse and they were knowledgeable about their responsibilities in this area. The registered manager made appropriate referrals to the local safeguarding authority and they completed effective investigations into any concerns that were raised.

Assessing risk, safety monitoring and management

- Staff assessed the risks involved in the delivery of care to people when they started using the service. People's care records contained assessments detailing the specific risks posed to them and guidance for staff about how to manage those risks. For example, we found information in people's care records about how to minimise the risk of falls, the risk of malnutrition and dehydration and the risks involved in the use of equipment such as bed rails.
- In one care record we checked, we could not locate an assessment of the risks associated with the use of

bed rails. However, we spoke with staff and were satisfied this risk had been assessed prior to the equipment being used. The registered manager updated the person's care records during the inspection to ensure this risk was appropriately recorded and could be regularly reviewed.

- Regular checks of the building and the equipment were carried out to keep people safe. The home had safety certificates in place for the premises and the equipment they used.

Staffing and recruitment

- During this inspection we observed 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 we observed staff respond promptly to people throughout most of the day.
- We observed a person had to wait for a short period of time to receive support from staff whilst another member of staff was on their break. We discussed this with the registered manager and suggested the deployment of staff was reviewed during staff break periods, to help reduce any delays in care delivery.
- The registered manager kept the dependency levels of people living at Knowle Hill under review and used this information to help determine how many staff were needed for each shift. They had increased staffing levels since the last inspection.
- People living at Knowle Hill and their relatives raised no concerns about staffing levels.
- The provider continued to use safe recruitment procedures when employing new members of staff, to check they were suitable to work in the home.

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 and all staff received training in infection control. Staff wore personal protective equipment, such as gloves and aprons, when delivering care, to help prevent the spread of infection.
- We observed the home was clean and tidy during this inspection.

Learning lessons when things go wrong

- Incidents and accidents were recorded, and actions were taken to reduce the risk of them happening again. The registered manager and senior staff analysed accidents and incidents every month, to try to identify any themes or trends. This information was used to help reduce the risk of further incidents.
- The registered manager had implemented a new system of monitoring accidents and incidents since the last inspection. The new system supported them to conduct increased analysis of incidents and improved the likelihood of them identifying potential action that could be taken to reduce the risk of incidents happening again.

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.

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

- People's needs were assessed before they moved into Knowle Hill to check the home was suitable for them. A detailed care plan was then written for each person which guided staff in how to care for them. People and their relatives were involved in the assessment process. They were asked to provide important information about their likes, dislikes and life history, so care could be delivered in accordance with their needs and preferences.
- People were happy with the care they received at Knowle Hill. Comments included, "The care is pretty decent here" and "It's lovely to live here." People's relatives were confident their family members were well cared for.

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 told us they were happy with the training they completed.
- People and their relatives told us they thought the staff were knowledgeable and well-trained. One person commented, "The staff know what they are doing" and a relative told us, "I have never encountered a situation where staff have not known how to support [my relative] properly."
- Staff received regular support and supervision to review their competence and discuss areas of good practice or any improvements that were needed. Staff told us they felt supported by the registered manager and they felt able to raise any concerns or questions with them.

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

- People were satisfied with the range food and drinks on offer, however, some people commented they often did not know what would be served at lunch until lunchtime. Comments included, "The food is ok, but you don't know what's on offer for lunch until it gets here" and "You find out what's on offer when you get [to lunch]."
- When people required a special diet because of medical or cultural reasons, this was catered for. Kitchen staff were provided with up to date information about people's dietary requirements and people's care records contained information about their dietary needs and preferences. One care record we checked would have benefitted from further detail about the person's dietary requirements. The registered manager updated this during the inspection.
- Staff monitored how much people were eating and drinking, when this was necessary, to help reduce the risk of malnutrition and dehydration.

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 sought advice from community health professionals such as the GP, district nurses and the palliative care team. This supported staff to achieve good outcomes for people.
- The community health professionals visiting the service on the day of this inspection provided positive feedback about the home. They both said staff made appropriate, timely referrals to their respective health services, that staff supported their visits to the home by ensuring people were comfortable with any assessments or care they provided and that all staff were welcoming and friendly. They told us staff followed any advice given and this supported people to maintain their health.

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

- The premises were suitably adapted to meet the needs of people using the service. Signage was displayed throughout the building to help people navigate their way around the home. The home had enough bathrooms and communal areas to ensure people could receive the support they required. People had been supported to personalise their bedrooms with items that were familiar to them, to support them to feel comfortable and safe.
- Technology and equipment was used effectively to meet people's care and support needs.

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 to deprive a person of their liberty were being met.

- The provider had a range of policies in place, to support staff to work within the principles of the MCA. All staff were required to complete training on the MCA and DoLS.
- The registered manager submitted DoLS applications to the local authority, when necessary. When authorisations were granted or were made subject to conditions, people's care records were updated so all staff were aware. The registered manager had oversight of which people were subject to such authorisations and when they were due to expire.
- We were satisfied the service was working within the principles of the MCA.
- Staff understood the importance of supporting people to make their own decisions and obtaining consent from people before care was delivered. We observed staff asked people for their consent before they provided them with care and support.

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

- People and their relatives told us staff were kind and caring. Comments included, "The staff are kind. They listen to me", "The staff are lovely. Everyone is happy. If I need someone, they [staff] come" and "They [staff] are brilliant. They love [my relative] and they are very patient with them."
- 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.
- Staff told us they would recommend Knowle Hill to family and friends. All staff told us they enjoyed their jobs, and this was evident from our observations during the inspection.
- 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

- People were afforded choice and control in their day to day lives. We observed staff asked people what they wanted to do during the day and where they would prefer to spend their time. Staff communicated effectively with people throughout this inspection. This supported people to remain involved in making decisions.
- People and their relatives had been involved in planning their care and their preferences were clearly recorded in their support plans. Relatives informed us staff were knowledgeable about their family member's care, staff communicated effectively with them and this supported them to remain involved in decision making. A relative commented, "I always chat to staff. I feel involved in the care planning. They also involve [other relatives] too. In terms of my [relative's] care, they do communicate very well. There appears to be a good group of core staff that are well versed in my [relative's] needs."

Respecting and promoting people's privacy, dignity and independence

- 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 to complete tasks for themselves.
- Staff were respectful of people's privacy and dignity. A relative commented, "I've found all the [staff] to be excellent. They treat [my relative] with respect." Staff knocked on doors and called out before they entered bedrooms and bathrooms. Staff communicated with people in a confidential manner, to ensure their

privacy was respected. Staff treated people with dignity and respect throughout this inspection.

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. This included supporting people to celebrate events that were important to them, such as birthdays and anniversaries, with their family and friends.
- Although people told us they were happy with the care they received from staff, some people told us they did not have enough to do to keep them occupied each day. Comments included, "There's very little to do", "We don't get many activities" and "Not much goes on." A relative also told us they felt the home needed to improve in this area.
- We observed staff encouraged people to take part in some activities during the day and people told us external entertainers visited the home to provide entertainment that was of interest to people. However, regular, planned activity provision was not embedded into the daily service provided. We discussed this with the registered manager and they told us they were recruiting an additional activity coordinator for the home. They told us the activity provision would be much improved when this role was filled.

We recommend the provider refers to good practice guidance to support the development of the activity provision in the home.

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 what support they needed from staff. They were reviewed monthly or sooner, if a person's needs changed.
- Staff knew people very well and delivered care in accordance with people's preferences. People's care plans contained detailed 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. They tailored their approach to people, based on their knowledge of each person. This enabled them to care for people in a personalised manner. A relative commented, "I've seen how good staff are with my [relative]. [My relative] can be challenging sometimes, particularly with personal care, but they [staff] are very understanding and know exactly when to back off and try again."

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. We observed staff communicated effectively with people throughout this inspection.

Improving care quality in response to complaints or concerns

- The provider had an appropriate complaints procedure in place. It explained how people and their relatives could complain about the home and how any complaints would be dealt with.
- The registered manager maintained an overview of any complaints received via a complaints log. This allowed them to easily identify any themes or trends which they could act upon to improve the service.
- We checked the home's complaint records and found complaints were appropriately recorded, investigated and responded to, in accordance with the provider's policy. Relatives told us they felt able to raise any issues or concerns with the registered manager. One relative commented, "I am able to go and speak to [the registered manager] at any time. I know they will be receptive. If I have any concerns they always respond appropriately."

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. Where appropriate, people had care plans in place which described how they wanted to be cared for at the end of their life. People were encouraged to complete a 'preferred priorities for care' document expressing their preferences. This meant people could be supported to have a dignified death, in accordance with their own wishes.
- 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.

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 requires improvement. At this inspection this key question has now improved to 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. A staff member commented, "We try to go the extra mile."
- Staff morale was positive and they all told us they enjoyed their jobs. Comments included, "It's absolutely lovely to work here" and "I'd recommend it as a job and as a place to live". The staff team worked well together, and all staff said communication between the staff and managers was effective.
- 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 and all staff commented the registered manager was approachable and supportive.
- 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 an action plan was written and responsibility for ensuring it was completed was allocated to a particular staff member. They were given a deadline for the necessary improvements to be made.
- The provider maintained an overview of the home. A senior manager employed by the provider 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

- People, their relatives and staff had opportunities to give feedback about the home.
- Staff were able to share feedback during regular supervision meetings and staff meetings. The registered manager operated an 'open-door' policy and staff could speak with them about any ideas or concerns

whenever they wanted to.

- People living at Knowle Hill were invited to residents' meetings where they could discuss any concerns they had about the home or any ideas about how it could be improved.
- Feedback was also obtained from people, relatives, staff and community professionals via surveys. This feedback was used to make improvements to the home.

Working in partnership with others

- Staff worked closely with relevant health and social care professionals which helped to ensure people received effective care and support.
- The provider had established links with other organisations in the community, such as local religious organisations who visited Knowle Hill to support people with their faith.