

Agemco Ltd

Capricorn Cottage

Inspection report

88 Eastgate
Fleet, Holbeach
Spalding
Lincolnshire
PE12 8ND

Tel: 01406425067

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Capricorn Cottage is a residential care home providing personal care to 34 people with a learning disability or mental health diagnosis.

Care Homes

Capricorn Cottage accommodates 34 people in one purpose-built bungalow. Separate areas of the home are kept for people using the service to transition to different care settings.

The service is registered to provide support to up to 34 people and there were 29 people using the service at the time of our inspection. The service is larger than recommended by best practice guidance. However, we have rated this service good because the service was managed to maximise people's independence and to support their independence, choice, control and involvement in the community.

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

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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.

The provider had taken action to keep people safe from the risk of infection. Staff followed good practice guidance in the use of protective equipment. Medicines were well-managed, and people received their medicines on time and in line with their prescriptions.

There were enough staff to meet people's needs. Risks to people had been assessed and care was planned to keep people safe and increase their well-being.

The provider had systems in place to monitor the quality of care provided and took action to improve the service when needed. The provider ensured that people and their relatives were involved in the care provided and gathered their views on a regular basis.

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

Rating at last inspection (and update)

The last rating for this service was Good (published 14 December 2018).

Why we inspected

The inspection was prompted in part by notification of a specific incident when eight people using the service had money stolen from their accounts. This incident is subject to a criminal investigation. As a result, this inspection did not examine the circumstances of the incident.

We have found evidence that the provider took action following the theft to keep people safe from further financial abuse. Please see the safe section of this full report.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Capricorn Cottage

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 team consisted of two inspectors.

Service and service type

Capricorn Cottage is a care home. People at the home receive accommodation and 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.

There was not currently a registered manager for this service. However, the current manager had completed an application to register with the Care Quality Commission. The provider is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we wanted to gather information from the home before the inspection, so we could minimise our time at the service in line with our policies during the COVID pandemic.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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 took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with the relatives of three people who used the service about their experience of the care provided. We spoke with four members of staff including the manager and three care workers.

We reviewed a range of records. This included six people's care records and multiple medication records. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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 as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff told us they had received training in how to protect people from abuse. They were confident to raise concerns with the manager and also knew how to raise concerns with external agencies.
- Records showed safeguarding concerns had been investigated. The manager has worked alongside the local safeguarding authority to investigate concerns which had been raised about the management of people's money. Action was taken in conjunction with the local safeguarding authority to remove the responsibility of managing people's bank accounts from the provider.
- Staff knew about the provider's whistle blowing policy and how it protected them if they wished to raise concerns about the quality of the service provided to people.

Assessing risk, safety monitoring and management

- Risks to people had been identified and care was planned to keep people safe. Staff told us that they had time to review risk assessments and any changes in people's needs were discussed at handover.
- Relatives told us that staff supported people when they became distressed, for example, one person was supported on a one-to-one basis. One relative told us how the staff had supported a person to feel happy and relaxed, reducing their distress and need for medication. They said, "[Name] has really flourished there, they are eating, sleeping and singing. They are really happy and are going back to activities they used to enjoy."
- Staff had received training in how to keep people safe while providing care. This included training in how to use equipment to support people to move safely and how to monitor people for issues with their skin.

Staffing and recruitment

- There were enough staff to meet people's needs. The provider had used a dependency tool to calculate how many staff were needed. One member of staff said, "The manager will review the rota to ensure there is always enough staff."
- Some staff were leaving their shift at Capricorn Cottage and going on to work at another of the provider's care organisations. The manager was aware this situation was not ideal, from an infection control perspective, but said they needed to ensure everyone's needs were met during the pandemic. They explained that they had been recruiting staff for both services and there was a firm end date in place for this to stop happening.
- People were safely recruited and while there were some gaps in training and support the manager was aware of them and had plans in place to ensure staff could provide safe care to people. Staff had received spot checks on their competency. However, these had not always been documented. The manager told us they would ensure the spot check supervisions were fully recorded in the future.

Using medicines safely

- People's medicines were safely managed. The member of staff who administered the medicines had received training and medicines were administered safely and in line with best practice guidance.
- Medicines were stored safely and accurate records of medicines were kept. Regular audits ensured there was management oversight of the ordering, storage and administration of medicines.

Preventing and controlling infection

- The provider had an infection control policy in place. They had continually reviewed the policy to ensure it reflected all the changes in guidance issued during the COVID pandemic. The provider had access to regular COVID testing for staff and residents in line with the government guidelines.
- The provider had provided protective equipment for staff and had provided training on how to use and dispose of the equipment safely. Protective equipment was also available to visitors to the home, including people's relatives.
- The cleaning schedule had been reviewed to ensure that there was enhanced cleaning in place to reduce the risk of infection in the home.

Learning lessons when things go wrong

- Incidents were identified, recorded and action taken to keep people safe. The manager ensured that all accidents and incidents were recorded on the computer system. This allowed the manager to monitor the action taken to keep individuals safe. For example, records showed care plans had been reviewed following incidents.
- The recording of incidents also supported the manager to review trends in incidents. This showed that the support in place for one person had not been working well. This enabled the manager to review the person's care needs and liaise with healthcare professionals. This extra input resulted in changes to the person's care plan. This improved the person's experience of care and reduced their need for medicines to manage their emotions.

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 as Good. At this inspection this key question has remained the same. 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

- All the relatives we spoke with knew who was managing the service and knew that they could speak with them if they had any concerns.
- Relatives told us they were kept up to date about people's needs and were included in planning the care needed. One relative told us, "Capricorn Cottage have supported me. Professionally they could not have done any more to help [Name]. They have pushed for consultations with healthcare professionals and have taken on the battle for my relative."

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

- There was no registered manager in post. However, the provider had met their regulatory responsibility and ensured that we were kept up to date with who was managing the service and the planned recruitment process. The interim manager had applied to be registered with us while they were overseeing the service.
- The provider had taken action to comply with the regulatory requirements. They had ensured that their rating was displayed in the home and had notified us about events which happened in the home.
- The provider had been open and honest with people and relatives about incidents which happened. They had ensured that relatives were kept up to date with any concerns about people's care needs.

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

- Relatives told us they felt fully included in the care of their relatives. One relative told us that the home had taken the pressure of caring of their shoulder. They said, "The manager has been willing to work with me and is very interested in what [Name] is like when they are happy as they have never seen it." Records showed since moving into the home the staff had continued to work with the family and healthcare professionals to help this person be more settled and happier.
- The provider had sent out surveys to people and their relatives to gather their views on the care provided. This was an annual survey and the results were used to identify areas for improvement.

Continuous learning and improving care; Working in partnership with others

- The provider had taken action to continually improve the management of the home and the care provided to people. For example, they had arranged for an external consultant to visit the home and complete an

assessment of where improvements could be made. An action plan was in place to ensure all their recommendations were followed.

- The manager took action to keep up to date with changes in legislation and best practice.
- The provider worked collaboratively with health and social care professionals to ensure that people received care which met their needs.