

## Zero Three Care Homes LLP

# Estoril

### Inspection report

Wonston Road  
Southminster  
Essex  
CM0 7FE

Tel: 01621774776

Website: [www.zerothreecarehomes.co.uk](http://www.zerothreecarehomes.co.uk)

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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

We inspected Estoril on the 26 November 2018.

Estoril is a residential care home for up to five people with learning disabilities. At the time of our inspection five people were using the service. The service was provided in a converted house in a residential area with easy access to the local community and had a large garden. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission regulates both the premises and the care provided, and both were looked at during this inspection.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

The service was safe. Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare. There were systems in place to minimise the risk of infection and to learn lessons from accidents and incidents. People were cared for safely by staff who had been recruited and employed after appropriate checks had been completed. People's needs were met by sufficient numbers of staff. Medication was dispensed by staff who had received training to do so.

The service was effective. People were cared for and supported by staff who had received training to support people to meet their needs. The registered manager had a good understanding of their responsibilities in relation to the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards. 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. People were supported to eat and drink enough to ensure they maintained a balanced diet and referrals to other health professionals were made when required. The environment was well maintained and suitable for the needs of people.

The service was caring. Staff cared for people in an empathetic and kind manner. Staff had a good

understanding of people's preferences for care. Staff always worked hard to promote people's independence through encouraging and supporting people to make informed choices.

The service was responsive. People and their relatives were involved in the planning and review of their care. Care plans were reviewed on a regular basis. People were supported to follow their interests and participate in social activities. The registered manager responded to complaints received in a timely manner.

The service was well-led. The service had systems in place to monitor and provide good care and these were reviewed on a regular basis.

Further information is in the detailed findings below.

## 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 remains Good.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Good ●

The service had improved to Good.

Care plans were individualised to meet people's needs. There were varied activities to support people's social and well-being needs. People were supported to access activities in the local community.

Complaints and concerns were responded to in a timely manner.

### Is the service well-led?

Good ●

The service remains Good.

# Estoril

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection visit took place on the 26 November 2018 and was unannounced. The inspection was carried out by one inspector.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed previous reports and notifications that are held on the CQC database. Notifications are important events that the service must let the CQC know about by law. We also reviewed safeguarding alerts and information received from a local authority.

During our inspection visit we observed four people and their interaction with staff. We spoke with the registered manager, deputy manager, area manager and one care worker. We also spoke with a healthcare professional and rang and spoke with one relative. We reviewed a range of records held in relation to people's care and the running of the service.

# Is the service safe?

## Our findings

People remained safe living at the service. We saw that people were happy in the company of staff. A relative told us, "[Person's name] is very happy living there."

Staff knew how to keep people safe and protect them from safeguarding concerns. Staff were trained and able to identify how people may be at risk of harm or abuse and what they should do to protect them. Staff also knew how to 'whistle blow' and raise concerns outside of the organisation. One member of staff told us, "I would raise any concerns with my manager and keep escalating the concern including outside to the police and CQC if necessary." Following a recent safeguarding concern, the registered manager and area manager held a training session with all staff to ensure staff understood their responsibilities to safeguard people. The registered manager had systems in place to investigate and report safeguarding concerns and had worked in partnership with other authorities such as the police and local authority to make sure people were safe.

Staff had developed a good understanding of the risks to people and the steps they needed to take to reduce these risks. People were also encouraged to take positive risks so they learnt new skills and had new experiences. Positive support plans helped people and staff manage negative behaviours safely. The service had emergency plans in place and this included guidance to staff on how to support people in the event of a fire evacuation. Staff were trained in first aid and knew how to support people in an emergency.

People were supported by sufficient numbers of staff. The registered manager told us they always worked above the levels required to support people. There was a consistent staff team who knew people well. New staff were employed following the appropriate recruitment checks.

People were cared for in a safe environment. The provider had a maintenance team to attend to any issues as they arose and an on-going refurbishment plan. The deputy manager completed regular health and safety audits and raised issues when required. For example, they told us they were waiting for a new stair carpet to be fitted where this had become worn. Staff were trained in infection control to stop the spread of infections and used appropriate personal protection equipment.

The registered manager had systems in place to learn from risks and significant incidents or accidents at the service. Incidents were fully investigated and learning points were discussed at staff meetings and staff handovers.

Medicines were managed and administered safely. Only trained and competent staff administered people's medicines. The registered manager ensured staff training was kept up to date and observed medication practices. Regular audits were completed to ensure people were receiving their medication appropriately. The deputy manager told us they had systems in place to take emergency medication with them when out in the community, for example, if a person was at risk of an epileptic seizure, so they could receive emergency treatment.

## Is the service effective?

### Our findings

People continued to receive effective care from staff who were supported to obtain the knowledge and skills they needed to provide good care. Staff told us they had been supported to achieve nationally recognised training certificates. The deputy manager told us, "I am just finishing my NVQ level 3 and I have done the providers deputy manager training programme."

The registered manager told us that the provider invested in face to face training days for staff and believed in developing staff skills and their career progression within the company. New staff had a full induction which included completing the Care Certificate. One member of staff said, "My induction was very good, I shadowed shifts and completed all the training, I feel very well supported." Staff told us they had regular staff meetings and supervision with the registered manager and deputy manager to discuss all their training needs and to reflect on their practice. Staff also received an annual appraisal.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

The provider took the required action to protect people's rights and ensure people received the care and support they needed. Staff had received training in MCA and DoLS, and had a good understanding of the Act. Staff supported people to make decisions for themselves and gave them as much choice and support as possible. Appropriate applications had been made to the local authority for DoLS assessments. The registered manager told us people were supported to have access to advocates if required to help them with important decisions about their care. This told us people's rights were being protected.

People were supported to eat and drink to maintain a healthy diet and weight. Staff monitored people's weight and advised them with healthy lifestyles where required. People had choice over their diets, and staff encouraged people to eat varied healthy meals.

People were supported to access healthcare as required and the service had good links with other healthcare professionals, such as GPs, dentist and the learning disability team. The registered manager told us people were supported to attend health appointments and each person had a health passport containing important information about their healthcare and support needs.

The environment was appropriately designed and adapted to support people. The service was spacious, people had their own rooms which had been individually decorated and personalised the way people wanted them. There was a conservatory which led out onto a large garden area, part of the garden had been turned into a sensory space for people to use.

## Is the service caring?

### Our findings

Staff continued to provide a very caring environment. We saw that people were happy and relaxed in the company of staff. A relative told us, "We are very happy with the service."

People's independence was promoted. People were encouraged to help around the home with daily living tasks and staff told us people had learnt new skills in this way. One member of staff said, "It may seem a small thing but even putting a plate in the dishwasher can be a major achievement." The area manager told us staff supported people to help them develop their independent living skills for example, using hand over hand techniques to butter bread. The registered manager told us some people's independent living skills had really developed whilst living at the service.

Staff knew people well including their preferences for care and their personal histories. We saw care records contained all the information staff would need, to know people, what was important to them and their likes and dislikes. Each person had a keyworker who had a meeting with them each month to discuss their goals and aspirations and to help them plan anything they wanted to achieve. A relative told us communication was very good with staff and they were kept up to date with any changes.

People were supported and encouraged to maintain relationships with their friends and family whilst staying at the service. Relatives could visit at any time if they wished to see people, and staff also arranged to take people to visit their relatives. People were treated with dignity and respect and their diverse needs were also supported. We saw people's privacy was respected and staff asked permission before entering their rooms.



## Is the service responsive?

### Our findings

At our last inspection the service was rated as requires improvement as they had not fully implemented some aspects of person centred care planning. At this inspection we found that new documents had been implemented and were fully integrated with people's support plans. At this inspection we have rated the service Good.

People had very person-centred support plans in place. Support plans contained all the information staff would need to promote people's independence and to support them in the way they wished to be supported. Relatives told us they were kept fully informed and were involved in planning people's care. Support plans were regularly reviewed so staff had the most up to date information to support people.

The service remained responsive to people's needs and came up with innovative ways to support people's independence. For example, the registered manager told us they bought specially adapted furniture to support people's comfort. In addition, they worked with other health professionals such as a behaviour therapist to support people's behaviour needs.

From 31 July 2016, all organisations that provide NHS care or adult social care are legally required to follow the Accessible Information Standard. This means people's sensory and communication needs should be assessed and supported. We saw staff were very good at ensuring people could communicate in whatever form they found comfortable. We saw in people's care plans it was recorded what methods of communication supported their needs best. People were assessed by a speech and language therapist and occupational therapist for example, to assist their sensory needs. Some people used picture stories to help them plan and communicate their activities. The deputy manager showed us communication folders they had put together to help one person to express their needs with the aid of pictures. Some people at the service used basic Makaton and staff were given training in this, and there were pictures of basic signs people and staff could refer to. One person used a communication board so they could point to phrases to communicate their needs.

People were supported to take part in activities they enjoyed. People accessed the community every day to take part in activities such as bowling, shopping, walks and sports activities. People were also supported to go on holidays each year with staff or family. Staff told us people had varied interests including cooking, drawing and playing games when they were not going out into the community.

The registered manager responded to complaints appropriately. We saw that complaints were investigated and actions taken where necessary. People were encouraged to express themselves if they had complaints, and if they wished they were able to contact the provider to raise complaints.

There was not any end of life care at the service, however the registered manager knew how to access support with this if required.

## Is the service well-led?

### Our findings

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

There was a clear vision and culture that was shared by the registered manager and staff. People were supported to take positive risks and achieve their goals to have fulfilled lives. One member of staff told us, "We want people to have the same lifestyles as us, to be happy and achieve as much independence as they can."

The registered manager understood their registration requirements including notifying us of significant events that happened at the service. They were also aware of their duties under the new General Data Protection Regulations. We found people's information was kept secure and confidentiality was maintained. The latest CQC inspection report rating was on display at the service and on their website. The display of the rating is a legal requirement, to inform people or those seeking information about the service and visitors of our judgments.

People benefited from a staff team that worked together and understood their roles and responsibilities. Staff felt very supported by the registered manager and deputy manager, and said they felt they had a good team. One member of staff said, "I feel really well supported working here, the manager is always around and approachable." Staff had regular handover meetings to discuss people's care. Staff were always able to contact a senior member of staff if they had any concerns as the provider had an on-call system for their services. This demonstrated that people were being cared for by staff that were well supported in performing their role.

The registered manager told us they felt supported by the provider, and had regular management meetings to discuss policies, the running of the service and to gain support from other managers in the company. Staff were recognised with employee 'Hero' awards. A staff member had been recognised recently for their development of healthy menus for people.

People were actively involved in improving the service they received. The registered manager gathered people's views on the service on a daily basis through their interactions with people. People were also encouraged to express their views and opinions at keyworker meetings. This showed that the management listened to people's views and responded accordingly to improve their experience at the service.

The service had been developed as a small family home in the middle of the community. The registered manager told us the home was inclusive in the local community and they had built good relationships within the community.

There were effective arrangements in place for monitoring the quality of the service and the registered

manager carried out a number of audits to give them, and the provider, a good oversight of the service.