

Voyage 1 Limited

# Edgcumbe House

## Inspection report

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## Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Requires Improvement ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

This comprehensive inspection took place on 15 August 2018 and was unannounced.

Edgecumbe House is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. The service can accommodate up to 10 people in a converted older property.

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.

At the last comprehensive inspection in September 2015, the service was rated Good. At this inspection we found the service remained Good.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Edgecumbe House on our website at [www.cqc.org.uk](http://www.cqc.org.uk)'

The service has 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 building was subject to subsidence but was being safely maintained, the building was regularly checked and the registered provider was looking for alternative accommodation for people to be able to move. However, this meant the internal environment was not well maintained as there were many cracks and movement in rooms to the front of the building.

The service continued to protect people from the risk of harm or abuse because staff employed were trained in safeguarding adults and understood their responsibilities. The registered provider had policies and systems in place to manage safeguarding incidents and maintained records of any suspected or actual safeguarding concerns.

Risks were managed so that people avoided injury or harm. Medication systems continued to be robust to ensure people received medication as prescribed. Staffing numbers were sufficient to meet people's needs and recruitment systems were followed to ensure staff were suitable to support people.

People were supported to have choice and control of their lives and staff supported them in the least restrictive way possible.

People received a well-balanced diet to maintain their health and wellbeing.

People were treated with respect. People told us staff were kind and very caring. Staff demonstrated a good awareness of how they respected people's preferences and ensured their privacy and dignity was maintained. We saw staff took account of people's individual needs and preferences while supporting them.

People were able to take part in meaningful activities. Some people also received one to one support for activities in the community and had an organised holiday each year.

The service was well-led and people had the benefit of a culture and management style that were inclusive and caring. Staff were clear about their roles and responsibilities and had access to policies and procedures to inform and guide them.

A system was in place for checking the quality of the service using audits, satisfaction surveys and meetings. People made their views known through direct discussion with the registered manager and staff or through the complaint and quality monitoring systems. People's privacy and confidentiality were maintained as records were held securely on the premises.

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?

Requires Improvement ●

The service had deteriorated to Requires Improvement, this was due to the environmental issues.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Good ●

The service remains Good.

### Is the service well-led?

Good ●

The service remains Good.

# Edgecumbe House

## 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 checked whether the registered 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 comprehensive inspection took place on 15 August 2018 and was unannounced. The membership of the inspection team was one adult social care inspector. At the time of our inspection there were 7 people using the service.

Prior to the inspection visit we gathered information from a number of sources. We looked at the provider information return (PIR). This is a form that asks the registered provider to give some key information about the service, what the service does well and improvements they plan to make.

We looked at notifications sent to the Care Quality Commission by the registered manager. We also obtained the views from the service commissioners, local authority contracts officers and the safeguarding team.

We observed staff providing support to people in communal areas of the premises and interactions between people that used the service and staff. We looked around the premises, communal areas and people's bedrooms, after asking their permission to do so. We spoke with two people who used the service and contacted three relatives following our inspection for their views and feedback.

We spoke with the registered manager, a senior support worker and three support workers. We also contacted and spoke with a health care professional and relatives following our inspection.

We looked at documentation relating to people who used the service and staff files, as well as the management of the service. This included people's care records, medication records, staff recruitment, training and support files, as well as minutes of meetings, quality audits, policies and procedures.

# Is the service safe?

## Our findings

All the people we spoke with told us they felt very safe living at Edgecumbe House. One person said, "I am safe it is like my family."

The registered provider continued to safeguard people who used the service. There were safeguarding policies and procedures in place to guide practice. Safeguarding procedures were designed to protect people from abuse and the risk of abuse. Staff we spoke with were knowledgeable on procedures to follow.

We found risk assessments were in place in people's care files. Risks had been regularly reviewed and staff received regular training on how to manage risks to ensure people were safe. Environmental risk assessments had also been completed and there was a separate file for personal emergency evacuation plans (PEEP's) in place. This information was easily accessible in the case of a fire to ensure people's safety.

From our observations and speaking with staff it was evident staff understood people's individual needs and knew how to keep people safe. We saw they encouraged people to stay as independent as possible while monitoring their safety. Where assistance was required this was carried out in a safe way. The registered provider's accident and incident policies and records ensured people were protected and lessons learnt. The analysis of incidents ensured action was taken to identify any themes or triggers to manage and prevent accidents or incidents re-occurring.

We found there was adequate staff to meet people's needs. Some people received one to one support for their safety and this was in place at the time of our inspection. Staff we spoke with confirmed there was adequate staff to be able provide the care and support required, including accessing the community and activities.

The registered provider continued to ensure a robust recruitment and selection process was followed, which included new staff receiving a structured induction to the home. The files we saw contained all the essential pre-employment checks. This included written references, and a satisfactory Disclosure and Barring Service (DBS) check. The Disclosure and Barring Service carry out a criminal record and barring check on individuals who intend to work with children and vulnerable adults, to help employers make safer recruitment decisions.

We saw medication procedures were followed for safe management of medicines in the service. We found medicines were stored safely. We saw records were kept for medicines received, administered and for disposal of medicines that were not required. We found people were receiving medication as prescribed. People were also protected from the risk of infection because infection, prevention and control procedures were followed by staff.

# Is the service effective?

## Our findings

Every person we spoke with, without exception were extremely happy with the care and support they received. People told us staff were good and they were very happy living together at Edgecumbe House. Relatives we spoke with told us they were 'delighted' with the care and support.

However, the decoration of the premises required attention. The registered manager told us the building was subsisting, it was being monitored and although was assessed by a structural engineer to be structurally safe, there were numerous cracks and movement that meant the decoration was badly damaged. The front of the building had moved due to inadequate foundations, therefore floors slopped towards the windows, with gaps under skirting boards, cracks around ceilings, windows and doors. Some had been filled but had re-opened so it was impossible to decorate. This meant the premises was not properly maintained.

The registered manager told they were intending to move premises, many of the people had already moved either to supported living or back with families. However, the seven people who were still living at Edgecumbe wanted to continue to live together so it was providing difficult to find alternative accommodation. This was because the guidance 'Registering the right support' for people with a learning disability did not advocate larger groups of people living together, but more individualised care and support in community settings. People we spoke with told us they wanted to live together one person said, "This [the people they lived with] is my family, I want to stay together." A relative we spoke with told us, "It is really important for them [the people who lived at Edgecumbe House] to stay together. It is what they all want."

We found the registered manager continued to ensure staff had the right skills, knowledge and experience to meet people's needs. All new staff completed an induction when they commenced work. New staff also completed the Care Certificate. This certificate looks to improve the consistency and portability of the fundamental skills, knowledge, values and behaviours of staff, and to help raise the status and profile of staff working in care settings.

Staff we spoke with all told us that they received the training they needed to do their job well. Staff were also able to attend specific additional training if required to develop their skills further. Staff had received regular supervision sessions and an annual appraisal of their work.

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 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, and whether any conditions on authorisations to deprive a person of their liberty were being met. We found applications for DoLS had been made for people who required this. This was because people required staff to support them when out in the community and provide constant supervision when in the home to ensure their safety.

We saw that people continued to be offered a nutritious and balanced diet, which met their individual needs

and preferences. We observed people choosing and helping to prepare snacks and their lunch. People could choose whatever they fancied and there were no restrictions what time to eat. People were also able to have drinks when ever they wanted with support from staff.



# Is the service caring?

## Our findings

Without exception people we spoke with confirmed that staff respected their decisions and maintained their privacy and dignity. Everyone was extremely happy with the care and support provided.

Relatives we spoke with told us staff were very good, knew people's needs and provided excellent care and support. One relative said, "It is a lovely atmosphere when you visit very inclusive."

We observed that staff members supported people in a kind, caring and friendly manner. We saw staff members engaging with people in the communal areas of the home and saw that there was regular and ongoing interaction with people. Staff members understood people's communication needs and behaviours and they responded immediately when people indicated that they wanted something or showed signs of anxiety. For example, one person who did not communicate verbally, wanted to communicate with the inspector, the staff member understood what they wanted to say. The staff member explained what the person was saying, this made the person very happy they were smiling and laughing.

We saw that care delivered was sensitive to people's needs. Staff were kind and considerate. Interactions we observed were extremely positive and it was obvious from people's reactions to staff and the laughter and banter, that staff knew people very well. Staff used people's preferred names and we saw that people's dignity and privacy was respected. People's general well-being was assessed and monitored by the staff who knew what events could upset their mental or physical health and staff picked up when people were not their usual self.

We saw that although people understood verbal information provided by staff, a range of individualised tools and supports to assist communication and choice for people were also used. These included Makaton signing, use of objects of reference and picture assisted support, such as PECS (Picture Exchange Communication System). During our inspection we observed that staff members used short simple sentences when speaking with people to assist understanding. People were given time to process information and respond.

Staff supported people to maintain relationships with those important to them, such as relatives and friends. We observed people could have their friends and family visit when they wished and we saw staff facilitated contact when necessary.

## Is the service responsive?

### Our findings

People we spoke with told us they received good care and support. Relatives we spoke with told us staff provided exceptional care and support that met the needs of their family member.

People's care plans were person centred and up to date and we saw that they were regularly reviewed and amended where there were any changes in people's support needs. The care plans covered a range of support needs such as personal care, behaviours, communication, activities at home and in the community, health and medicines and eating and drinking. Each individualised plan included guidance for staff members on how people should be supported. For example, behavioural plans detailed a step by step approach to reducing the early signs of anxiety through, for example, distraction and engagement.

The daily records and visit records were all up to date. These records showed the registered manager worked responsively with external professionals, such as learning disability nurses, occupational therapists and dieticians. We saw the professional visit record was updated following any input from health care professionals.

People were supported to access the community and participate in activities. Activities were taking part during our inspection, people could choose what they wanted to do and staff facilitated this. People went into town, to the park and out for lunch. The activities were appropriate and meaningful.

Peoples religious and cultural needs were also considered and addressed. We saw that people's care plans fully reflected their physical, mental, emotional and social needs. This included any protected characteristics under the Equality Act 2010. The Act replaces all existing anti-discrimination laws, and extends protection across a number of protected characteristics. For example, race, gender, disability, age, religion or belief. Staff had ensured people were treated equally.

Relatives we spoke with told us the people who lived at Edgecumbe House were always appropriately stimulated and were never at home. A relative said, "[my relative] loves the activities and staff facilitate their choices." One person we spoke with told us they were going to the circus and they were very excited. Another person was interested in 'action hero's' and staff had arranged for them to go to an event about this. They told us about this event and said, "I am looking forward to it, I am going with [key worker] it will be good, we both like it." The registered manager explained they had chosen key workers for people with similar interests and hobbies so that peoples hobbies could be facilitated and enjoyed with a care worker who also had an interest in the area. People also were supported to go on holiday each year one person told us they had recently returned for a holiday with their parents and had really enjoyed it.

There was a complaints' policy which was given to each person when their care package commenced. It was written in plain English and gave timescales for the service to respond to any concerns raised. A record of complaints received had been maintained with outcomes.

A relative we spoke with told us they were confident that any issues or concerns highlighted would be taken

seriously by the management team and they would take action to address them. They said they had no concerns to raise as they were very happy with the care and support provided.

People who lived at Edgecumbe House were young and healthy. However, end of life wishes and choices had been considered. Staff explained how one person had recently been bereaved and how they had supported them through their grieving process. Staff told us it was important that the person understood what had happened to be able to grieve and be supported through an emotional time.

## Is the service well-led?

### Our findings

There was a structured team in place to support the registered manager. This included a deputy manager, senior support workers and support workers. Each member of staff we spoke with was clear about their role and the roles of the other staff employed at the home. We saw the service worked in partnership with other agencies, this had worked particularly well in the discussions and decisions made to find alternative accommodation and moveing due to the problems with the building.

The registered manager and registered provider were aware of the need to maintain their 'duty of candour'. This is their responsibility to be honest and to apologise for any mistake made. They sent notifications to us in a timely way, thus fulfilling the requirement to notify us of accidents/incidents and safeguarding concerns.

Most people using the service were unable to communicate their views about leadership of the service but our observations saw that the service benefitted positively from the registered manager and the way in which the home was run.

All staff we spoke with told us that they were well supported by their managers. They said there was an open and transparent culture in the home and they were comfortable raising concerns. Staff felt they worked well as a team and everyone pulled together to share ideas and resolve problems. There were regular staff meetings. The records of these showed that issues in relation to people's support needs, safeguarding and quality and safety at the home were regularly discussed. Staff members told us that they valued these meetings.

We found systems were in place for managing safeguarding concerns and incidents and accidents. The registered manager took steps to learn from such events and put measures in place which meant they were less likely to happen again.

Effective systems to monitor and improve the quality of the service provided were in place. We saw copies of reports produced by the registered manager and the operations manager. Any issues identified were recorded on an action plan and were actioned.

The registered manager actively sought the views of people who used the service and their relatives. This was done in a number of ways such as daily interactions with people, resident meetings and questionnaires. People's feedback was taken into account to improve the quality of the service.