

Kerensa Care Limited

Tresillian Residential Home

Inspection report

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Date of inspection visit:
30 August 2022

Date of publication:
27 September 2022

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

Tresillian Residential Home (known as, Tresillian) is a residential care home providing personal care to six people at the time of the inspection. The service can support up to seven people. The service also had the capacity to offer short stays to people. This was on a separate floor to the people who lived in the service permanently.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support:

People were supported to be independent and have control over their own lives. People made choices and took part in meaningful activities which were part of their planned care and support. Staff were supporting them to identify aspirations and goals.

People had a choice about their living environment and were able to personalise their rooms.

People played an active role in maintaining their own health and wellbeing. Staff supported people with their medicines in a way that promoted their independence and achieved the best possible health outcome.

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.

Right Care:

People received kind care from staff who protected and respected their privacy and dignity and understood their individual needs.

People enjoyed undertaking activities and pursued interests that were tailored to them. They were given the opportunity by staff to actively engage and try new activities. People were able to communicate with staff and understand information given to them as staff understood their individual communication needs.

The service had enough appropriately skilled staff to meet people's needs and keep them safe.

Right Culture:

People received good quality care, support and treatment from trained staff. External professionals were

engaged to enhance the quality of the service where possible.

People and those important to them, were actively involved in planning their care. Staff placed people's wishes, needs and rights at the heart of everything they did. People's quality of life was enhanced by the culture of improvement and inclusivity within the service.

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

Rating at last inspection

The last rating for the service under the previous provider was good, published on 26 October 2017. It was the first inspection since the provider registered with us to run the service on 24 March 2021

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Good ●

Is the service effective?

The service was effective.

Good ●

Is the service caring?

The service was caring.

Good ●

Is the service responsive?

The service was responsive.

Good ●

Is the service well-led?

The service was well-led.

Good ●

Tresillian Residential Home

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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was completed by one inspector.

Service and service type

Tresillian is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Tresillian is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we hold about the service and sought feedback from the local authority. We used information gathered as part of direct monitoring activity (DMA) that took place on 13 July 2022 to help plan the inspection and inform our judgements.

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

We used all this information to plan our inspection.

During the inspection

We spoke to four people who lived at the service, two staff members and the registered manager. We reviewed two people's care plans, risk assessments and medicines records. We also reviewed a range of records related to the management of the service such as health and safety records, cleaning records, audits and meeting minutes. Following the site visit we spoke to three relatives and two staff members by phone as well as the provider.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection since the service was registered under this provider. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at Tresillian.
- Staff had received safeguarding training and understood how to report any concerns they had.
- People discussed what safeguarding meant and how to raise concerns at residents' meetings.

Assessing risk, safety monitoring and management

- People had risk assessments in place to guide staff on how to reduce any risks to them.
- People were encouraged to take everyday risks to help increase their independence.
- Staff had a good understanding of how to keep people safe and their responsibilities for reporting accidents, incidents or concerns.
- Health and safety checks were completed to help ensure the service remained safe. People had recently been asked if they would like to partake in health and safety checks. Information about the checks had been written in a way that suited people's communication needs.

Staffing and recruitment

- There were enough staff to meet people's needs. The rota was flexible and designed around what people were planning to do with their time.
- The provider completed appropriate checks to assure themselves new staff were safe to work with vulnerable adults.

Using medicines safely

- People had been supported to store their medicines in their own rooms. This had increased their understanding of what medicines they took and why.
- People's medicines had been reviewed with the GP and reduced where possible.
- Staff had received training in safe medicines management and their competence to administer medicines safely was checked regularly.
- The registered manager regularly checked medicines and medicines administration records (MARs). They then shared any areas for improvement with the staff team.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.

- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

The provider was facilitating visits for people living in the home in accordance with the current guidance.

Learning lessons when things go wrong

- Accidents and incidents were recorded along with any action taken. These showed that any improvements or changes were discussed with staff to reduce the risk of reoccurrence.

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.

This is the first inspection since the service was registered under this provider. This key question has been rated 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

- The registered manager told us they and the staff team had worked hard to ensure the service reflected best practice. Feedback shared with the service by a professional included, "It was a pleasure and joy to attend a review where staff are active and very positive in the care they provide for their residents."
- People had been supported to create their own care plans. This helped ensure staff understood what support each person wanted in each aspect of their life.
- Staff spoke confidently about their role in empowering people to make their own choices. Feedback collected from a relative during the recent Direct Monitoring Activity (DMA) included, "What I especially like is that the residents are all made to feel important and in control of aspects of their lives."

Staff support: induction, training, skills and experience

- Ongoing training was planned to help ensure staff skills and knowledge remained up to date. The registered manager monitored this to ensure updates were completed when needed.
- Staff were supported by the registered manager to develop their skills and knowledge further through direct observation, competency assessments and one to one supervisions.
- Staff confirmed communication with the registered manager and team was good which helped the service run smoothly.

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

- People planned their meals together and were involved in cooking. The registered manager told us this was a new experience for people which they were enjoying; however they were aware that in the future some people might want to plan their own meals and the service would facilitate this.
- Staff understood any dietary needs people had and the importance of encouraging people to eat a balanced diet.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People were involved in monitoring their health, understanding how to recognise any concerns and booking their own appointments, where possible. Care plans included what people's health needs meant to them and how they affected them.
- The registered manager and staff worked with external professionals to help ensure people were receiving the right care and support.
- One person liked to attend appointments alone. To help ensure staff were aware of all the information they needed to know about, the person had consented to professionals contacting staff after the

appointment to share information as necessary.

- Staff understood people's oral health needs and training had been booked to increase their knowledge.

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

- The registered manager told us they wanted the service to look homely for people. People had been supported to arrange and decorate their rooms how they wanted them and proudly showed us different aspects that were important to them. A relative told us, "They seem to really care about the residents and it's very homely there."
- The outside space had been designed to meet individual needs; for example there was a decking area, an area that was being developed for growing vegetables and an area outside someone's bedroom window that had been designed and planted how they liked it.
- Some people used wheelchairs but the kitchen was not currently accessible to them. The registered manager told us the provider was planning to alter the kitchen to meet the needs of wheelchair users.

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 MCA 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.

- People living in the service had the capacity to make their own decisions and staff understood that people had the right to make decisions staff might deem unwise.
- Staff requested consent from people before providing care or support. Formal consent had been sought from people regarding some aspects of the service, such as allowing their photo to be used on the service's social media account and allowing staff to manage their medicines.
- No-one had, or required, a DoLS authorisation.

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.

This is the first inspection since the service was registered under this provider. This key question has been rated 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

- Staff's in-depth knowledge of people helped ensure people were treated equally and their diverse needs were met.
- Staff interacted with people in a kind, respectful way. Feedback collected during the recent DMA from a relative of someone who had used the short stay accommodation included, "The manager and all their staff were so friendly, caring and attentive and made my relative and the family, feel very welcome and relaxed."

Supporting people to express their views and be involved in making decisions about their care

- People's care plans described how they needed staff to communicate with them. Staff understood these and this increased people's confidence in expressing their views.
- People described decisions they had made about their support and the environment.
- People were involved in recruiting new staff and the registered manager listened to their views and opinions.
- An external professional had been engaged to work with people to discuss their aspirations for the future so the service could be tailored to meet their wishes.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity.
- People were being enabled to increase their independence in all aspects of their lives. A staff member told us, "It's really boosted their self-esteem. They now know they can do it and it's helped them feel part of the home."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection since the service was registered under this provider. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People were involved in planning their own care and making decisions about how their needs were met.
- People had choice over all aspects of the service and were encouraged to share their ideas.
- People had been involved in writing their own care plans. This meant their support needs and preferences were described in the way they wanted.
- Feedback from a relative collected during the recent DMA included, "Since [registered manager] and his team have been running Tresillian, we have noticed a tremendous difference in [person], both socially and behaviourally. They are now happy and fulfilled with their daily life and being helped to make their own decisions in all areas."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The registered manager and staff were aware of people's communication needs and how people needed information to be presented. This was recorded in people's care plans.

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

- People were supported to take part in a range of activities and events within the service and the local community. Feedback received by the service from a relative included, "I have noticed a big change in [person], in that they have a lot more to talk to me about. There are lots of things happening in the home."
- The registered manager and staff were supporting people to experience a range of pastimes and opportunities to help them make decisions about their future. Feedback from a person collected during the recent DMA included, "I'm happy living at Tresillian and love how the team support me to do things I never did, which I really enjoy."
- Staff were increasing their knowledge of what people enjoyed which helped them tailor suggestions and ideas. Feedback received by the service from a professional included, "The men and ladies living in the home are actively encouraged to live their life to the fullest, filling it with quality time, enjoyment and skills."

Improving care quality in response to complaints or concerns

- The service had a policy and procedure in place for dealing with any concerns or complaints. No

complaints had been made about the service.

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.

This is the first inspection since the service was registered under this provider. This key question has been rated 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

- The registered manager had an in depth understanding of personalised care and was keen to develop a positive culture within the service. Staff had adopted the same ethos and enthusiasm and were focused on tailoring the service to ensure it helped people achieve good outcomes. Feedback received by the service from a relative included, "It has been lovely to see the change in the home. This all creates an atmosphere that makes a care home actually become a home for the residents."
- People were involved in as many aspects of the service as possible, including recruitment, training, booking appointments and answering the door and phone. This helped ensure they were central to their service
- Feedback collected from relatives during the recent DMA included, "Since Karensa Care has taken over the running of the home last year [person] has thrived in the new environment. It is a much happier place for them. The staff provide care above and beyond what I'm sure is required of them" and "The staff were consistently cheerful and positive, and nothing was too much trouble. There was a definite sense of dedication from everyone; they truly seem to enjoy caring for their residents. I only wish they could find a room for me to stay as well!"

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

- The registered manager took an active role within the running of the home. They worked with the staff team supporting people which helped them increase their knowledge of people's needs. Feedback received by the service from a professional included, "I wanted to say how impressed I was with Tresillian residential home and how it is being run."
- People, relatives and staff were complimentary about the registered manager and their desire to provide a high-quality service. Feedback collected from relatives during the recent DMA included, "It is clear that it is the manager's passion to strive for excellence and to go the extra mile. We were taken aback at the thoughtfulness and kindness." Feedback from staff collected during the recent DMA included, "The registered manager cannot do enough for the residents and the team. They go out of their way for everyone and is always at hand for support if needed."

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

- Feedback was sought from people on a regular basis about the service. The registered manager had

recently also collected feedback from people's friends and family. Information collected was used to make changes to the service, where possible.

- Feedback collected from relatives during the recent DMA included, "They always had time to listen to us and communication was great" and "Tresillian is now a place of fun and happiness for all the residents, with all their personal activities, and parents are included and encouraged to participate by photos and wonderful communication."
- Staff meetings were used to encourage staff to share any ideas they had for improving the service. Staff told us they had felt engaged and consulted about each change that had been made. Comments included, "I think [the registered manager] is doing a great job really. When they came in, they had a lot that needed to be changed and they have made every effort to help us make the required changes. We were always involved."

Continuous learning and improving care

- The registered manager had created a system of checks to help ensure all aspects of the service were reviewed on a regular basis. This helped identify any changes that were needed.
- The provider visited the service regularly to speak to people and staff and review records. This helped identify any further improvements required at the service.

Working in partnership with others

- The registered manager and provider had sought the support of external professionals to help ensure people were receiving the correct care and support and to help develop the service further.

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 registered manager promoted the ethos of honesty, learned from mistakes and admitted when things had gone wrong. This reflected the requirements of the duty of candour.