

Genhawk Limited

Goldcrest House

Inspection report

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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

Goldcrest House is a residential care home providing accommodation and personal care to 16 people aged 18-65 living with a learning disability or autistic spectrum disorder. At the time of our inspection there were 14 people using the service.

People are accommodated in two adapted buildings which are joined to make one service. The service is within a residential area in the town of Goole and is close to local amenities such as shops and a library. Bedrooms are for single occupancy use and have ensuite facilities.

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

People felt safe and well looked after. Sufficient cleaning took place to keep people safe from the risk of infection. Relatives said they were confident that staff provided good care in a safe way.

People had care plans and risk assessments in place for their support needs. These were reviewed regularly and covered people's health conditions. Families were able to contribute their views on their relative's care and support. The management team carried out regular checks and analysis of falls and incidents to ensure learning from events was undertaken. This meant risks to people's health and safety were reduced.

People received their medicines on time and when they needed them. Staff had positive links with healthcare professionals which promoted people's wellbeing.

Staffing levels were consistent, and staff were confident they could meet people's needs. We observed staff being patient, kind and respectful towards people. Care was person-centred and staff had time to chat with people during the day.

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.

There was a registered manager in post. They were making positive changes to the service; people, staff and relatives spoke highly of them. There was evidence of good leadership, oversight and management within the service.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the guidance the Care Quality Commission (CQC) follows to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support,

right care, right culture. Although the service is larger (in numbers) than the best practice guidance of six beds or under, the size and design of the premises does not compromise the quality of care, people's safety or their human rights. People received person-centred care which allowed their dignity and privacy to be maintained.

People could participate in their own local community. They were registered with local health services and had access to the full range of community health services. People could participate in the in-house activities and, when not in a COVID-19 lockdown, people could still take part in the same activities in their chosen community. The care model focused on people's strengths and promoting what they could do.

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 this service was good (published 11 October 2018).

Why we inspected

The inspection was prompted due to concerns received about infection control. A decision was made for us to inspect and examine those risks. We undertook a focused inspection to review the key questions of safe and well-led only. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

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 coronavirus and other infection outbreaks effectively.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Goldcrest House on our website at www.cqc.org.uk.

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.

Goldcrest House

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.

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

One inspector carried out the inspection.

Service and service type

Goldcrest House 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 the Care Quality Commission. 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

We gave a short period of notice for the inspection because of the Coronavirus pandemic. We had to arrange safe working procedures for our inspection.

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 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 met briefly with two people who used the service and spoke with three relatives about their experience of the care provided. We spoke with six members of staff including the registered manager, assistant manager, senior care workers, care workers and the activities facilitator.

We walked around the service and observed care and social interactions using infection, prevention and control and socially distanced practices.

We reviewed a range of records. This included three people's care records and three people's medication records. We looked at three staff files in relation to recruitment and staff supervision. We looked at a variety of records relating to the management of the service.

After the inspection

We continued to seek clarification from the registered manager to validate evidence taken away from the service and sent to us.

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 were trained in safeguarding and had the skills and knowledge to identify and raise concerns internally and to relevant professionals.
- The registered manager was aware of their responsibility to liaise with the local authority if safeguarding concerns were raised.
- Families were confident that the service would let them know if anything was wrong.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risk assessments provided staff with clear guidance on the support people needed.
- The management team monitored and analysed accidents, incidents and safeguarding concerns to aid learning and reduce the risk of them happening again.
- Equipment that people used was safe and maintained. Emergency plans were in place to ensure people were protected in the event of a fire.
- Staff training on health and safety had been completed.
- People and relatives were satisfied about safety in the service. One relative said, "Throughout the challenges of COVID-19 the staff have delivered the safest care possible and have supported the service users with their fears and anxieties by replacing those feelings with positivity."

Staffing and recruitment

- Staff were recruited safely, and appropriate checks were carried out to protect people from the employment of unsuitable staff.
- There were enough staff on duty to meet people's needs. We observed that the service was calm, quiet and well organised. People had key workers (specific staff) who spent time with them, supporting and encouraging them to be as independent as possible.

Using medicines safely

- Medicines were safely received, stored, administered and destroyed when they were no longer required. People were encouraged to manage their own medicines where they had those skills.

Preventing and controlling infection

- Staff had received infection prevention and control training. They followed government guidance on COVID-19 and the provider's policy and procedure to ensure people were protected from the risk of infections spreading.

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

- The registered manager was committed to providing good quality care to people who used the service. One relative said, "The staff demonstrate pride, passion and treat [Name] as an individual and go above and beyond when it comes to their needs. [Name] is respected and is part of what feels like one big family in a safe and caring environment. Each and every one of the staff are kind and [Name] has never been happier."
- Staff told us they felt listened to and that the registered manager was approachable. They understood the provider's vision for the service and told us they worked as a team to deliver high standards.

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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- The registered manager communicated all relevant incidents or concerns both internally to the provider and externally to the local authority or CQC as required by law.
- Families said the service was open, honest and transparent. A relative said, "Our family have missed [Name] during the COVID-19 pandemic, but we all look forward to our twice weekly family 'Face-times' with them. They share their many achievements and activities that they have had during the week and we are completely in awe of the support that has been offered to them."
- Regular checks were carried out by staff and the registered manager to ensure people were safe and happy with the service they received.
- Families were satisfied with the way that they were able to express their views about the service. One relative said, "The culture is inclusive and service users and relatives are always listened to. This is all down to tremendous hard work and commitment in an ever-changing situation. As a family we can't thank [Name of registered manager] and their team enough for keeping our relative safe and very happy."

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

- Systems to monitor and assess the safety and quality of the service were in place. Audits were completed and any actions were implemented and used to improve the service.
- The service had a welcoming and family orientated approach to care. Staff morale was high and the atmosphere in the service was warm, happy and supportive.
- Our observations were that it was well run and people who used the service were treated with respect and in a professional manner.

Working in partnership with others

- The service had good links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing.