

Education and Services for People with Autism Limited

East Dene Court

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

East Dene Court is a residential care home providing personal care to up to 9 people. The service provides support to people with a learning disability and/or autism. At the time of our inspection there were 8 people using the service.

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:

Some staff had supported people living at East Dene Court for a long time. They had built up positive relationships and knew people's needs well. Staff supported people to engage in activities they chose and to access the community when they wanted. 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:

Staff understood people's preferred communication methods and supported them to make daily living choices. Staff were kind towards people and treated them with dignity and respect. Relatives gave positive feedback about the care provided.

Right Culture:

The service had a positive and person-centred culture. The registered manager and staff were focused on supporting the needs of people using the service. The registered manager was committed to on-going improvement and looking at ways of improving people's lives.

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 was good (published on 12 October 2017).

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.

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

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.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

East Dene Court

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

An inspector carried out this inspection.

Service and service type

East Dene Court 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. East Dene Court 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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

Notice of inspection

This inspection was announced. We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to

speak with us.

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. 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 this information to plan our inspection.

During the inspection

We spoke with 3 people and 1 relative. We received email feedback from 2 relatives. We spoke with 5 staff; the registered manager, the deputy manager and three support workers. We reviewed a range of documents relating to the safety and management of the home. We carried out a second visit to the service at tea-time to observe people's care.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective systems to help keep people safe from abuse. Safeguarding concerns were referred to the local authority, investigated and acted on.
- Relatives and staff felt the service was safe. One relative said, "Oh, yes, [family member] is safe. I have no hesitation in recommending ESPA."
- Staff knew about the whistle blowing procedures and confirmed they were confident to raise concerns, if required. One staff member told us, "I have not used it [the whistle blowing procedure], but I would if I had to."

Assessing risk, safety monitoring and management

- The provider assessed and managed potential risks to help keep people safe.
- Staff completed training to support people sensitively when they displayed behaviours which challenge. This included strategies such as distraction. Physical restraint was not used in the service.
- Health and safety checks were completed regularly to help keep people and the premises safe. The provider had procedures to safely evacuate people in emergency situations, should this be necessary.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Staffing and recruitment

- There were enough staff on duty to meet people's needs in a timely way. This included sufficient staff to meet people's social needs. One person said, "It is quite good here. We do loads of things and have good staff."
- Some staff felt staffing levels had not always been at an appropriate level, but said this had improved. We discussed this with the registered manager, who confirmed staffing levels were monitored to check they

were appropriate.

- New staff were recruited safely.

Using medicines safely

- Medicines were managed safely. Medicines administration records confirmed the medicines people received. The registered manager regularly checked to ensure people received the correct medicines.
- Support workers were trained in how to safely administer medicines and had their competency to do so assessed.

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 followed Government guidance regarding visiting the home, there were currently no restrictions.

Learning lessons when things go wrong

- The provider had systems to enable incidents to be reviewed and identify learning. Individual incidents and accidents were investigated and acted on.
- Management reviewed incidents and accidents to check appropriate action had been taken.

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 our last inspection we rated this key question good. The rating for this key question has remained 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 provider aimed to provide person-centred care and staff were committed to providing personalised care. One relative told us, "[Family member's] key workers are excellent and one of them has been there for a long time, so there is continuity of care."
- Staff described a positive culture within the home. Some staff had supported the people living at East Dene Court for a significant time and knew their needs well. One staff member told us, "We have a good relationship with the service users. We have grown up with them, they are like family."

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

- The registered manager and staff understood their responsibilities under the duty of candour. They also understood their responsibilities in ensuring people received safe and good care.
- The provider was proactive in submitting the required statutory notifications for significant events at the home.
- Relatives and staff described the registered manager as supportive and approachable. One staff member told us, "[Registered manager] and [deputy] are fine. I am happy, I do like my job."

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

- There were opportunities for people, relatives and staff to give feedback about the service.
- The frequency of staff meetings could be improved. The most recent meeting was in February 2023, with the previous one taking place in June 2022. However, staff said they still felt able to share their views. One staff member said, "Management are approachable. I can talk to them, they try their best to improve the situation."
- The provider consulted with people, relatives and staff each year. Feedback from the last satisfaction surveys was mostly positive.

Continuous learning and improving care; Working in partnership with others

- The provider had a structured approach to quality assurance. The registered manager and senior staff completed regular checks focusing on the quality and safety of the service.
- The provider completed periodic quality assurance visits, the last one was in August 2022. We discussed

the timescale of these visits with the registered manager, they confirmed a visit had been planned for May 2023. The last visit had been effective in identifying areas for improvement.