

# Spectrum (Devon and Cornwall Autistic Community Trust)

## The Beach

### Inspection report

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### Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service responsive?

Good 

Is the service well-led?

Requires Improvement 

# Summary of findings

## Overall summary

### About the service

The Beach is a care home providing personal care for people with learning disabilities and autistic people. At the time of the inspection 11 people were living at the service. The service can support up to 15 people.

The service is a two- storey block of flats with a communal area, located on Porth beach in Newquay. The service is part of Spectrum (Devon and Cornwall Autistic Community Trust) which has several services in Cornwall providing care and support for autistic people and/or people with a learning disability.

We expect health and social care providers to guarantee autistic people and people with a learning disability with 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 CQC follows to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

This service was not able to demonstrate consistently how they were meeting the underpinning principles of Right support, right care, right culture.

### Right support:

Staff worked to support people in line with their preferences. This was sometimes difficult to achieve when staffing levels dipped below those identified as necessary to meet people's needs.

### Right care:

People received care and support that was person-centred. Records of people's care were individualised and detailed their needs and preferences. Staff were aware of people's support needs.

### Right culture:

Staff working at the Beach knew people well. They were used to supporting people to go out and have a full life. During lockdown and periods of COVID-19 pandemic outbreak in the service, they had been pro-active in supporting people to maintain their interests in-house.

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

This focused inspection did not look at all aspects of the service.

There were insufficient numbers of permanent staff to cover all shifts. The service was at times staffed below the level identified as necessary to meet people's needs for part of the day. The reduction in commissioned staffing levels affected a small number of people at the service. Due to these staffing levels for these particular people, their support was being considered in the Local Authority Safeguarding arena. Staff were recruited safely. The manager was actively recruiting more staff.

On arrival we were informed that the service was in 'outbreak' due to the COVID-19 pandemic. The

registered manager had alerted everyone that lived or worked at the service, plus relatives and relevant authorities. Staff were aware of the procedures to follow and staff were wearing correct PPE.

People were supported to be as independent as possible and have control over their lives. Staff encouraged and supported people to make decisions and choices about how they spent their time.

Staff understood their role in protecting people from harm or possible abuse. Accidents and incidents had been investigated to identify areas of learning and prevent similar incidents from being repeated.

People and their relatives were involved in decisions about people's care and were kept informed of any changes to the running of the service. Relatives and staff told us the registered manager and staff were approachable and listened when any concerns or ideas were raised.

We have found evidence that the provider needs to make improvements. 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 The Beach on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to monitor the service.

We have identified a breach in relation to staffing. Please see the action we have told the provider to take at the end of this report.

### Follow up

We will request an updated action plan for the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will 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?

The service was not always safe.  
Details are in our safe findings below.

**Requires Improvement** ●

### Is the service responsive?

The service was responsive.  
Details are in our safe findings below.

**Good** ●

### Is the service well-led?

The service was not always well-led.  
Details are in our safe findings below.

**Requires Improvement** ●

# The Beach

## 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

The inspection was completed by two inspectors.

#### Service and service type

The Beach 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 is required to have a manager registered with the Care Quality Commission and there was a registered manager in post. 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

This inspection was unannounced.

#### What we did before the inspection

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 reviewed information that we held about the service including

information shared by people, relatives and/or staff. We used all of this information to plan our inspection.

#### During the inspection

On arrival we were informed by the registered manager that the service had been classed that morning as being in 'outbreak' due to COVID-19. We therefore limited our time in the service to minimise infection risk so that people, and staff remained safe. To ensure that we minimised contact with people and staff in the service to promote their safety, we only met with the registered and deputy manager in the office. We reviewed staffing rotas and some care records. We then requested that records were forwarded to us so that we could analyse them to assist in this inspection. They were then forwarded to us.

#### After the inspection

Following the inspection, we spoke with two people's relatives via telephone and received two emails from relatives about the service people received. We received an email from a health and social care professional and spoke with another. We phoned 14 staff and spoke with seven about their work experience.

Due to the service being in outbreak we were not able to meet with people at the time of the inspection. We offered to talk with people either by using technology such as Skype or by phone. People declined to speak with us.

We reviewed a range of records. This included two people's care records. We looked at two staff files in relation to recruitment and staff supervision and a variety of records relating to the management of the service. We also completed an analysis of staffing levels within the service for the month prior to our inspection.

# 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 Requires Improvement. At this inspection this key question has remained the same. This meant some aspects of the service were not always safe and there was an increased risk that people could be harmed.

### Staffing and recruitment

- The inspection was prompted following concerns about staffing levels in several Spectrum locations including The Beach.
- The registered manager had identified that there were insufficient numbers of permanent staff to cover all shifts. In May and June four staff had left the service as well as the deputy manager, a further three staff were unavailable, which affected the staffing levels at The Beach. The registered manager confirmed there were four full time and five part time vacancies at the service.
- Up to the 5 July 2021 staff had been covering these vacancies to ensure the service was staffed to the minimum emergency staffing level, but not the level of hours commissioned as necessary to fully meet people's needs. From the 5 July 2021 the provider arranged for three agency staff to assist with staffing levels to be in line with commissioned hours of support.
- The service currently supports 11 people. The manager confirmed that to meet peoples current commissioned hours staffing should be: from 8:00 to 10:00 nine staff, from 10:00 to 17:00 fourteen staff, from 17:00 to 20:00 thirteen staff and from 20:00 nine staff. The registered manager stated that for the 11 people they are currently supporting, the minimum safe staffing level at The Beach was identified as: 8:00-10:00 nine staff (no reduction of staff), 10:00- 17:00 twelve staff (reduction of two staff), 17:00-20:00 eleven staff (reduction of two staff), 20:00 – 22:00 eight staff (reduction of one staff member). If there is a reduction of staff two people who live in the same flat share one support staff. When they are not in isolation people are also encouraged to visit the communal lounge and be supported together, which is also a usual routine for people. This meant that the commissioned hours of support were not reduced in the morning, but were reduced in emergency situations during the mid part of the day by two staff, and in the evenings by one staff member.
- In May and June 2021 records showed that there were gaps when people did not always receive their commissioned hours for either a morning or afternoon. Four people did not receive all their commissioned hours for part of the day on a number of occasions and two people did not receive their commissioned hours on one occasion each, for half a day. This meant that the reduction in commissioned staffing levels affected a small number of the people at the service. Due to these occasions when staffing levels for these particular people were less than their commissioned hours, this support is being considered in the Local Authority Safeguarding arena.
- Staff told us there were times when they were moderately short staffed and that the service had always in their view struggled to be fully staffed. Comments included "Spectrum always have a staff turnover, it's not usual to be short staffed (at The Beach)" and "Staffing isn't ideal but it's enough to manage. We swap around if an inexperienced staff member is on so that they support the person with less complex needs."

- Staff confirmed staffing had been particularly difficult in recent weeks due to staff leaving or not currently available for work. Comments included; "We aren't regularly understaffed but it happens when we have leave (holiday) or staff leave".

This is a breach of Regulation 18 (staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

- Relatives were aware that at times the service was short staffed. Relatives comments included. "My [family member] tells me if there are any issues. With the resources they have they [the staff] do an amazing job" and "At present they are in lockdown with severe limitations, during this time my [family member] requested she not be left alone or have new staff. She was heard and this has been actioned as much as possible."
- The services' recruitment practices were safe and all necessary pre employment checks had been completed to ensure prospective staff were suitable for employment in the care sector.

At our last inspection the provider had failed to follow published infection control guidance which meant not all necessary steps had been taken to prevent the spread of infection within the service. This was a breach of the requirements of Regulation 12 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made and the provider was no longer in breach of this regulation.

#### Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely. At the previous inspection staff were not always wearing correct PPE, this was addressed immediately. Staff were seen to be wearing correct PPE on this visit.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed. The registered manager was following PHE guidance. They had informed all staff, people living at The Beach, relatives and visiting professionals of the current outbreak and the infection control guidelines that they needed to follow.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

#### Systems and processes to safeguard people from the risk of abuse

- The registered manager explained how safeguarding concerns were escalated through the organisation.
- Staff were aware of the processes to follow if they suspected people were at risk of abuse. They knew how to escalate their concerns if they felt they were not being taken seriously.
- Safeguarding processes and concerns were regularly discussed with staff and they knew how to report and escalate any safeguarding concerns.
- Relatives said they were confident their family members were well cared for and safe.

Assessing risk, safety monitoring and management;



- Risks were appropriately managed, and staff were provided with guidance on the action they must take to protect both people and themselves from identified areas of increased risk.
- Some people needed support from staff to help them manage their emotions or anxiety. Care plans provided staff with information on events likely to cause people anxiety and advice on how to provide support at these times.
- The environment was well maintained. Risks associated with the environment were monitored.

#### Learning lessons when things go wrong

- Despite concerns regarding staffing levels, action had not been taken promptly to resolve the situation.
- Accidents and incidents were recorded and analysed so any trends or patterns could be highlighted.

#### Using medicines safely

- Due to the service being in outbreak from COVID-19 we were not able to review medicines fully. However we reviewed the medicines audits which demonstrated that there was close monitoring of medicine systems to ensure that people's medicines had been administered, monitored and reviewed.
- Staff told us they had received training and felt confident administering people's medicines.
- People's care plans described what medicines they took and why.
- Health and social care professionals confirmed they had been involved, as had relatives, where appropriate, in reviews of people's medicines.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- Care plans had been developed which included information about people's likes and dislikes and how they preferred to be supported.
- There was evidence people and their families were involved in care plan reviews. Relatives confirmed their views were included in people's care plans and they were invited to annual review meetings.
- Staff told us people's care plans were informative so that the person's care needs were understood by staff. Staff told us that care plans directed and guided them in how to provide support in a way that the person preferred.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager described people's communication preferences in detail. Communication care plans had been developed so staff unfamiliar with people's preferences had access to the relevant information.
- When it was important for people, they were given time and space to process information.

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 living at The Beach had varied interests and staff were accustomed to supporting them to follow their interests in the local community. When COVID-19 restrictions had limited how often people could go out, staff had been pro-active in helping to ensure people remained active and maintained their interests. For example, prior to the pandemic people had regularly attended college. However, these lessons were now occurring on-line.
- During periods of self-isolation when people had to remain at The Beach, staff were proactive in trying to engage people with interests that they liked. For example, one person was writing a book, another enjoyed watching films of their choice and one person liked to do some gardening.
- Staff knew people well and supported them to further develop their interests. For example, one person who was a keen writer was encouraged to run a six weekly creative writing course for people who were supported by Spectrum in other services.

Improving care quality in response to complaints or concerns

- There were no complaints on-going at the time of the inspection. Relatives told us if they had a query, they felt able to talk to the manager and staff and would receive an appropriate response. Relatives said they had not had reason to make a complaint but would be confident doing so if necessary.
- A relative told us their family member, had been able to approach the manager and staff when they had any concerns and felt, "She was heard and this has been actioned as much as possible." For example, when the service was in outbreak the person requested to be supported by staff they knew, not agency workers, and this was responded to.
- Easy read information on how to raise a complaint was included in service user guides. Staff told us they knew people well and would be aware if they were unhappy.

# 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 requires improvement. At this inspection this key question has remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

- Oversight of the service in respect of staffing had not been effective, as highlighted in the safe section of this report. Although senior management had been made aware of the staffing situation no action had been taken to address this promptly.
- Staff told us they found the registered manager approachable and supportive. Comments included; "Its well-run [The Beach] and she's the best manager we have had" and "She listens, she's strict but fair."
- Relatives also commented stating "[Registered manager name] is stretched overseeing a number of units. These are exceptional times and she manages well considering current issues."
- The registered manager was overseeing two services and had taken on a new role of regional manager. A new manager was being appointed to The Beach to enable the present registered manager to focus on their regional duties. Staff were apprehensive about the forthcoming change of manager to the service but recognised a specific manager just for this service was needed.
- Since the last inspection the provider had addressed non-compliance in the area of infection control processes. Staff were aware of and were wearing correct PPE throughout this inspection.
- The registered manager completed regular audits, such as, care plans, incident/accidents, medicines and observations of staff practice. These monthly reports were submitted to the area manager for review.
- The registered manager was aware of the Right Support, Right Care, Right Culture legislation.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The management were clear about their aim of providing person-centred care. They had a good oversight of the service and understood the needs of people they supported.
- Staff were positive about their role and were focused on supporting people to be as independent as possible. Staff comments included "I love working at The Beach" and "I love working here, I'm happy here".
- People were supported and encouraged to access the local community.
- The service's policies were regularly reviewed and updated to ensure they reflected best practice and the service's current procedures. People's care plans and risk assessments had been kept under review and gave staff guidance about how to provide person-centred care for people.

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 provider understood their responsibilities under the duty of candour. Families had been informed of the changes to visiting put in place to manage infection control in relation to COVID-19.
- Staff were encouraged to raise any concerns in confidence through a whistleblowing policy. Staff said they were confident any concerns would be listened to and acted on promptly by the registered manager. However, they were less confident that senior managers would respond to any concerns or queries raised.

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

- The registered manager was currently gathering people and their family's views about the service.
- Relatives were complimentary about the service and told us that the registered manager and staff communicated well with them and knew their family member well.
- Staff meetings were held which gave staff the opportunity to discuss any problems and raise suggestions.

Working in partnership with others

- Records showed the service had worked collaboratively with health professionals to ensure people's needs were recognised and any issues resolved.
- A health and social care professional was positive about the care and support people receive. One commented "I have had very good communication with [managers name]. Team members I have spoken to I have found to be proactive and know the clients well and approach their care in a holistic way."

This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 18 HSCA RA Regulations 2014 Staffing  There were not sufficient numbers of suitably qualified, competent, skilled and experienced persons deployed.