

Mr Danny So

Newhaven Care

Inspection report

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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

Say when the inspection took place and whether the inspection was announced or unannounced. Where relevant, describe any breaches of legal requirements at your last inspection, and if so whether improvements have been made to meet the relevant requirement(s).

Provide a brief overview of the service (e.g. Type of care provided, size, facilities, number of people using it, whether there is or should be a registered manager etc).

N.B. If there is or should be a registered manager include this statement to describe what a registered manager is:

'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.'

Give a summary of your findings for the service, highlighting what the service does well and drawing attention to areas where improvements could be made. Where a breach of regulation has been identified, summarise, in plain English, how the provider was not meeting the requirements of the law and state 'You can see what action we told the provider to take at the back of the full version of the report.' Please note that the summary section will be used to populate the CQC website. Providers will be asked to share this section with the people who use their service and the staff that work at there.

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?	Good •
The service remains Good.	
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.	



Newhaven Care

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 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.

The inspection took place on 06 October 2017 and was unannounced. It was carried out by an Adult Social Care inspection manager. Before the inspection we contacted Wirral Council's Quality Monitoring and Contracts department. They told us that they had no concerns about the service. We looked at all of the information that CQC had received about and from, the service since the last inspection. This included notifications about issues that had happened in the service.

During the inspection we looked at all parts of the premises. We spoke with the manager, and three other members of staff. We met with the people who lived at the home, and following the inspection we contacted two relatives by telephone. We observed staff interacting with people in the home. We looked at medication storage and records. We looked at staff rotas and supervision records. We looked at maintenance records. We looked at care records for three people who lived at the home. We also used SOFI (Short Observational Framework for Inspection) to gather the experiences of people who used the service who were unable to talk with us.



Is the service safe?

Our findings

We asked one relative if they felt that their family member was safe living at the home. They told us "Yes she is safe. She is at home there and well looked after." One person who lived in the home told us "I love it here. Everyone is very nice and I love them all."

We saw that staff had up to date training in safeguarding and knew what to do if they were concerned about the people living in the home. There had been no safeguarding concerns since our last inspection but we were satisfied from speaking with staff that they knew what to do if they had concerns. Staff were very aware of the identified risks for the individual people who lived in the home. These risks were clearly monitored closely and balanced with the need to keep people safe but also enabling people to be independent.

We saw that the service was staffed by a consistent staff team who had all worked for the provider organisation for a long time. We looked at the rotas and saw that staffing levels were maintained and the people who lived at the home always knew who would be supporting them. One new member of staff had been recruited since the last inspection and this had been done safely. We were told that it was very unusual for any other staff to work at the service as the team covered each other's holidays and absences and this maintained consistency for the people living in the home.

We looked at medicines management in the home and saw that it was good. The medicines were audited regularly.

We saw that the home was clean and well maintained. We checked the premises safety certificates and saw that they were up to date. The people who lived in the home helped to keep the home clean and tidy. We saw people being involved in household tasks and enjoying them during our inspection. We saw that parts of the premises had been refurbished and other parts looked more tired. The manager told us that there was a programme of refurbishment that was on-going and the provider was very committed to maintaining the standards in the building.



Is the service effective?

Our findings

One person who lived in the home told us that the food was very good. They said "We have spaghetti and meatballs and fish and white sauce and all the things I like really." We spoke with one relative who told us "She is never alone and she is with friends and people who love her so I can be peaceful about her being there."

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 spoke with the registered manager and found that they had a clear understanding of the MCA and DoLS. We saw that they considered people's choices at all times. We saw that DoLS applications had been made for people living in the home for whom it was demeaned necessary in order to protect their human rights.

The staff were trained regularly and the manager showed us records to support this. Staff had training in all of the required areas and in additional areas to meet the needs of the people whom they supported. Staff had regular supervision from the manager and performance was monitored. The staff member we spoke with told us that they had lots of training. We looked at the records and saw that they had all expected training and additional training in areas such as; understanding autism, common health conditions and principles of learning disabilities.

We saw that the people chose what they wanted to eat, did the food shopping with the staff and were involved in cooking the food supported by the staff if they wanted to do so.

People had regular access to health care and their care files showed that people's health was monitored closely. We were made aware of one person who staff had been concerned about as they were underweight. The person had been monitored very closely and was now much happier and healthier.

The home was on a pleasant street in a small neighbourhood. We saw that people's bedrooms had been personalised with items of their choice. One person showed us their bedroom and was very proud of their curtains and bedding which displayed their local football team. We were told that the people who lived in the home enjoyed using the garden supported by staff when the weather was fine. There was garden furniture for people to sit on and games that could be played in the garden if people wanted to.



Is the service caring?

Our findings

A relative told us that they thought that the staff were very caring. They said "I take her case sometimes and go and visit them all. They are like our family." One person who lived in the home told us "The staff care about me and love me and I love them."

We observed the staff interacting with the people who lived in the home and it was obvious that the staff knew them well and how it was best to support them. Staff were very reassuring to people who may have been anxious and knew them well and were able to support them in an unobtrusive way. One person became a bit upset and we had seen from their care plan that this person had been having a difficult time. The staff member very discreetly and gently provided support and comfort to the person and they soon calmed down.

We saw that staff were mindful and supportive of people. During the inspection we sat in the communal areas of the home and saw that the staff regularly interacted with everyone and that these interactions were not just about care tasks but general chatter amongst people who knew each other well.

We saw that people's confidentiality was maintained in the home. Records were locked away in the office. Staff were careful that none of the people could access information about the other people in the home.

We saw that the care and support provided was person centred and led by the person receiving the care. Staff were very mindful that there were working in the people's home but it was obvious that staff felt very relaxed and clearly knew their roles and responsibilities.



Is the service responsive?

Our findings

A relative we spoke with said "I have no complaints. There has never been any need to complain. We just chat and sort out any issues before they are problems." Another relative told us "I have no complaints but I wish there was more funding for activities. They used to go horse riding but can't now because they do not have enough money."

Individual care files were in place for the people living at the home and we looked at three of these in detail. Care files contained clear assessments, guidance and information about the person and how to support them effectively. This included the support people needed to manage their health and personal care, medication and day to day lives. There was clear person centred information that had regularly been updated. The records showed how the person wished to be cared for and what was important for staff to know about them. The registered manager told us that they maintained the files so that new staff could read them and know important things about the person even though this was rarely required as there was a consistent staff team who knew people well.

We saw that the people led busy, varied lives. We saw that staff were responsive to people's needs and recognised when these changed and how to act accordingly. We were made aware of a recent situation when a person's day support had changed suddenly. The manager had fought for the rights of the person to be upheld and then enabled a positive transition to a much better alternative and now the person was very happy with the outcome.

We saw that communication between the different services that people accessed and the home was very good. This was managed carefully to maintain people's safety but also their right to confidentiality.



Is the service well-led?

Our findings

A relative told us "The manager does an excellent job. She runs a tight ship."

We looked at some questionnaires that had been completed by relatives of people living at the home. Comments included "We feel incredibly lucky to have this wonderful service on our doorstep." and "We have only had a very positive experience at Newhaven Care."

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 service had a registered manager who had been in post for over 25 years. The service was also supported by a consistent staff team. During the inspection we spoke with three staff members who had worked at the service for 22 years, 17 years and 14 years respectively.

We looked at the arrangements in place for quality assurance and governance. Quality assurance processes are systems that help providers assess the safety and quality of their services, ensuring they provide people with a good service and meet appropriate quality standards and legal obligations. We reviewed several audits and checks and these included checks on health and safety, staff records, care records and medicines. We saw that these checks were carried out regularly and thoroughly and that any action that had been identified was followed through and completed.

There was a positive person centred culture apparent in the home and obvious respect between the manager, staff and people who lived in the home. The manager told us that the provider was also very involved in the running of the home and was very receptive when requests were made.

We spoke with some colleagues from Wirral Council following the inspection and they told us that the home had an excellent track record for supporting people and that placements had all been successful and none had ever broken down at the home as they were committed to giving people the right support to meet their needs.