

Orwell Housing Association Limited

Beaumont House

Inspection report

Beaumont House,
Arthur Ransome Way
Walton On The Naze
CO14 8FA

Tel: 01255440564

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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?	Outstanding ☆
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

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.

About the service

Beaumont House is an Extra Care service providing personal care to 55 people at the time of the inspection.

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

Right Support: The model of care and setting enabled people to exercise choice, control and independence in their own lives. Despite people living within their own self-contained apartments, the service proactively fostered community and companionship, both for neighbours within Beaumont House, and within the local area more widely. This included through links to support groups, advocacy, charities, and local amenities.

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: Care is extremely person-centred and promotes people's dignity, privacy and human rights, which is at the heart of the service provided. Highly motivated staff were exceptionally compassionate, caring and kind, regularly taking proactive steps to enrich people's lives and build genuine and trusting relationships founded on empathy. The service anticipates people's needs and recognises distress and discomfort at the earliest stage, offering sensitive and respectful support and care. All staff positively welcome the involvement of advocates and encourage people to explore their care and support options for additional help and advice. Professionals who work with the service describe staff who exceed expectations in supporting good outcomes for people. Awareness of equality and diversity is valued and promotion of this is embedded into the service. As a result, people and staff feel respected, listened to, and influential, with their input and investment leading to innovative practice.

Right Culture: The ethos, values, attitudes and behaviours of leaders and care staff ensured people could lead confident, inclusive and empowered lives. The registered manager described "breaking down barriers", and proactively worked to create a positive, open culture. This included in relation to protected characteristics.

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 February 2020.

Why we inspected

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

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Outstanding ☆

The service was exceptionally caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Beaumont 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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by 1 inspector and 1 Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service. The service provides support to people with physical disabilities, sensory impairments, mental health needs, dementia, and autistic people and people with a learning disability.

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 unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 7 people and 3 people's relatives to gain their feedback on the care and support provided. We observed staff support in shared areas of the building. We received feedback from 2 visiting professionals who work with the service. We spoke with 8 members of staff and reviewed written feedback from 4 others. This included care workers, shift leaders, team leaders, the administrator, the registered manager, and the operations manager. We reviewed 4 people's care plans, 2 staff recruitment files, and a range of records relating to governance of the service, including audits, policies and procedures.

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.

Staffing and recruitment

- The service had enough staff, and the numbers and skills of staff matched the needs of people using the service.
- Staff were recruited safely, including referencing and Disclosure and Barring (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People expressed their preference for regular staff members rather than agency staff. One person said, "A few more permanent contacted staff are needed; Agency staff can step in, but they are not so understanding around protocols and can be hit and miss."
- The registered manager told us there had been a recent successful recruitment drive, reducing the need for agency staff going forwards.

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well. Staff knew people's needs and had access to guidance on how to support them safely. One staff member said, "Every customer has a care plan that tells me what support they need. Any changes to a customer's care plan we are notified, and I do get time to read the changes before supporting the individual."
- Since the last inspection, a new provider had taken over the running of Beaumont House. The new provider was in the process of moving all care plans and risk assessments to an electronic system. Whilst the older paper-based records lacked some detail, this had already been identified and improvements planned or made.
- In the newly introduced electronic care plans, nationally recognised tools were being used to assess and mitigate risks to people's health and wellbeing. This included risks in areas such as nutrition, skin integrity, home environment, and fire safety.

Using medicines safely

- Medicines were given safely and as prescribed. Staff received training and competency assessments to ensure safe practice.
- People received support from staff to make their own decisions about medicines wherever possible, with a focus on consent and independence. One person's relative said, "[My person] can do their own medication but the staff will check with [my person] as they can get confused."

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so. One person said, "I feel very safe where I am."
- Staff had training on how to recognise and report abuse and they knew how to apply it. Policies and procedures were in place for safeguarding and whistleblowing for staff to access.
- People told us they felt safe. One person told us, "Yes, I feel very safe and comfortable with the care workers, they always treat me with dignity and respect, there's never any sign of any form of abuse."

Preventing and controlling infection

- The service used effective infection, prevention and control measures to keep people safe, and staff supported people to follow them.
- Staff were provided with personal protective equipment (PPE). One person told us, "Staff wear masks and gloves, wash their hands and take the PPE away with them."

Learning lessons when things go wrong

- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately and managers investigated incidents and shared lessons learned.

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.

At our last inspection we rated this key question good. The rating for this key question has remained 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

- Staff completed a comprehensive assessment of each person's care and support needs prior to admission to the service. Assessments were carried out by the registered manager to make sure the service could meet people's needs, and to check they would be a good fit for the community of people already living at Beaumont House.
- People told us they were satisfied their assessed needs were being met. One person said, "I get the care and time that was agreed by my social worker."

Staff support: induction, training, skills and experience

- People were supported by staff who had received relevant and good quality training, including on how to support autistic people and or people with a learning disability. Updated training and refresher courses helped staff continuously apply best practice.
- The service checked staff competency to ensure they understood and applied training and best practice. Staff also received support in the form of continual supervision and recognition of good practice. A 'buddy system' was also in place.
- One staff member told us, "When I had my interview at Beaumont House, I was informed that we are all one team, and we can call on anybody for help if we are in need of help. I never feel I can't ask, as its always made clear I can."

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

- People received support to eat and drink enough to maintain a balanced diet.
- Care staff independently identified some people were occasionally running out of food and acted to create a Beaumont House community foodbank in response.
- One staff member told us, "I feel proud as in one of our team meetings we were worried that some customers ran out of food, so it was hard to make breakfast, lunch or dinner to prepare a meal. We discussed this in the meeting to find a way to ensure everyone would be able to have a meal when occasionally things go wrong. Myself and another member of staff came up with an in-house foodbank. In there we have non-perishable foods, cereals, long life milk, toiletries, cleaning solutions, everything that will assist our customer for a few days until their next shopping trip."

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

- People were referred to health care professionals to support their wellbeing and help them to live healthy lives.

- One person's relative told us, "[My person] uses a walking frame and has had a fall out of the chair, staff handled it well and [person] did not need to go to hospital, a district nurse visited instead." Another person said, "Staff have accompanied me to appointments like COVID-19 jabs and to the GP."
- Multi-disciplinary team professionals were involved in and made aware of support plans to improve people's care. The registered manager told us, "We need to tap into all the services and make sure everyone has the right support for their diverse needs."

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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- Staff empowered people to make their own decisions about their care and support. One person told us, "We are treated as equals."
- Staff received training in the MCA and could describe how to apply this in practice. One staff member said, "Every adult, whatever their disability, has the right to make their own decisions. Wherever possible, staff should always support a person to make their [own] decisions if they can."

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.

At our last inspection we rated this key question good. At this inspection the rating has changed to outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- People felt listened to and valued by staff. There was an extremely positive and open culture with managers leading by example, proactively seeking out people's views and acting on them. One person said, "[Registered manager] is very much approachable, lovely, warm and calm to speak to, and very understanding."
- The service was exceptional at helping people to express their views so that staff and managers at all levels understand their views, preferences, wishes and choices. People, and those important to them, worked with managers and staff to develop and improve the service as valued partners. For example, one person living at Beaumont House ran a workshop for other people and staff to raise awareness of living well with visual impairment, including their work as a professional artist.
- Staff regularly operated with flexibility to meet people's needs and preferences. If people needed medication but did not wish to get up for the day at that time, their decision was respected. The registered manager told us, "One person does not like morning calls so [care workers] split the call, they pop in to do medicines at 7am and then would come back. Another person is the same, as they don't like to get up until 10am to have their bacon roll and their shower."
- Staff found innovative and creative ways to communicate with each person using the service and tailored their approach according to people's emotions. People were given time to listen, process information and respond to staff and other professionals. Staff took the time to understand people's individual communication styles and responded to them, for example, ensuring additional processing time when talking with an autistic person and being aware of signs the person might be anxious or upset. This also promoted understanding and connection more widely, and meant people of different backgrounds, including autistic people, people with a learning disability, people with physical disabilities, sensory impairments, or underlying health conditions were able to come together and form their own inclusive support and advocacy network as neighbours.
- Staff told us how they often spent additional time with people to support their wellbeing, particularly if they had increasing support needs or feelings of loneliness or distress. One staff member said, "As soon as we get a bit of down time we go round and see [person] and go out for walks."
- A visiting professional described collaborative working to support a person who had previously had a poor experience of receiving care at a different service, and how staff worked to sensitively build their trust and confidence. The professional told us, "The team at Beaumont House ensured [person] was checked on regularly and worked to build a rapport."

Ensuring people are well treated and supported; respecting equality and diversity

- Staff were calm, focussed and attentive to people's emotions and support needs such as sensory sensitivities, ensuring people were protected from exposure to any environmental factors they would find stressful. The registered manager told us, "I'm very proud of our care team; they go beyond the duty of care, and they are always looking for other things to do to meet the needs of people. They are givers, and that culture is really hard to find with people. To have that passion and empathy, you can't buy it."
- People felt valued by staff who showed genuine interest in their well-being and quality of life. One person told us, "I am very lucky, [the care workers] are a good crowd, they help me with my breakfast and anything I am not able to manage due to my breathing difficulties, like putting on my socks and shoes."
- Equality and diversity topics were part of the standing agenda for meetings with staff and also for people living at Beaumont House, including LGBT+ history. This meant people felt able to express themselves more freely. The registered manager told us, "We are constantly inputting people's views to create one culture, one team; an ethos of 'we care'."
- We received extremely positive feedback from professionals who worked with the service, without exception. One visiting professional told us, "Staff always go the extra mile to ensure the customers' needs are paramount. Staff are always courteous, professional, and more importantly very non-judgmental and empathetic to the customers. I have worked closely with the registered manager to ensure there are good outcomes for our customers. The feedback I get from my customers who reside at Beaumont House is always positive, customers are always telling me it is the best thing they have done, how safe they feel, how wonderful their caring staff are."

Respecting and promoting people's privacy, dignity and independence

- People had the opportunity to try new experiences, develop new skills and gain independence, with built in support mechanisms. For example, one person who could become anxious when alone outside of their home had a card with the direct contact details of the registered manager.
- Staff provided people with extremely personalised, proactive and co-ordinated support. One visiting professional told us, "I have found they do not just look at the person's basic needs, but also look at the wider picture inclusive of social needs and how that can be facilitated either by external links or through direct support." This included links with sources of advocacy and support in areas such as finances, mental health and isolation, and substance dependency. People could also choose to receive dual support from both Beaumont House staff and others, such as specialist autism charities.
- People's independence was supported through the clear sense of community created by staff, an exceptional achievement in extra care housing where people live in self-contained flats. This included ensuring regular meetings for people to share their views, as well as volunteering to create social spaces such as bingo sessions, fish and chip suppers, coffee mornings and fetes, where people could run their own stalls. The service also operated an on-site library service, as well as delivering large print quiz sheets for people in their own homes. One person said, "I am very empowered to live as independently as possible, I write and paint." Another person said, "I get on well with all the staff, they are friendly and do treat me with respect, we enjoy a bit of banter, and they encourage me to stay as independent as possible."
- A visiting professional gave a specific example of a person who had been at risk of self-neglect before moving to Beaumont House. Support from staff had led to significant improvements in the person's wellbeing and quality of life, including the ability to mobilise independently. The professional told us, "I hardly recognise that same [person] now, they are always well presented, they are engaging" and how this was a "total transformation".
- Staff routinely sought paid or voluntary work, leisure activities and widening of social circles, both through discussion with people as individuals and at regular Beaumont House meetings. This including reciprocally connecting with others in the area through open days and coffee mornings, including nearby schools, a nursery, the police, social work teams, and local businesses. Some people living at Beaumont House volunteered their time to tend the shared gardens, with seeds and flowers donated from nearby shops. The

registered manager told us, "What goes into the community comes back into the community" and, "We are a part of giving into the local community, and they give back."

Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained 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

- Staff spoke knowledgeably about tailoring the level of support to individual's needs, at all levels. One staff member told us, "I have got to know everyone, so I can tailor my approach if someone is more of an anxious soul."
- Regular reviews were held with people and action taken to improve the service as a result of their feedback. For example, one person commented agency staff were not as confident in catheter care as permanent staff, so the management team immediately requested further training in this area.

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.

- Staff ensured people had access to information in formats they could understand. Information on people's individual communication needs were recorded in their care plans for staff to follow.

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

- Staff enabled people to broaden their horizons and develop new interests and friends. Staff volunteered their own time to run a popular bingo sessions and quiz nights, with prizes which promoted health and hydration such as fresh fruit platters. One person said, "I join in the bingo, everyone enjoys it, and the care worker does it in their own time."
- Staff empowered people to be active citizens and have equal rights in their local and wider community. One person's relative said, "[Beaumont House] puts on events for the Coronation, Easter, Christmas etc. and a summer garden event is being planned, they are asking for ideas."
- Staff knew when people needed their space and privacy and respected people's preferences. One person's relative said, "The fact that Beaumont House is accepting younger people is wonderful, [person] has thrived with the activities." Another person said, "We don't participate in any activities, our choice, we like to keep ourselves to ourselves, we are happy with this and love our apartment."

Improving care quality in response to complaints or concerns

- The service treated all concerns and complaints seriously, investigated them and learned lessons from the

results, sharing the learning with the whole team and the wider service.

- Records showed complaints were acted on effectively, and people received a written apology when things went wrong. The service had also received a number of compliments.
- One person told us, "No, I have never had to complain, I have telephone numbers I can ring if I have a problem. No complaints at all, no negative comments."

End of life care and support

- People were supported to have a comfortable and dignified death in their own home. The registered manager told us, "We don't want people to have to go into residential care. This is a home for life, and at the end of their life, we take care of them."

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 requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted 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

- The registered manager had the skills, knowledge and experience to perform their role and a clear understanding of people's needs and oversight of the service they managed. Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support. One person's relative said, "[Registered manager] is very approachable and friendly, she has a good balance of staff and runs Beaumont House well."
- Whilst senior staff understood and demonstrated compliance with regulatory and legislative requirements, we identified some notifications to the CQC had not been made 'without delay'. The registered manager completed these notifications straight away during the inspection.
- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible. Coaching skills were used to foster learning within the staff team and to instil the values of the organisation.
- Reflective practice was routinely used by the service to create a culture of learning and continuous improvement. This was modelled by the registered manager, who had written a reflective report on the impact of the COVID-19 pandemic on people living with dementia.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes 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 provider sought feedback from people and those important to them and used the feedback to develop the service. One person told us, "I email [registered manager] and she replies immediately, she will always visit and takes care of any problem, she is a good egg." Another person said, "[Registered manager] is a diamond!"
- Staff had the opportunity to share their views in regular team meetings, promoting a positive and open culture.

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

- The management team were visible in the service and also supported the staff team where required to provide care to people. This included during the pandemic, where the registered manager ensured they were the first staff member to provide care to people with COVID-19, to reassure staff and promote teamwork.

- One staff member said, "I can honestly say this is the best place I have ever worked, from the customers, the staff and management team." Another staff member said, "I truly feel supported by the management team, they are always ready to listen and to help out when we are short staffed."

Working in partnership with others

- The service worked well in partnership with other health and social care organisations, which helped to give people using the service a voice and improve their wellbeing.