

## Catholic Care (Diocese of Leeds)

# Eller Beck Court

### Inspection report

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Date of inspection visit:  
31 January 2023

Date of publication:  
22 March 2023

### 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

### About the service

Ellerbeck Court is an extra care setting which provides personal care to people living in their own flats on one site that also has communal areas. Not everyone who lives at Ellerbeck Court received personal care. Care Quality Commission CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of the inspection 56 people were living in the flats, the service was supporting 25 people and all 25 were receiving personal care.

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

We received positive feedback from people who told us they were happy with the support they received at Ellerbeck Court. People received person-centred care and staff knew people well. People had care plans in place to reflect their preferences and needs and risk assessments to minimise risks. People told us staff were respectful and kind.

Peoples health and well-being needs were supported from the staff team who, with the registered manager worked in partnership with other healthcare professionals. There were systems in place for communicating with people, their relatives and staff to ensure they were fully involved.

Medicines were managed well, safely administered and recorded accurately. Individualised risk assessments were in place. Staff were confident they would raise concerns to safeguard people. Robust recruitment and selection procedures ensured suitable staff were employed.

Staff completed a range of training to meet people's needs including infection prevention control related training. Additional competency checks and spot checks were carried out by the registered manager to check the staffs' care practice.

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.

### Rating at last inspection

This service was registered with CQC on 21 October 2021 and this is the first inspection.

### Why we inspected

This was a planned first rating inspection. We looked at infection prevention and control measures under the Safe key question. We look at this in all 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.

## 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 the safe findings below.

### Is the service effective?

Good ●

The service was effective.

Details are in the effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in the caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in the responsive findings below.

### Is the service well-led?

Good ●

The service was well led.

Details are in the well led findings below.

# Eller Beck 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 Care Act 2014.

#### Inspection team

The inspection was carried out by 1 inspector and an 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 personal care 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 bought or 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 service.

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

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals 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.

During the inspection. We spoke with 3 people who used the service, 8 relatives, the registered manager, and 2 support staff.

We reviewed a range of records. These included 3 people's care records, a variety of records relating to the management of the service, including audits and procedures.

After the inspection

We continued to seek clarification from the provider to corroborate evidence found. We looked at audits, care plans, reports and policies.

# Is the service safe?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good.

### Assessing risk, safety monitoring and management

- People told us they felt safe, one person told us, "It's a safe place if I fall I can get help straight away, I have a pendant on me and a watch that detects if I have fallen and alerts the staff."
- People had both general and personalised risk assessments which were regularly reviewed. Where risks were identified, care plans showed ways in which staff could reduce these risks.
- Fire safety practices were in place along with regular checks to equipment used by staff.

### Using medicines safely

- Medicine administration records were clear and completed fully.
- People received their medicines as prescribed, at the right time.
- People were also supported to manage their own medicines safely where appropriate.

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

- Staff had received safeguarding training and were able to appropriately raise any concerns.
- No safeguarding concerns had been raised however; procedures were in place for staff to follow in the event of any suspected abuse.

### Staffing and recruitment

- There were enough staff to meet people's individual needs and maintain their safety.
- Staff were recruited safely, using robust checking methods to ensure only suitable people were employed.

### Learning lessons when things go wrong

- The registered manager ensured that procedures were in place to record, analyse and take appropriate action regarding any accidents and incidents.

### Preventing and controlling infection

- People were protected from the risk of infection
- People were supported by staff who were trained to use PPE appropriately and safely.
- The provider was making sure infection outbreaks could be effectively prevented or managed by following the current government guidance.

# 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.

This is the first inspection for this newly registered service. This key question has been rated Good.

Staff support: induction, training, skills and experience

- People were supported by staff who were trained to meet their needs.

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

- The staff were aware of people's dietary needs and supported people appropriately. Care plans were in place to give guidance. One person told us, "The staff help me to make my own breakfast or I can order eggs from downstairs, it sets me up for the day."

Staff working with other agencies to provide consistent, effective, timely care

- The service worked in partnership with external professionals, such as community nurses, and GPs to support and maintain people's long-term health.
- People had personalised care plans covering their healthcare needs. These shared important information with healthcare professionals. One relative told us, "Our relative has quite complex care needs, they have mental health problems. There's no issues, they are all lovely with her."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Any changes to people's needs were reviewed with them and their relatives and this was reflected in their care plans.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act 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 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People who used the service had a court of protection application in place where relevant. There was information and training for staff in this area and where people gave consent to receive personal care, this

was recorded.



# 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.

This is the first inspection for this newly registered service. This key question has been rated Good.

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

- Staff were trained in dignity and respect. Staff always treated people with kindness and respect. One relative told us, "There was a gentleman carer and they asked my relative if she minded and she said she was not having a man to wash her, so they respected that."

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

- People were supported to share their views on the service via a questionnaire and regular phone calls.
- People were supported to have their say and had access to independent advocates where required to promote their rights.
- Staff spent time listening and talking to people. Relatives told us, "They are very caring they are so lovely with her." And "They are all nice friendly."

Respecting and promoting people's privacy, dignity and independence

- People were supported to maintain their independence while promoting dignity and privacy. One person told us, "I can manage to do some things myself for example I can wash some of myself and I want to do it. The staff help me with the rest that I can't do."
- Staff engaged with people in a dignified way, this was reflected throughout the comments we received about the staff. One person told us, "Yes the staff all treat me with dignity and respect and there is more of a friendly chat when they call in also and they make sure every time can they call me by my first name and that is fine."

# Is the service responsive?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Good

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Support plans were in place for people who used the service. These covered what support was required to meet people's needs, they were personalised and reviewed regularly. One person told us, "I like it here and the care staff are good. I have asked to get the same ones. That now happens and I have a new plan."
- The support people received was individual to their needs and was delivered in a person-centred way.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities socially and culturally relevant to them

- The service provided social activities in the communal areas of the building and were respectful of people's social and cultural needs.

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.

- Communication needs were met individually and where appropriate information could be adapted to suit people's preferences and needs.

Improving care quality in response to complaints or concerns.

- A complaints procedure was in place that was followed by the registered manager and staff.
- People were supported to raise any issues. Where issues had been raised these were addressed and with appropriate follow up where required.

# 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.

This is the first inspection for this newly registered service. This key question has been rated Good.

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

- The registered manager encouraged people and staff to be open with each other and created a culture of acceptance.
- The culture at Ellerbeck Court was a family ethos and to provide person centred support.

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

- The provider had contingency plans for people to ensure minimal disruption to care in case of an emergency, and in response to the COVID-19 pandemic.
- Policies, procedures and audits were current and in line with best practice.
- The provider knew when to send notifications to us relating to significant events occurring within the service.

Continuous learning and improving care

- People who used the service interacted positively with the registered manager and told us how approachable they were.
- The registered manager took on board opinions and views of the people who used the service and their relatives to make improvements.
- Staff said they felt supported by the registered manager.

Working in partnership with others

- People were supported by a range of healthcare professionals and the registered manager and staff had forged good working relationships.

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

- There was clear leadership and regular audits were carried out by the registered manager to understand the quality and safety of the service.
- Policies and procedures were current and in line with best practice.
- The registered manager was open regarding their transparency in dealing with incidents and complaints and taking responsibility for actions.

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

characteristics

- The registered manager held meetings for the staff team to discuss relevant information.
- Staff could approach the registered manager for support at any time. One staff member told us, "Any issues if you raise them the manager is onto it straight away."