

The Guinness Partnership Limited

Guinness Care Douro Court

Inspection report

Douro Court
Brook Road
Ivybridge
Devon
PL21 0LS

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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

About the service

Guinness Care Douro Court (hereafter called Douro Court) is 'extra care' housing. People using the service lived in their own flats in a purpose-built building. CQC does not regulate the premises used for extra care housing; this inspection looked at people's personal care service. The service provided personal care to 22 people at the time of the inspection.

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

People told us they felt safe and staff understood what to do if they thought someone was at risk of harm or abuse. Safe recruitment processes were in place and staff received induction training and followed a programme of continuous learning as well as regular competency checks to ensure people received safe effective care. There were sufficient numbers of staff to meet people's needs. Infection prevention and control routines were in place to reduced people's risk of infection. Medicines were managed safely.

People's care and support was planned in partnership with them and risk assessments updated accordingly. Feedback from people and their relatives was complementary about the staff.

Systems were in place to monitor the quality and safety of the service. People were provided with the opportunity to feedback on the quality of the service they received, and any suggestions were used to make improvements.

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

Since the last inspection, the provider had changed their legal entity. The last rating for the service under their previous legal entity was good, published (22/12/2017).

Why we inspected

We carried out this inspection to provide a rating for this provider under their new legal entity.

This is the first inspection of this provider under their new legal entity.

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?

Good ●

The service was 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.

Guinness Care Douro 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

This inspection was carried out by one inspector, an assistant inspector and two Expert by Experiences who made telephone calls. 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.

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 not a registered manager in post.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or manager would be in the office to support the inspection.

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 and professionals who work with the service. We used all this information to plan our inspection.

During the inspection

We spoke with 11 people who used the service and 3 relatives about their experience of the care provided. We spoke with 9 members of staff which included care staff, the care coordinator, head of extra care, director of care and the head of quality assurance and service improvement. We reviewed a range of records, this included 4 people's care records and Medication Administration Records (MAR). We looked at 4 staff files in relation to recruitment and staff supervision. A variety of records relating to the management and quality of the service, including policies and procedures.

After the inspection

We requested additional information and continued to seek clarification from the provider to validate the evidence we found.

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

- People told us they felt safe. Comments included, "I'm very happy with my care. It's safe because the place is secure and there is always somebody about." "I feel safe here because I have my own little flat, but if I need anything, I press my cord and [staff] come."
- People were protected from the risk of potential abuse and avoidable harm by staff who had received training and recognised the different types of abuse. One member of staff said, "I would definitely report it [abuse]. The information about who to go to is around the service for staff but if needed we would get the police as well."
- Safeguarding concerns were appropriately reported to the local authority safeguarding team and the manager worked with them to ensure any issues were appropriately addressed.

Assessing risk, safety monitoring and management

- Risks to people's safety and well-being were assessed reviewed and managed. People's care records included actions for staff to take to keep people safe and reduce the risk of harm. For example, in relation to moving and handling or dietary needs.
- Staff understood people's individual risks. Such as, using the correct mobility equipment.
- People used an electronic system which enabled them to contact staff by pressing a button on a pendant to get help in an emergency. Staff answered the calls and responded immediately.
- People had Personal Emergency Evacuation Plans (PEEPS) in place. These were reflective of people's individual needs and detailed the level of support required to evacuate the premises safely in the event of an emergency.
- Processes were in place to report any environmental concerns to the landlord.

Staffing and recruitment

- People told us there were enough staff to support them. People explained care staff came at the times they were expected, and they had not experienced calls being missed.
- However, some people remarked at times staff appeared very busy. Comments included, "Sometimes I feel the staff are under pressure, but they still make time for you." "Staff can be stretched if anyone is off ill or on annual leave."
- At times the service used agency staff to maintain safe staffing levels. Processes were in place to ensure both permanent and agency staff had the knowledge and skills to meet people's needs.
- Processes were in place to recruit staff safely. Appropriate checks were carried out to assess an applicant's suitability for employment, this included Disclosure and Barring Service (DBS) checks. These provide information including details about convictions and cautions held on the Police National Computer. The

information helps employers make safer recruitment decisions.

Using medicines safely

- Medicines were generally managed by people or their relatives and directly delivered from the pharmacy to their flat. Some people managed their own medicines but where people needed additional support processes were in place for staff to administer medicines to ensure people received them as prescribed.
- Staff were trained in medicine management and had their competencies checked to ensure safe practice was in place.
- Guidance was in place in people's care records which detailed the support people required with their medicines along with protocols for medicines that were to be given when needed (PRN). This also included body charts to show where topical creams needed to be applied.

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.

Learning lessons when things go wrong

- Accidents and incidents were recorded, monitored and analysed to reduce the risk of reoccurrence. Any lessons learnt were shared with staff so that any learning could be shared for example, in relation to medicine recording.

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

- People were involved in the assessment of their needs prior to moving into Douro Court. Care records showed comprehensive assessments had been carried out on all aspects of a person's care and support needs to ensure the service was able to meet those needs.
- The assessment process considered people's protected characteristics as part of the Equalities Act 2010 for example, age, religion and disability.
- People were involved in regular reviews to make sure their care records reflected their current care needs.

Staff support: induction, training, skills and experience

- People told us they thought staff had the knowledge and skills to meet their needs. One person commented, "[Staff] all seem very well trained to me. Let's put it this way. I wouldn't swap any of my carers. They are like family."
- Staff explained they completed a structured induction programme which included training and opportunities to work alongside more experienced members of staff.
- Staff were positive about the training and opportunities they had to develop their knowledge and they confirmed they felt they had the skills to complete their role effectively. One member of staff said, "The training is good, and we recently had manual handling, working with people with autism and also infection prevention and control. If you want to upgrade your level, they offer you NVQ."
- Staff received supervision and had competency assessments regularly. One member of staff said, "We have observations all the time, we also have a practical day that will include a medication refresher."
- The provider also offered a variety of other training and development programmes to enhance staff's skills and knowledge. Such as, race fluency training, themed webinars, management training modules and courses which offered additional qualifications.

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

- People were supported with their hydration and nutritional needs when this was a part of the care and support agreed. People told us staff offered them choices about what they would like to eat and drink. This included choosing if they wished to eat lunch at the onsite restaurant or in their flat.
- Staff were aware of people's individual dietary needs and for those who required specialist diets staff supported them appropriately.

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

- People were supported to access when required a range of health care professionals such as GPs and

dentists. One person said, "The carers tell me if they think I need to see one and I get onto the doctor. They (staff) are very conscientious."

- Staff worked in partnership with health and social care organisations where appropriate, sharing information about people to ensure that the care and support provided was effective and in their best interests.

Adapting service, design, decoration to meet people's needs

- People lived in their own flats within Douro Court. However, they had access to lounges, communal areas and treatment rooms which provided an opportunity for people to meet up or take part in different activities.

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.

- People living at Douro Court had capacity to make their own decisions. One person said, "[Staff] ask for permission and will tell me if they are going to turn me over. Usually I tell them what I need, and they do that."
- Records showed people were involved in making decisions about the care and support they received.

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. The rating for this key question has remained good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People were complementary about the care and support they received and said they valued the bonds they had developed with the staff. Comments included, "I like that they will always give me a hug." "The care staff are kind, and always chat to you." "The care is perfect, and all staff are kind and caring to me." And, "Staff are very chatty, and we have a laugh."
- Staff knew people well and understood what was important to them. Staff we spoke with knew people's life histories and people's individual likes and dislikes. For example, people's spiritual needs and individuality were respected and known to staff. One person commented, "The carers ask how my family is. I can share my worries with them. They know that prayer is important to me."

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

- The provider kept in regular contact with people and their relatives to request feedback or to involve them in reviews about their care or support needs. One person said, "They always put my views down and read them back to me. I have a green folder with all the information in it."
- Feedback was sought regularly from people and their relatives about their experience of the care and support they received. Feedback was generally positive, where issues had been raised these had been dealt with satisfactorily.

Respecting and promoting people's privacy, dignity and independence

- People gave examples of how staff maintained their privacy and dignity when providing care and support. One person said, "Staff leave things within my reach. I'm spoken to with respect. [Staff] close the door when I use the toilet or if I get a wash."
- Staff supported people to be as independent as possible with decisions about their care and support needs. For example, staff promoted people's rights to manage their own medicines and personal care, where they were able to do this. One person said, "Here I can be independent but if I need help staff will always give it."
- Staff explained how they had encouraged a person to increase their independence and mobility by rebuilding their confidence. This resulted in the person progressing from being hoisted to using a stand aid. As a result, their well-being improved.

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

- People told us they had been involved in the development and review of their care plans. One person told us, "I have had a care review recently with the managers. I got a written copy back in case I wanted to change anything."
- Care records were personalised and contained information for staff to refer to about how best to support people with their personal care, medicines, eating and drinking as well as providing information about a persons' life. One person commented, "[Staff] know me and my background and it's something we can talk about."
- Staff knew people well and were able to give details around how individuals liked their care to be delivered. Staff confirmed the care record system contained guidance and the up to date information required to assist people safely. One member of staff said, "All the information is there and when someone moves in, it is great to read about their lives, medical histories and how they like things to be done. It is really important for us to read."
- People's care records were updated when required to reflect any changes in need. For example, a change in a person's health condition.

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.

- The initial assessment process considered people's communication and sensory requirements. These were regularly reviewed to ensure they continued to be reflective of their needs.
- When necessary, information could be provided in alternative formats to meet people's requirements.

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 were supported to live as full a life as they wished at Douro Court. Regular events and social activities were arranged, and some were linked to the local community. For example, a mothers and young children's group visited weekly and afterwards enjoyed lunch with people living at Douro Court. Other activities included, fish and chip evenings, chair Pilates, massage and pamper sessions.
- People had opportunities to join in with the various events and leisure interests offered if they wished to.

We observed people enjoying some of the activities during the inspection. One person told us, "We have regular coffee mornings. Event days, like the Queens jubilee, and we are going to do something for the King's coronation, and we also celebrate birthdays." Another person commented, "There are lots of activities going on, but I like to watch TV and use my I pad."

Improving care quality in response to complaints or concerns

- People knew how to raise concerns and were confident action would be taken. One person said, "I'd speak to the senior person and I have their phone number." Another person commented, "I've no concerns or complaints. I'd talk to the manager, if I had any. If I needed, I'd just go to the office."
- A complaints policy was in place and information about how to raise a concern was displayed in the entrance of the building.
- Complaints were logged, and actions taken to address them recorded with the response from the complainant.

End of life care and support

- At the time of our inspection no one was being supported with end of life care. However, information about what was important to people such as their religious or spiritual beliefs along with any decision's they had made with regards to their end of life care was recorded.

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

- There was an open and transparent culture within the service. The provider and management team were open and honest with us about the improvements being made within the service in relation to staffing.
- People discussed the recent changes in the management of Douro Court; they were positive about how the service was now being managed. Comments included, "We're waiting for a new manager. The people covering are so good. There is a lovely happy atmosphere here. It's good to see everybody working together as a team." "The atmosphere has improved. They [managers] are around all the time. They pop in and always ask if I'm alright." And, "Care has vastly improved with [manager] and [person] is happy."
- The provider, management and staff team promoted a person-centred culture to ensure people received personalised care that considered the organisations values along with treating people as individuals.
- Staff told us morale within the service was continually improving and they felt valued and listened to by the provider and management team.
- The provider had a number of incentives, benefits, staff recognition and rewards schemes that recognised staff's achievements. Such as an annual carer of the year award and 'thank you' vouchers for staff going above and beyond. Staff also had access to several other initiatives operated by the organisation in relation to their pay or own health matters such as, mental health support schemes.

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 and management team understood their responsibilities in relation to the duty of candour. If any incidents or accidents occurred, they ensured that all relevant people were appropriately informed, and used the opportunity to support their learning.

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

- At the time of the inspection the service did not have a manager registered with CQC. The service was being led by the Head of Extra Care. A new permanent manager had been recruited and was intending to register with CQC.
- The service had a clear staffing structure and staff understood their roles and responsibilities.
- Effective communication processes were in place between the provider, management team and staff along with clear lines of accountability across the staff team.
- Staff told us they understood the whistle blowing policy and how to escalate concerns if needed. Whistle

blowing means raising a concern about malpractice, wrongdoing or risk about an organisation.

- A range of policies and procedures were available for staff to refer to such as infection control and safeguarding.
- Processes and systems were in place to monitor the quality and safety of the service. These were extremely effective at identifying areas for development or improvement.
- The provider and management team understood their legal responsibilities and were clear about when to notify CQC about significant incidents at the service.

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

- People and their relatives were asked for their views on the care and support provided during regular reviews, surveys and meetings. One person said, "Every now and then we get a phone call or questionnaires to make sure we are happy." Where any improvements were identified measures were put in place to develop the service further.
- Staff were positive about the change in the management team. They explained the provider and interim manager met regularly with them to obtain their views on their performance as well as their ideas about how the service might be improved.

Continuous learning and improving care

- Continuous learning and development were encouraged through staff training, supervisions and meetings to ensure learning and improvement took place.
- Staff were encouraged to progress within the service as well as continually developing their skills and knowledge. Additional training was offered to staff such as British Sign Language as well as themed webinars and discussions to improve best practice.

Working in partnership with others

- Links with the local community were being built to continue to provide a range of new and on-going opportunities for people to enjoy.
- Guinness Partnership Limited is a national provider who work in partnership with other organisations to improve the service provided to people as well as keeping up to date with current best practice and legislation. The organisation has several accomplishments including the Investors in People Diversity Award and IIP Leadership and Management Award for their commitment in developing managers and leaders.