

Domain Care North West Ltd

# Eden House

## 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

### About the service

Eden House is a care home providing personal care to people with a learning disability and autistic people. The service accommodates 3 people on a permanent basis and has 2 respite beds. At the time of the inspection 4 people were using the service.

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

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.

### Right Support:

Staff focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life. People had a choice about their living environment and were able to personalise their rooms.

Staff supported people with their medicines in a way which promoted their independence and achieved the best possible health outcome. Staff supported people to play an active role in maintaining their own health and wellbeing.

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. All relatives felt people were safe and happy at Eden House.

### Right Care:

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to their individual needs. Staff understood how to protect people from poor care, abuse, and harm.

The provider had robust safeguarding systems which included working alongside other agencies when things went wrong. Staff had training on how to recognise and report abuse and they knew how to apply it. People could communicate with staff and understand information given to them because staff supported them consistently and understood their individual communication needs.

People could take part in activities and pursue interests tailored to them. The provider gave people opportunities to try new activities which enhanced and enriched their lives.

### Right Culture:

People received a good standard of care, support, and treatment because trained staff and specialists could meet their needs and wishes. Staff placed people's wishes, needs, and rights at the heart of everything they did.

People, and those important to them, were involved in planning their care. However, some relatives felt communication could be improved. Managers ensured risks of a closed culture were minimised, so people received support based on transparency, respect, and inclusivity.

People told us they felt safe and knew how to raise concerns. Staff assessed health and safety risks and supported infection prevention and control processes. There were enough staff to meet people's needs and recruitment processes ensured staff were suitable to work with vulnerable people.

People's health and nutrition needs were supported, and staff were aware of their responsibility to promote people's rights. However, some relatives felt more information about healthy eating would reduce the risks of people gaining weight. Systems were in place to monitor quality and safety, and the provider sort regular feedback from people to improve their support.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was good (published 22 September 2017)

#### Why we inspected

We undertook this inspection as part of a random selection of services rated Good and due to the length of time since the service was last inspected.

#### 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.

# Eden 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

This 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

Eden House is a 'care home'. People in care homes receive accommodation and personal care and/or nursing as a single package under one contractual agreement dependent on their registration with us. Eden House is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### 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

We gave the service 24 hours' notice of the inspection. This was because the service is small, and people are often out, and we wanted to be sure there would be people at home to speak with us.

Inspection activity started on 3 November 2023 and ended on 6 November 2023. We visited the location's service on 3 and 6 November 2023.

### What we did before the inspection

We sought feedback from the local authority and professionals who work with the service. 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 the registered manager, the deputy manager, and the director. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We received feedback from 3 people who used the service and spoke to 5 relatives about their experience of the care provided. Some people were not always able to communicate verbally with people effectively; we tailored our communication to suit people's preferences. We also observed people's care and their interactions with staff to understand their experience, for example, through observing people's body language.

We received feedback from 3 support staff, including the team leaders. We reviewed 2 people's care records, including the administration of medicines. We looked at 3 staff files in relation to recruitment and staff supervision. We reviewed records and audits relating to the management of the service, including policies and procedures.

We asked the registered manager to send us documents before and after the on-site inspection. These were provided in a timely manner and this evidence was included as part of 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 our last inspection we rated this key question good. At this inspection 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

- The provider had processes in place to protect 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.
- Staff received online safeguarding training and the registered manager had a good understanding of safeguarding thresholds and their responsibilities in escalating safeguarding incidents appropriately.
- People told us they felt safe. One person said, "I like living at Eden House; staff and managers help me feel safe and I know I can talk to them."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks associated with the provision of peoples' support had been assessed by the registered manager. Risk assessments were detailed, and person centred.
- Staff could recognise signs when people experienced emotional distress and knew how to support them to minimise the need to restrict their freedom to keep them safe.
- People lived safely and free from unwarranted restrictions because the provider assessed, monitored, and managed safety well.
- The provider carried out regular health and safety checks, including fire safety, to ensure the building was safe, and took action to mitigate any identified risks. For example, recent damage to an internal fire door had been identified and a replacement door had been arranged.

Staffing and recruitment

- The registered manager ensured safe levels of staffing to meet people's needs. Rotas were flexible and could be adapted to address people's wishes, activities, and appointments.
- The provider had effective recruitment processes. Recent records showed staff being recruited safely, with appropriate checks and competencies.
- The numbers and skills of staff matched the needs of people using the service. Staff knew people well and could proactively support their needs, reducing communication difficulties and promoting emotional and physical health needs.
- Staff felt there were enough staff to keep people safe. One staff member said, "We have some staff who are off at the moment, but we always arrange cover to reduce the impact on the people we support."

Using medicines safely

- Medicines were managed safely. Staff demonstrated a good understanding of how to administer medication and records were completed in line with the provider's policies.

- The registered manager ensured people's behaviour was not controlled by excessive and inappropriate use of medicines.
- Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism, or both) and were able to demonstrate people's medicines were reviewed by people's GP's regularly in line with these principles.

#### Preventing and controlling infection

- The provider implemented effective infection, prevention, and control measures to keep people safe, and staff supported people to follow them.
- The registered manager made sure infection outbreaks could be effectively prevented or managed. The service had plans to alert other agencies to concerns affecting people's health and wellbeing.

#### Visiting in care homes

- No restrictions were in place regarding visiting. We observed safe visiting arrangements were in place which helped to minimise the risk of the spread of infection.



# 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. At this inspection 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

- The registered manager completed a comprehensive assessment of each person's physical and mental health either prior to admission.
- The registered manager completed functional assessments for people who needed them, staff took the time to understand people's behaviours.
- The provider ensured support plans reflected a good understanding of people's needs, including relevant assessments of people's communication support and sensory needs.

Staff support: induction, training, skills and experience

- The provider enables people to be supported by staff who had received relevant and good quality training in evidence-based practice. This included training in the wide range of skills for working with people with a learning disability and or autistic people. For example, staff were trained in the use of communication tools, positive behaviour support, and human rights.
- The registered manager checked staff's competency to ensure they understood and applied training and best practice.
- Staff were knowledgeable about, and committed to, deploying techniques promoting the reduction in restrictive practice. Relatives told us staff were friendly, approachable, and professional.

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.
- People were involved in choosing their food, shopping, and planning their meals.
- Staff supported people to be involved in preparing and cooking their own meals in their preferred way.
- Some relatives told us meals could be healthier. One relative said, "There are too many opportunities for people to eat 'fatty' foods which might mean they put on weight." After the inspection, the provider shared how they were reviewing their health eating guidelines.

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

- The provider ensured the service worked effectively within and across organisations to deliver effective care and support.
- People were supported to live healthier lives, access healthcare services and support.
- Support records showed advice given by health professionals was acted upon, and staff were prompt in

raising concerns or issues.

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

- People's care and support was provided in a safe, clean, well equipped, well-furnished environment which met people's sensory and physical needs.
- Consideration had been given to ensuring the environment was suitable for people living with people with a learning disability and or autistic people.
- People personalised their rooms and were included in decisions relating to the interior decoration and design of their home. However, some relatives felt the service could benefit from more areas for them to meet privately when visiting. After the inspection the provider contacted relatives with a plan to address these concerns.
- Some areas of the building needed repair and redecoration to better meet people's needs; these areas had been identified by the provider, and plans were in place to update the service (including making the environment feel more homely). For example, a new sluice room had recently been installed at the property to improve infection control procedures.

#### 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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The provider was working in line with the Mental Capacity Act. Where people lacked capacity to make decisions, best interest processes were followed.
- Appropriate DoLS applications had been made by the registered manager where the service suspected people were being deprived of their liberty. These were reviewed and re-applied for within required time frames.

# 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 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 received kind and compassionate care from staff who used positive, respectful language which people understood and responded well to.
- People felt valued by staff who showed genuine interest in their well-being and quality of life.
- Staff members showed warmth and respect when interacting with people.

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

- People were supported to express their views and make decisions about their care.
- People were given time to listen, process information and respond to staff and other professionals.
- Staff supported people to express their views using their preferred method of communication.
- People and their relatives were empowered to make decisions about the service when appropriate and felt confident to feedback on their care and support. However, some relatives felt more could be done to include them in people's lives, for example through regular newsletters. After the inspection the provider contacted relatives and agreed to produce regular newsletters updating them about service activities.

Respecting and promoting people's privacy, dignity and independence

- The provider followed best practice standards which ensured people received privacy, dignity, choice, and independence.
- The registered manager ensured people had the opportunity to try new experiences, develop new skills, and gain independence.
- Staff knew when people needed their space and privacy and respected this.

# 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. At this inspection 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

- The provider enabled people through personalised, proactive, and co-ordinated support in line with their communication plans, sensory assessments, and support plans.
- The registered manager focused support on people's quality of life outcomes, which were regularly monitored and adapted as a person went through their life.
- The service met the needs of people using the service, including those with needs related to protected characteristics.
- People told us they had choice and control over their daily lives. One person said, "I can choose when I get up, what I want to eat and where I want to go. Staff always ask me what I want to do."

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 provider ensured people had access to information in formats they could understand.
- People had individual communication plans detailing effective and preferred methods of communication, including the approach to use for different situations.
- Staff had good awareness, skills and understanding of individual communication needs, they knew how to facilitate communication and when people were trying to tell them something.

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

- The registered manager helped people to have freedom of choice and control over what they did and were respectful of people's choices.
- Staff supported people to participate in their chosen social and leisure interests on a regular basis.
- Staff recognised potential anxiety triggers and knew how people communicated discomfort, pain, and sadness. Staff were able to offer emotional support in a respectful way whilst maintaining people's dignity and privacy.
- Relatives had mixed views on the activities available at Eden House. One relative said, "It's excellent; [my relative] is surrounded by his peers and there is a lot of variety in activities." However, another relative said, "There's not much in the way of activities and staff don't support [my relative] to send family cards." After

the inspection the provider contacted relatives to update them about activities available to people.

#### Improving care quality in response to complaints or concerns

- People, and those important to them, could raise concerns and complaints easily and staff supported them to do so. □
- The registered manager explained to people when and how their complaints would be addressed.
- The provider 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.
- Staff were committed to supporting people to provide feedback so they could ensure the service worked well for them.

#### End of life care and support

- The provider had processes in place to support people with end-of-life decisions.
- Staff knew how to care for and support people, and how to access the appropriate healthcare professionals to ensure end of life needs were met.
- At the time of our inspection there were no people receiving care and support who were at the end of their life

# 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. At this inspection 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People, and those important to them, worked with managers and staff to develop and improve the service.
- The provider and registered manager worked hard to instil a culture of care in which staff truly valued and promoted people's individuality, protected their rights, and enabled them to develop and flourish.
- The registered manager was visible in the service, approachable and took a genuine interest in what people, staff, family, and other professionals had to say.
- The provider sought feedback from people and those important to them and used the feedback to develop the service.
- Staff told us the provider and registered manager were approachable. One staff member said, "The management team are very receptive to our ideas and concerns; they always listen to us and check back to see if things are working well."

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; Continuous learning and improving care

- The registered manager understood their responsibilities to be open and transparent and had had robust processes in place for receiving feedback and suggestions on how to improve the quality of support.
- The provider apologised to people, and those important to them, when things went wrong. ☐
- Staff gave honest information and suitable support, and applied duty of candour where appropriate. However, some relatives felt communication could be improved using monthly newsletters. After the inspection the provider agreed to learn from this feedback.
- The provider invested sufficiently in the service, embracing change, and delivering improvements.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Working in partnership with others

- The registered manager had the skills, knowledge, and experience to perform their role and a clear understanding of people's needs/ oversight of the services they managed.
- The provider's 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.
- The provider engaged in local forums to work with other organisations to improve care and support for

people using the service.

- Staff 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.
- Healthcare professionals told us the service was well-led. One health professional said, "The registered manager and provider are approachable and have a good working relationship with local services."