

Elizabeth House Newquay Limited

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Inspection report

87 Henvy Road
Newquay
TR7 3DJ

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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

Elizabeth House Newquay Ltd is a supported living service providing personal care. The service provides support to people living in their own homes so they can live as independently as possible. The service was supporting 6 people who received personal care who lived in their own supported living settings. The service also supported one person in the community.

Not everyone who used the service received personal care. In this service, the Care Quality Commission can only inspect the service received by people who get support with personal care. This includes help with tasks related to personal hygiene and eating. Where people receive such support, we also consider any wider social care provided.

People's care and housing are provided under separate contractual arrangements. The CQC does not regulate premises used for supported living; this inspection looked at people's care and support.

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

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting underpinning principles of "Right Support, Right Care, Right Culture.

The Right support:

The model of care and setting maximised people's choice, control and independence. The service was in a town and there was good access to the local community and amenities.

People were supported to make their own decisions and included in the day to day running of their home. This included attending work or college, going shopping and accessing the community.

Staff focused on people's strengths and interests. They promoted what people could do and focused on people having as many opportunities as possible for them to gain new skills and become more independent.

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.

People were supported by enough staff on duty who had been trained to do their jobs properly. People

received their medicines in a safe way and were protected from abuse and neglect. People's care plans and risk assessments were clear and up to date. People were able to access timely support from health and social care professionals.

Right Care

There was a strong person-centred culture within the staff team. Care is person-centred and promoted people's dignity, privacy and human rights. People were treated in a dignified manner and staff were aware of people's support needs.

Staff knew people well and demonstrated an understanding of people's individual care, behavioural and communication needs. Staff gained consent from people prior to providing any support.

People received good quality care, support and treatment because staff had the skills they needed and supported each other effectively. Staff comments included "We are like a family and as we are a small service, we get to know people well. We really do care." Health and social care professionals also provided positive views on the caring approach by staff to people they supported. Comments included "Staff here really do seem to care."

People communicated with staff with no hesitation. Staff understood their individual communication needs and were consistent in their approach and response. Care plans informed staff of any specific ways to best communicate with each person.

Right culture

People led their life that reflected their personalities and preferences. People were supported by staff where the ethos, values, and attitudes of management and care staff ensured they led confident, inclusive and empowered lives.

Staff created an environment that inspired people to understand and achieve their goals and ambitions. A person commented "Elizabeth House has changed my life. I lost all hope, but Elizabeth House has made me realise that I have a whole life ahead of me and am really looking forward to achieving my goals and overcoming barriers." Comments from staff included "We are so pleased when we see people achieve their goals, we enjoy their success with them."

People's quality of life was enhanced by the staff team's commitment to ensuring a respectful and inclusive culture. Systems were in place to monitor the quality of the care and support people received.

The registered manager and staff team were open and transparent and acted on feedback given, and queries raised, throughout the inspection.

People, relatives and health and social care professionals were complimentary of the service and could not identify any areas for improvement.

For more information, please read the detailed findings section of this report. If you are reading this as a separate summary, the full report can be found on the Care Quality Commission (CQC) website at www.cqc.org.uk

Last rating and update

This service was registered with us on 29 April 2022, and this is the first inspection. The last rating for the service under the previous provider was rated good, published on 21 December 2020.

Why we inspected

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

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home 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.

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.

Elizabeth House Newquay Ltd

Detailed findings

Background to this 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

The inspection was carried out by 1 inspector.

Service and service type

This service provides care and support to people living in a 'supported living' setting. People's care and housing are provided under separate contractual agreements. The Care Quality Commission (CQC) does not regulate premises used for supported living; this inspection looked at people's personal care and support.

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was announced. We announced the inspection a few days in advance to ensure that people would give us permission to visit them in their home.

What we did before the inspection

Before the inspection, we reviewed information we held about the service and the provider which included any statutory notifications sent to the CQC. A notification is information about important events which the service is required to send us by law. We used the information the provider sent us in the provider information return. 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 of this information to plan our inspection.

During the inspection

We spoke with 3 people who used the service about their experience of the care provided and received a letter from another person. We spoke with 6 members of staff including the registered manager, senior carer and care staff. We also spoke with a visiting health and social care professional.

We reviewed a range of records. This included 2 people's care and medication records. We looked at 1 staff file in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

We spoke with a relative by telephone and received an email from a staff member about their experiences of Elizabeth House.

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 of this newly registered service. We have rated this key question good.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk from abuse

- People told us they were happy with the care they received and believed it was a safe environment to live in. The relative echoed this view.
- People were empowered and encouraged to report any concerns they may have about their welfare to the registered manager or staff.
- The service had effective systems in place to protect people from abuse and staff had a good understanding of what to do to make sure people were protected from harm.
- Staff received training and were able to tell us what safeguarding, and whistleblowing was.
- Local safeguarding procedures were well understood by managers and the staff team. Where concern had been identified that may impact on people's wellbeing these had been identified and appropriately reported.
- The service supported people to manage some aspects of their finances. We checked the monies for some people in the service and this tallied with finance records.

Assessing risk, safety monitoring and management

- Staff knew people well and were aware of people's risks and how to keep them safe.
- Risks to people's safety and wellbeing were assessed and well managed. Each person's care record included risk assessments associated with the person's environment, their care and treatment, medicines, accessing the community and any other factors. This meant staff had guidance in how to manage people's care safely.
- Risk assessments were regularly reviewed and updated to ensure they reflected people's current needs. Risks were managed in a way that did not restrict people's freedom and right to independence.
- The registered manager reviewed all accidents or incidents and ensured that action was taken to minimise future risks for people and staff.
- Contingency plans were in place on how the service would support people if they had an outbreak of COVID-19.
- Emergency plans were in place outlining the support people would need to evacuate the building in an emergency. Staff had undertaken training so that they were aware of what action to take in an emergency.

Staffing and recruitment

- People, relatives and staff told us they felt there were enough staff on duty to meet people's needs. Where people were assessed as needing specific staffing ratios, to meet their care needs and when going out in the community, this was always provided.

- The service did not use agency staff. Staff absences were covered by existing staff and management. This meant people always received care and support from staff they knew and trusted.
- The rota system was used effectively and consistently, which resulted in people receiving safe and timely care. People had agreed the times of their support, and no one reported ever having had any missed support hours.
- During the inspection we saw staff promptly responded to requests for assistance and recognised when people needed support.
- The services recruitment practices were safe and all necessary pre-employment checks had been completed to ensure prospective staff were suitable for employment in the care sector.

Using medicines safely

- Medicines were managed safely to ensure the person received them safely and in accordance with their health needs and the prescriber's instructions. Staff were trained in medicines management and competency checks were in place to ensure ongoing safe practice.
- There were suitable arrangements for ordering, receiving, storing and disposal of medicines.
- When medicines were prescribed to be given 'when required' we saw that person-centred protocols had been written to guide staff when it would be appropriate to give these medicines.
- People could remain independent with managing their own medicines if they chose and were able to do so independently.
- Medicines audits were completed on a regular basis. They regularly checked staff practice in this area, they also identified where further improvements may be required and took action to implement any improvement.

Preventing and controlling infection

- People were protected from the risk of infection and cross contamination including COVID-19.
- People wanted to show us their home and were proud in how they kept their home clean, with staff support.
- Staff were aware of Infection Control guidance and had received training in this area.

Learning lessons when things go wrong

- The registered manager maintained an effective oversight of incidents that occurred at the service. They used this to identify areas of learning and improvement. They also took action to minimise the risk of reoccurrence where relevant.
- Learning and any improvements from accidents, incidents and safeguarding concerns were shared with staff in team meetings.

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 of this newly registered service. We have rated this key question 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

- Assessment of people's needs met the requirements of the Equality Act. This meant that practices in the service took steps to ensure there was equal access to good quality care and support to all people who used the service, irrespective of any protected characteristics such as disability, gender, race etc.
- People's needs were assessed prior to their admission to the service so that they could confirm they were able to meet individual needs safely and effectively.
- The needs assessments reflected people's physical, mental and any additional needs. They reflected people's individual choices and guided staff on how to effectively provide support that suited people.
- People and their family, together with reports from health professionals contributed to the assessment, which included their presenting needs and people's preferences and routines.

Staff support, training, skills and experience

- Staff new to the care sector were supported to complete induction training in accordance with current good practice.
- Staff received training which supported them to care for people. This meant people received effective care and treatment from competent, knowledgeable and skilled staff who had the relevant qualifications and skills to meet their needs. Staff told us "We are all willing to learn and this will help us to do our jobs even better."
- There was a system in place to monitor training to help ensure this was regularly refreshed and updated so staff were kept up to date with best practice.
- Staff were provided with opportunities to discuss their individual work and development needs. Staff meetings and one to one meetings were held to enable staff to raise any issues and share ideas. Staff told us they were well supported by the management team.

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

- Staff assisted people to maintain good nutrition and hydration, encouraging people to eat a well-balanced diet and make healthy eating choices.
- Staff had good knowledge of people's dietary requirements and steps were taken to support people's needs. For example, supporting people to eat a healthy diet to assist with weight management.
- Where required, staff supported people to purchase their food and with preparing their meals.
- People and staff enjoyed occasions when they shared a meal together, for example a Sunday roast and a takeaway meal on a Saturday evening. People and staff both spoke positively regarding this and saw this as

a social occasion.

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

- Staff supported people to effectively manage their health and wellbeing. They supported them to make and attend medical appointments.
- People told us that staff contacted relevant health professionals if they felt unwell. People said they also received emotional support from staff who would sit and talk with them about how they were feeling.
- Relatives and health and social care professionals felt that staff, along with the registered manager, were quick to identify any health issues and act appropriately
- People's health conditions were well managed. Care records were updated to reflect any professional advice given and guidance was available for staff through shift handovers.
- A 'hospital passport' provided key information about people's communication and health needs, in the event they needed a stay in hospital.

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 were supported in accordance with the requirements of MCA. Capacity assessments were completed to assess if people were able to make specific decisions independently.
- Staff consistently took the least restrictive option when supporting people to stay safe and independent. They sought people's consent before they delivered care and support to them.
- Best interest meetings were organised when it was necessary for others to make decisions on the person's behalf. These involved staff, external healthcare professionals and relatives.
- People's human rights were upheld by staff who supported them to have control over their own lives. We observed people making real choices in the structure of their day and the activities they took part in.

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

- The premises had been adapted to provide people with privacy to support their independence. Each person had their own self-contained flat, with access to a communal indoor space and private secure garden.
- Flats had been designed and decorated in line with each person's individual needs and wishes.

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 of this newly registered service. We have rated this key question 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 told us that staff cared for them with compassion and respect. People commented, "Elizabeth House has changed my life. I lost all hope, but Elizabeth House has made me realise that I have a whole life ahead of me and am really looking forward to achieving my goals and overcoming barriers" and "I love it here, the staff are good."
- Health and social care professionals also provided positive views on the caring approach by staff to people they supported. Comments included "Staff here really do seem to care" and "The team are all positive about this service."
- Throughout the inspection there was a caring, relaxed, happy atmosphere. Everyone enjoyed each other's company and interactions showed how people and staff valued each other. Without exception the interactions between people and staff at all levels were kind and compassionate.
- The way staff spoke about people they supported showed they genuinely cared for them. They talked about people's wellbeing and were focused on providing the right support to improve people's lives. Comments included "We are like a family and as we are a small service, we get to know people well. We really do care" and "We are so pleased when we see people achieve their goals, we enjoy their success with them."
- Staff respected people's individuality and supported them in a non-discriminatory way. Staff had received training in equality and diversity and knew how to support each person in a way that took account of their abilities and lifestyle choices.

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

- People were involved in decisions about what to do throughout the day. People told us they could get up when they wanted and choose how they spent their day.
- Where any daily routines had been developed, these were in place to meet people's needs and wishes, rather than to benefit staff.
- Staff supported people to make decisions about their care as independently as possible.
- Staff listened to people's and relative's views and ensured these were respected. Resident meetings occurred to provide an opportunity for all to share their views on the service provided at Elizabeth house.

Respecting and promoting people's privacy, dignity and independence

- People told us staff promoted their independence and had encouraged them to try new things, for

example a person had started swimming to earn a new skill and develop their confidence.

- Treating people with privacy and dignity was embedded in the culture of the service. Staff were skilled at identifying when people were becoming distressed or feeling anxious. They consistently followed guidance in place to help people feel calm and reassured.
- Everything about how the service operated, and the way staff provided care and support was focused on the individual person and involving them in their care. Where any daily routines had been developed, these were in place to meet people's needs and wishes, rather than to benefit staff.
- The values of the service were based on enabling people to live as fulfilling live as possible and achieve the best possible outcomes. Staff commented "We care about the people and want to help them move forward with daily living and hopefully eventually move on to them not needing support and living in the community."
- People's right to privacy and confidentiality was respected. Confidential information was kept securely.

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 of this newly registered service. We have rated this key question good.

This meant people's needs were met through good organisation and delivery.

Planning personalised care

- Staff had a good understanding of people's individual needs and provided personalised care.
- People's care plans provided staff with detailed information about their abilities, the risks they faced and how they should support them in line with their preferences. These were reviewed monthly or as their needs changed. Multi-disciplinary meetings were held to review the persons care and identify future goals.
- People and staff were clear that the care plans were up to date and that they reflected the care and support they received. This further supported staff to have current and updated information about the persons' needs and how they spent their time.
- People, who were able to, had signed their care plans to indicate they agreed with their planned delivery of care.
- There was good communication within the staff team and staff shared information appropriately, about people's needs, at shift handovers. The service recorded daily logs to summarise each person's day. This supported staff to have current and updated information about people's needs and how they spent their time.

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.

- People's communication needs, and preferences were identified, recorded, and highlighted in care plans. This included reference to the type of communication the person may find difficult and how to support them. We observed people and staff communicating effectively together throughout the inspection. Supporting people to develop and maintain relationships and to avoid social isolation; Support to follow interests and take part in activities that are socially and culturally relevant

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

- People were supported to access activities within and outside the service. For example, some people attended work and education placements, and attended social events in the community independently.
- Staff were keen to encourage people to think about new activities and goals for each person so that they could further experience new life skills. Some people attended work or college to develop their life skills. For example, at college some people were developing their cooking skills, staff then supported the person with

cooking in their home. Staff supported another person with managing their finances and supported them with budgeting so that they could develop this skill, as the aim was for the person to move into their own home in the community. Some people were planning their holidays.

- Staff supported people to maintain relationships with their family and friends. Staff and people were pleased with how contact with relatives had improved and that their relationships had grown and developed.

Improving care quality in response to complaints or concerns

- People and a relative told us they would have no hesitation to speak to the registered manager or staff if they were unhappy. They told us they were confident that any concerns they had would be listened to and acted upon.

- There was a complaints policy in place which outlined how a complaint would be responded to and the timescale. There were no open complaints currently being investigated.

- Staff told us they would be able to speak to the registered manager if they had any concerns.

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 of this newly registered service. We have rated this key question 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

- Elizabeth House Newquay Ltd was registered with the Commission in April 2022 with this current provider. An experienced registered manager was in post and received support from the provider and care coordinator.
- Since its registration there had been 4 changes in managers. The current manager commenced their post in February 2023 and had completed their registered manager application with the Commission. Staff commented they were reassured this manager would remain in post due to their commitment to the service by registering with the commission. They said "There's been a lot of changes. We want [registered managers name] to stay, [name] is marvellous" and "[Registered managers name] is brilliant, approachable and just gets it."
- The provider had a defined organisational management structure. This provided clear lines of responsibility and accountability across the staff team. There was regular oversight and input from the management team.
- The registered manager had comprehensive oversight of the service and understood the needs of the people they supported.
- Staff were very motivated by and proud of the service. They told us they felt valued and were well supported. Comments included, "I've worked in other places, and this is the best."
- There were robust quality assurance and auditing systems in place designed to drive improvements in the service's performance. Where any issues were identified, appropriate action was taken to ensure they were addressed, and the service's performance improved.

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

- There was a positive culture within the staff team and all staff told us they felt supported by the management team and the changes made. Comments included, "We as a team work well and communicate with each other, if any problems arise, we talk about it which makes us, I think, a strong team."
- Health and social care professionals were equally complimentary about the change in the culture of the home.
- People and a relative were also complimentary about the management of the service and the changes that have been implemented.
- Management and staff were committed to their roles and had built positive and caring relationships with

people. Staff understood people's individual care and communication needs, and this helped to ensure people received care and support that promoted their well-being.

- People's care plans and risk assessments had been reviewed. Records demonstrated a person-centred approach to the care and support provided for people.

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

- People and relatives were regularly asked for feedback on the service's performance through informal conversations and meetings. Resident meetings were also held to provide an opportunity for people to share their views.
- People and relatives were invited to care plan reviews to help ensure people's voices were heard when discussions took place about the organisation of their care.
- Staff team meetings were held and provided opportunities for staff and managers to discuss any issues or proposed changes within the service. Staff told us if they made any suggestions about improvements to the service these were listened to and acted upon.
- Managers and staff had a good understanding of equality issues and valued and respected people's diversity. Staff requests for reasonable adjustments to their employment conditions had been looked on favourably by registered managers.
- Staff had received one-to-one supervision with managers. This provided opportunities for staff and managers to discuss any issues or proposed changes within the service. There were also regular updates through shift handovers.

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 duty of candour was understood by staff and managers.
- The ethos of the service was to be open, transparent and honest. Staff were encouraged to raise any concerns in confidence through a whistleblowing policy. Staff said they were confident any concerns would be listened to and acted on promptly.
- The registered manager had notified CQC of any incidents in line with the regulations.

Continuous learning and improving care; Working in partnership with others

- The registered manager and provider were committed to ensure a culture of continuous learning and improvement and kept up to date with developments in practice through working with local health and social care professionals.
- The registered manager and the provider completed regular checks on the quality of the service. Action was taken when a need to improve was identified.
- Regular management meetings were held to support improvements to the service.
- The service worked effectively and in partnership with health and social care professionals. This was evidenced in records we viewed. Records demonstrated prompt and appropriate referrals had been made to enable people to access health and social services.
- The staff and manager were open and transparent throughout our inspection demonstrating a commitment to provide person-centred and high-quality care. The manager acted on feedback given throughout the inspection.