

Elan Care Whitethorn Limited

Whitethorne Gardens

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Whitethorne Gardens is a supported living service providing personal care to people with learning disabilities and/or autism. The service supported six adults with their personal care. 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.

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

People told us they felt safe at the service. One person told us, "I am safe, they [staff] are brilliant." Relatives also gave positive feedback. One relative told us how staff had gone above and beyond in supporting their family member during the COVID-19 pandemic.

The service operated a robust recruitment process. Interviews were thorough, enabling the service to select applicants with the right skills and experience. People were encouraged to take part in the recruitment of staff.

Staff had received training in infection control and spoke confidently about how to support people safely. PPE was readily available. The provider had purchased a temperature monitoring sticker system as an additional measure to keep people and staff safe.

New staff completed an induction period which included shadowing experienced staff members. The management liaised with external healthcare professionals in the development of bespoke training to meet people's needs.

The provider had systems in place to ensure people were protected from abuse and harm. Staff had completed safeguarding training and were aware of the whistleblowing protocols. Risks to people and the environment were identified and managed.

The provider had systems in place to monitor, assess and improve the quality and safety of the service being provided. Staff told us they felt supported by the management team. People, relatives and staff were encouraged to offer feedback.

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.

This service was able to demonstrate how they were underpinning the principles of right support, right care, right culture. The service ensured people received the right support to maximise people's choice, control and independence. Care was person-centred and promoted people's human rights. The service

demonstrated a clear ethos with people at its centre, ensuring people using the service led confident, inclusive and empowered lives. There was an enthusiastic, positive and caring culture amongst staff at the service.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection (and update)

The last rating for this service was good (published 15 February 2019).

Why we inspected

This was a planned inspection based on our inspection programme.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Whitethorne Gardens

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 one inspector.

Service and service type

This service provides care and support to people living in 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The manager had started their application to become the registered manager of the service. This means the provider was legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We announced the inspection on 1 July 2021. Inspection activity started on 1 July 2021 and ended on 9 July 2021. We visited the office location on 6 July 2021.

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 authorities with whom the service works. On this occasion 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 three people at the supported living properties we visited. We spoke by telephone with one relative and another relative corresponded via email. During the inspection we spoke with the nominated individual who was also the operations manager, two senior team leaders, the administrator and two support workers. We asked eight staff members to answer some questions about the service via email which one staff completed.

We reviewed a range of records, including recruitment records. We reviewed some of the documentation remotely by asking the provider to send us key information prior to meeting with them.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

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

- Risks to people were assessed and mitigated. Environmental and individual risk assessments were developed to support each person to remain safe.
- Where necessary people had positive behaviour plans to reduce risks to themselves and others. These provided staff with guidance on possible triggers which might indicate increased risk, such as anxiety. One relative told us they worked with staff to create their family member's plan.
- The provider had a business contingency plan in place to ensure people received care and support in the event of an emergency.
- Safeguarding incidents, accidents and incidents were reviewed and discussed to identify any trends or patterns with actions put in place to reduce reoccurrence.

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

- People were protected from discrimination and the potential risk of harm. The provider had equality and diversity systems in place and staff were aware of the whistleblowing policy.
- People told us they felt safe and were happy with the support received. One person told us, "I am safe, they [staff] are amazing, I can go to them for anything."
- Systems and processes were in place to ensure people were safeguarded from avoidable harm. Safeguarding concerns were investigated, and referrals were made to the appropriate local authority safeguarding teams.

Staffing and recruitment

- People received care and support from suitably skilled and experienced staff. Relatives told us that staff received specific training delivered by external healthcare professionals.
- Safe recruitment processes were followed. The provider ensured full employment checks were completed prior to applicants taking up their post.
- People were encouraged and supported to take part in the recruitment of staff for the service.

Using medicines safely

- Medicines were administered safely. Staff administering medication had completed medicine training and received regular competency reviews.
- People were assessed to find the right level of support with medication and their independence was promoted when appropriate. People received their medication safely and as they preferred. One person told us with the support of the staff they had decreased their use of medicines used in reducing anxieties.
- Medicine audits were completed daily and monthly. Actions identified were used to improve the service.

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 meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The management team were clear about their roles and responsibilities and led the service well. The manager had submitted their application to registered with CQC.
- The provider had a quality assurance system to review areas of the service and to drive improvement.
- The management team carried out reflective practice throughout the service, on their own individual role and the care and support provided
- The provider had submitted the required statutory notifications to CQC following significant events at the service.

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

- The management team and staff were passionate about providing good care and support, empowering people to live full lives. One relative told us, "Staff are so attentive in ensuring a high level of care is provided and giving my [family member] the best possible quality of life."
- Staff told us morale was good and they worked effectively together as a team. One support worker told us, "Everyone works together and are very supportive."
- People were supported to achieve individual goals. One person told us how staff had assisted them in attaining their goal of losing weight. A relative told us, "They are phenomenal, they have helped support [family member] so well, I trust them, which is a big thing."

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

- The management team and staff were aware of people's individual needs and fully considered equality and diversity characteristics when creating care plans and in the delivery of people's care and support.
- People, relatives and staff were regularly invited to give feedback on the service.

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 had been no incidents which required the provider to act on this duty. The provider and management team were aware of their responsibilities under the duty of candour.
- Relatives told us the service was open and honest. One relative said, "They are so open, nothing is hidden."

Working in partnership with others

- The service worked in partnership with health and social care professionals who were involved in people's care.
- Health care professionals delivered training to staff relating to people's specific care and support needs.
- Social care professionals told us the service was responsive to people's needs. One professional told us, "The care staff go above and beyond to try and accommodate this [Person] and no matter what is thrown at them they stay professional and display dignity and respect."