

Voyage 1 Limited

# Bethia Cottage

## Inspection report

Lelley Road  
Preston  
Hull  
Humberside  
HU12 8TX

Tel: 01482891108  
Website: [www.voyagecare.com](http://www.voyagecare.com)

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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

Bethia Cottage is a care home that provides support and accommodation for up to five people with a learning disability or with autistic spectrum disorder. On the day of the inspection there were five people living at the home.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People were kept safe from the risk of abuse and avoidable harm. Staff were recruited safely and there were enough staff to keep people safe. People received their medicines on time and as prescribed and staff followed good infection control practices.

People had access to enough to eat and drink and those with complex nutritional needs received the help they needed. The home was specially adapted to meet people's diverse needs and the décor of individual bedrooms reflected people's different preferences.

People's needs were thoroughly assessed, and staff used this information to provide people with the right care in a way they preferred. They supported people to engaged in meaningful activities and avoid social isolation.

The home was warm and welcoming, and staff demonstrated a genuine desire to support people to the best of their abilities.

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.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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 4 September 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

#### 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 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.

# Bethia Cottage

## 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 two inspectors.

#### Service and service type

Bethia Cottage is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection and we wanted to be sure there would be people at home to speak with us.

#### 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 the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We spoke with three people who used the service about their experience of the care provided. We spoke with five members of staff including the registered manager, senior care workers and care workers.

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

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at quality assurance records, policies and care records.

# 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.

Systems and processes to safeguard people from the risk of abuse

- Staff were passionate people living at the home were safe.
- The service has effective safeguarding systems, policies and procedures in place.
- The registered manager responded to safeguarding concerns promptly, using local safeguarding procedures where necessary.
- Information about safeguarding was available to people in a format they could understand.

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

- A set of risk assessments underpinned each person's care plan which provided staff with enough information to support people safely.
- Accidents and incidents were recorded and analysed by the registered manager, who identified any corrective action that might be required. The registered manager looked for any reasons to learn from these and make improvements.

Staffing and recruitment

- There was enough staff to safely care and support people.
- The registered manager regularly reviewed staffing levels to ensure they continued to be appropriate.
- Staff were recruited safely, and appropriate recruitment checks had been carried out to ensure they were of suitable character to work with vulnerable adults.

Using medicines safely

- Staff administered people's medicines on-time and as prescribed.
- Staff received training in the safe management of medicines and the manager regularly reviewed staff practice.

Preventing and controlling infection

- The home was clean and free from any unpleasant smells.
- The provider had policies and procedures in place to prevent the potential spread of infection.
- Staff wore aprons and gloves when carrying out personal care tasks and used different coloured laundry bags for specific laundry items.
- There were several hand-sanitising points around the home and we saw staff used these.

# 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Care and support was planned and delivered in line with current evidence-based guidance, standards, best practice which achieved good outcomes for people.
- Staff thoroughly assessed people's needs to ensure they received the right care and support.

Staff support: induction, training, skills and experience

- Staff completed a thorough induction before they started working at the home and received ongoing training to support them in their role.
- In addition to formal training, the registered manager shared case studies and other learning tools with staff to further their knowledge and experience.
- Staff were provided with regular supervision and the registered manager had recently completed specialist training in providing emotional support. One member of staff told us they had, "Landed on their feet [working at the service]."

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

- Staff were aware of people's individual needs and preferences and received specialist guidance to support people to eat and drink well.
- During the inspection people had eaten a traditional cooked breakfast which had been specially adapted to meet people's individual dietary needs. One member of staff said, "We cook from scratch."
- People ate at their own pace and were supported by staff in a patient and relaxed manner. Staff described how they were able to anticipate whether people wanted a drink or something to eat.

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

- People had access to local healthcare services and staff arranged for doctors and emergency services promptly when necessary. Staff told us they could tell when people were not well. One member of staff said, "We know straight away."
- People received an annual health check which is best practice for people with a learning disability and or autism.
- Staff had received additional training to support people to maintain good oral health. The registered manager told us it was important staff understood the links between good oral health, nutrition and medication.

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



- Individual preferences and support needs were reflected in how people's rooms were adapted and decorated. The provider maintained the property to a high-standard. One person had a large mural painted on their bedroom wall which was very personal to them.
- People had access to designated areas to take part in their preferred activities. This included a Sensory Room, lounge and a large garden with adapted swings.
- People had access to the equipment and aids they needed to move freely around the home.

#### 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 Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff had a good understanding of the principles of the Mental Capacity Act (2005) and asked for their consent before they gave care and support and we heard staff doing this during our inspection.
- Where people lacked the capacity to make decisions about certain aspects of their care, a capacity assessment was undertaken and a decision made in the best interest of the person.

# 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Staff always treated people with kindness and respect.
- Staff spoke passionately about providing high-quality care and showed genuine compassion for the people they supported.
- People appeared comfortable, relaxed, and happy in the home. We saw kind and meaningful interactions between staff and people.

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

- Staff knew people very well and anticipated their needs and preferences.
- The registered manager regularly reviewed levels of engagement in activities to assess whether people were happy with the care they received.
- The registered manager had good links with local advocacy services should anyone require this support.

Respecting and promoting people's privacy, dignity and independence

- Staff maintained people's dignity and privacy at all times and supported them to be as independent as possible.
- Staff supported people to do what they could for themselves and included people, so far as they were able, in laundry and cleaning tasks. One member of staff said, "We all muck in... [People] help with this."

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 received care and support specific to their needs and preferences.
- Care plans were personalised and included information about people's goals, skills, likes and dislikes. Staff used this information to support people in a way they preferred.
- Staff engaged people in meaningful activity. For example, staff spent time with one person looking at personal photographs and supported them to write a letter to a family member. Another person had spent the morning listening to music.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff communicated with people in a way they could understand. This included the use of body language and signing.

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 benefited from full and varied lives.
- Staff consulted with people to plan activities they enjoyed. Activities had recently included visits to the theatre, a local social club, disco's and other celebrations. One member of staff told us, "People go out nearly every day and family visit people regularly."

Improving care quality in response to complaints or concerns

- The manager welcomed feedback which they used to make improvements to the service. They handled complaints with professionalism and transparency.

End of life care and support

- Staff respected people's wishes for end of life care.
- Staff actively involved people, their families, friends and other carers in developing care and support plans.

# 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.

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

- There was a calm and relaxed atmosphere in the home and a positive staff attitude. One member of staff said, "A home should be filled with laughter."
- Care was centred around the needs and preferences of people and staff were led by the pace of the individuals they were supporting.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 worked in an open and transparent way. They were a visible presence in the home and people and staff freely approached them if they had any concerns.
- Systems were in place to measure the quality of the service and support continuous improvement. The registered manager carried out internal checks in addition to the provider's audits of the service.
- The registered manager understood their responsibilities relating to being registered with CQC and they reported significant events to us as required by law.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People who used the service were consulted about the running of the home. People came together for resident's meetings and made decisions about future activities and purchases for the home. One member of staff told us they had recently bought a new DVD player.
- The home had good links with the local community and key organisations, reflecting the needs and preferences of people in its care.