

Livability

Livability Beaumont Court

Inspection report

Beaumont Court
Prudhoe
Northumberland
NE42 6JT

Tel: 01661520013

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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

About the service

Livability Beaumont Court is a supported living service providing personal care to up to 8 people. The service provides support to people living with a learning disability and/or physical disability. At the time of our inspection there were 8 people using the service.

People's experience of the 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. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

Right support.

People were supported and encouraged to maintain their independence, as far as possible. Staff had a good understanding of people's likes and dislikes and encouraged people to participate in their care.

Right care.

People were well cared for and were treated with dignity and respect. Staff spoke fondly of the people they supported and considered the service to be like a 'family' unit. People had a good relationship with staff and looked happy and relaxed.

Right Culture.

People were supported to be as active and independent as possible. They were encouraged to participate in activities and were supported to contribute to daily tasks, such as cooking and shopping. People were supported to maintain contact with family and friends.

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.

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

Rating at last inspection

The last rating for this service was Good (Published 20 July 2018).

Why we inspected

We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Livability Beaumont Court on our website at www.cqc.org.uk.

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.

<p>Is the service safe?</p> <p>The service was safe. Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led. Details are in our well-led findings below.</p>	<p>Good ●</p>

Livability Beaumont Court

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 inspector.

Service and service type

This service provides care and support to people living in a 'supported living' setting, 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.

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. The registered manager oversaw this service and was the registered manager a number of similar services. Day to day management of this service was undertaken by the service delivery lead.

Notice of inspection

The inspection was announced. 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.

What we did before the inspection

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 contacted the local authority commissioners and safeguarding adults team for any information they held about the service. We used all this information to plan our inspection.

During the inspection

People using the service were not able to speak in detail about the care they received. People we did speak with indicated they were happy at the service. We observed people were well cared for and were happy and relaxed in the presence of staff. We spoke with 5 members of staff including the registered manager, service delivery lead and 3 support workers. Following the inspection, we spoke on the telephone with 1 care manager and 1 relative.

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 has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- The provider had in place a safeguarding process that staff were aware of and followed. Action had been taken when there had been minor errors with giving people's medicines.
- Staff told us they would report any concerns to the service delivery lead or on-call manager.

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- People's care plans contained information relating to risks associated with care delivery.
- Staff were aware of potential risks and took action to mitigate these, such as ensuring people were safe before assisting them to mobilise.
- The service had in place contingency plans to deal with emergencies that meant people may have to move out of their homes.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- The provider operated safe recruitment processes.
- Staff told us there were enough staff to support people with their daily care needs and to support them out in the community. The registered manager told us they were continuing to recruit, although were still reliant on agency staff. Agency staff used regularly worked at the service and knew people well. A relative told us there was frequent use of agency staff but this did not affect the standard of care.
- The service delivery lead told us they had recently worked with the local authority to increase care hours to promote people's independence and care, including increasing staffing levels during both the day and night times.

Using medicines safely

- People were supported to receive their medicines safely.
- People received their medicines on time and in an appropriate manner. Staff had received training and observation to ensure they dealt with medicines safely.
- There were some minor issues with records relating to medicines. We spoke with the service delivery lead to address these.
- Following the inspection, we received anonymous concerns about a recent use of medicines. The registered manager investigated the matter and reassured us that appropriate action had been taken and no harm had come to people.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- Staff supported people to maintain their homes and communal areas in a clean and tidy manner. Staff had access to personal protective equipment (PPE) when supporting people with personal care.

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- The provider had in place a process to review incidents or accidents. There had been no recent serious injuries at the service.
- The registered manager had investigated a recent medicines error. Appropriate action had been taken, including staff competencies reviewed.

Is consent to care and treatment always sought in line with legislation 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.

- The service delivery lead was aware of applications to the Court of Protection to deprive some people of their liberty. No final decisions had been made, but the service delivery lead monitored the situation.
- A relative told us they were always involved and consulted about key choices. They told us, "I am always present at any reviews and always involved in decisions."
- Staff were aware of the need to seek consent at all times from people. We witnessed staff seeking agreement that we could visit people's rooms, as part of the inspection, and during other aspects of care. Best interests decisions were made, in conjunction with the local authority for any major purchases.

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 has remained Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- There was a positive and open culture at the service.
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- People were supported to achieve positive outcomes in their daily lives. Staff had a good understanding of people's preferences and interests and how best to support them. Relatives said people were well supported. One relative said, "Overall they are well cared for. I can't think any thing would make it better."
- Care records included photographs of people enjoying activities, demonstrating their engagement in events both in their home and out in the community.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider understood their responsibilities under the duty of candour.
- The registered manager showed us documents relating to a medicines error. Whilst no harm had come to the individual, they had written to the person's family apologising and setting out what had been done to prevent future issues arising.

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- The registered manager and service delivery lead undertook a range of audits and checks on the service and care delivery. These included checks on medicines management and personal finances.
- The provider's quality team also carried out a range of monitoring visits and oversight of the service and worked with the registered manager to address any issues.
- Staff told us they were well supported by the management within the service. They said the service delivery lead was helpful, supportive and approachable. Comments included, "(Service delivery lead) is a good manager - if there is a problem, they try their best to resolve it" and "The best manager I've worked with so far. Very considerate."

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

- People and staff were involved in the running of the service and fully understood and took into account

people's protected characteristics.

- People were supported to make day to day decisions including meal choices and activities they wished to be involved in. Staff supported people to raise issues about the maintenance of the property with their landlord.
- A care manager told us people had looked well cared for when they visited and seemed fully engaged in their care.
- Staff told us there were regular staff meetings and they were encouraged to be part of the service improvement. The service delivery lead had recently appointed a staff member to lead on staff engagement. A staff member told us, "It is good working here - we work like one family. We have regular staff meetings."

Continuous learning and improving care

- The provider had created a learning culture at the service which improved the care people received.
- Staff told us they were encouraged to develop their skills and continuously learning, as part of their everyday work. One staff member told us, "I think things have improved since I originally started as agency staff. I've seen changes and improvements since (service delivery lead) has arrived."
- The service had been visited by the local authority in February 2023 and had noted a small number of actions that needed to be addressed. The provider had taken step to make the suggested improvements, such as reviewing and increasing staff at the service.

Working in partnership with others

- The provider worked in partnership with others.
- Records showed that the service worked with a range of other services to ensure people's care and health and wellbeing were fully supported.