

Homes 2 Inspire Limited

Trevone House

Inspection report

22 Denmark Road
Gloucester
Gloucestershire
GL1 3HZ

Tel: 01452937220
Website: www.homes2inspire.co.uk

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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

Trevone House has two registered places (known as 'well-being suites') within the service providing the regulated activity of accommodation for persons who require nursing or personal care. The well-being suites have been commissioned primarily to support young people who require additional support following a mental health assessment or as a step-down from secure accommodation. At the time of our inspection there were two young people using the service.

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

Since our last inspection, the registered manager had taken action to review each person's risk and medicine management plans, implemented effective safe infection control and developed quality assurance systems to monitor the quality care being delivered to young people who live at Trevone House.

Staff had access to comprehensive care and risk management plans to guide them in the strategies to support young people. There was a balanced approach to support people to reach their potential and manage any associated risks. Effective and clear systems had been implemented to report any concerns or incidents to the registered manager and the commissioners.

Safe medicines management processes were in place. The provider had sought advice from the local health protection team and has implemented safe infection control practices which reflect current guidance.

Young people were supported by staff who knew them well. The provider had ensured that all staff had been suitably vetted and trained to support young people.

The managers and staff were passionate about supporting young people to develop holistically. Relatives praised the support of Trevone House and how staff had taken steps to implement safe strategies to enable their family member to achieve their goals.

Governance and auditing processes had been implemented to enable the register manager and provider to monitor the service and drive improvements.

The provider was reviewing their policies to reflect the working arrangement within Trevone House.

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 requires improvement (published 22 July 2022).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in

breach of regulations.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 9 June 2022. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment and governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

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.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Trevone House 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.

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.

Trevone 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.

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

This inspection was carried out by 1 inspector.

Service and service type

Trevone House is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Trevone House is a care home with 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

This inspection was unannounced.

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 reviewed information we had received about the service since the last inspection and their action plan. We sought feedback from the local authority and professionals who work with the service. We used all this information to plan our inspection.

During the inspection

We spoke with the relatives of the young people who used the service. We spoke with 2 representatives from the provider, the registered manager (virtually) and 1 nurse.

We reviewed a range of records. This included 2 young people's care records and medication records. We looked at staff and agency staff files in relation to recruitment and staff training. 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.

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 Requires Improvement. At this inspection the rating has changed to Good. This meant people were safe and protected from avoidable harm.

At our last inspection the provider had failed to effectively implement safe risk management, medicines management and infection control practices putting people at risk of harm. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

Assessing risk, safety monitoring and management; Using medicines safely

- Young people were safely and effectively supported to manage their personal risks and medicines.
- The risk assessments and support plans for young people living in the registered beds at Trevone House had been reviewed. The risk management plans described each person's personal risks, things which were important to them, and indicators which may suggest changes in their mental well-being.
- Staff had access to each person's risk and support plans. They were aware of their current support strategies and any required interventions if young people showed a decline in their mental health or other risks. Information about preventative measures, agreed support strategies and actions staff should take to minimise the risks to the young people were documented to guide staff.
- Staff were aware of how to support young people to reach their potential and achieve positive outcomes. There was a balanced approach to enable the young people to retain their independence, respect their privacy whilst managing any associated risks.
- Each young person was involved in developing their own wellness and support plan and to develop and implement their own coping strategies. We were provided with several examples of how the young people had reached some of their personal goals and the reduction of self-harm related incidents.
- Safe medicines management processes were in place. Medicines were securely stored, managed and accounted for. Records of the medicine administration of young people's prescribed medicines were recorded with no gaps.
- We identified mid-cycle medicine (medicines which are prescribed after the start of the current cycle) and personalised PRN (as required medicines) protocols were not in place to guide staff on when 'as required medicines' and new medicines should be administered. A representative of the provider said they would implement the protocols as a priority.
- Young people were referred to their relevant mental health consultant if it had been assessed by the register manager and staff that their medicines were not effective.

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 supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were somewhat assured that the provider was making sure infection outbreaks can be effectively prevented or managed. We have signposted the provider to resources to guide staff on what action they should take when an infection outbreak is suspected or identified.
- We were assured that the provider's infection prevention and control policy was up to date.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place which safeguarded young people from harm and abuse.
- Staff had been trained in safeguarding adults and children. They were aware of their responsibilities to protect young people from abuse and behaviours which may cause them harm and exploitation from others.
- Systems were in place to report any concerns or incidents to the registered manager and the commissioners.
- Relatives told us they felt their family member was safe living at Trevone House.

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

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty and any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- There were sufficient numbers of suitably qualified staff to meet young people's needs at Trevone House and to support them to stay safe.
- Young people were supported by regular agency staff who knew them well.
- The provider had ensured themselves that all agency staff had been suitably vetted and trained to support young people.
- The registered manager was passionate about ensuring that staff with the right skills, attitude and values were employed to support young people with complex mental health needs.
- The provider and registered manager were aware of their responsibilities to safely recruit new staff.

Learning lessons when things go wrong

- All incidents relating to young people's mental health and their behaviours were recorded and reviewed twice a week by the registered manager, multidisciplinary team and shared with key mental health professionals and commissioners.

- Where young people had shown signs of deteriorating mental health, the registered manager had liaised with key professionals who knew young people well to seek support and to guide staff to effectively respond to their changing support requirements.
- The registered manager and staff carried out reflective practices to identify the cause of changes in young people's mental health, behaviours and general welfare.

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 Requires Improvement. At this inspection the rating has changed to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last inspection the provider had failed to implement quality assurance and governance systems to monitor the quality of the service. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

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

- Since our last inspection, the registered manager had developed and implemented a range of audits which enabled them to assess, monitor and improve the quality and the safety of the service being provided. Audits of young people's care of was carried out weekly such as; medicines and the contents of emergency bags which would be used in the event of an emergency.
- Effective systems were being used to monitor and manage the health and safety of the building, such as monitoring fire and water systems.
- The registered manager had ensured that records relating to the support of the young people, the management of staff and running of the service were complete and detailed.
- Additional scrutiny and monitoring by the provider and commissioners also ensured the quality and safety of the service was being maintained.
- The registered manager had implemented systems to supervise, train and assess the knowledge of staff who supported young people.
- A clear communication system had been established to report/escalate any emerging risks of young people within the organisation or to relevant external services as appropriate.
- The provider had recognised their policies did not fully reflect the recent changes in the working arrangements at Trevone House. We discussed this with the provider and were assured they had plans in place to review all the provider's policies to reflect the current and future operating procedures at Trevone House.

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

- The provider had promoted a culture which ensured young people received effective care based on current best practice with the aim to achieve good outcomes for people.
- Through a dedicated support team and good links with the health, social and educational services, young

people had showed significant improvement in their mental health and own personal achievements.

- Young people's relatives praised the progress that their family member had achieved at Trevone House including educational and housing.
- Staff acknowledged and respected people's rights. Their protected equality characteristics were always considered and respected.

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

- Young people were involved in the decisions relating to the health and social care needs. Resident meetings were held regularly so young people could offer their views and remain updated with any changes made within the service.
- Staff stated that communication had improved, and they felt supported and fully informed of young people's support 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; Working in partnership with others

- The registered manager valued feedback from young people, staff and other key stakeholders. They had developed systems to support and evaluate learning from incidents and events to help them drive improvement.
- Staff worked in partnership with young people, relatives and key health care professionals. There was a strong multi-disciplinary approach to support the care of young people who were progressing in their well-being and transitioning to adulthood. The registered manager shared appropriate information and assessments with other relevant agencies for the benefit of young people who lived at Trevone House.
- The registered manager was clear about their responsibilities for reporting certain events and incidents to CQC and they understood the regulatory requirements. They had worked openly and transparently with professionals, young people and relatives.