

Horizon Integrated Rehabilitation Limited

Horizon House

Inspection report

120-122
Columbus Ravine
Scarborough
YO12 7QZ

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16 June 2022

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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

Horizon House is a residential care home providing personal and nursing care for up to seven people. The service provides support to older people and younger adults who have mental health needs. At the time of our inspection, there were seven people using the service.

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

People were safe. Systems and processes were in place to protect people from the risk of abuse. Risks to people had been assessed and recorded. Records did not always contain information of all action that had been taken to manage risks. We made a recommendation about risk management.

People received person-centred care from a staff team who were knowledgeable about their likes, dislikes and preferences. People had care plans in place, which outlined their goals and desired outcomes. Records did not always evidence progress people had made. We made a recommendation about care planning and recording outcomes.

People were supported by trained staff who had been recruited safely. Staffing levels were adjusted according to people's daily support needs, which encouraged social interaction.

The service was clean, tidy and had a homely feel. Staff followed Personal Protective Equipment (PPE) guidance and medicines were managed safely.

People were encouraged to be as independent as possible. They 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.

Professionals spoke highly of the service and the positive impact it had on people's lives. Professionals described a dedicated staff team who worked in partnership with professionals to meet people's needs.

Staff spoke positively of the registered manager and their approach. There was a wide range of audits in place which were used to continuously monitor and improve the service. Feedback from people, relatives, staff and professionals was valued and used to drive improvements.

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

Rating at last inspection

This service was registered with us on 30 November 2020 and this is the first inspection.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Horizon 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

The inspection was undertaken by two inspectors.

Service and service type

Horizon 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. Horizon 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 service is required to have a registered manager. A registered manager is a person who has registered with the CQC 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 unannounced.

What we did before the inspection

We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We reviewed a range of records. This included three people's care records and two people's 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 also reviewed.

We spoke with five members of staff including the registered manager, deputy manager and three support workers. We had a tour of the service and spent time observing staff interactions with people. We were not able to speak with people who used the service as they did not wish to engage with the inspection process.

Following the inspection site visit we contacted a number of professionals to ask their views on the service provided. Four professionals provided us with feedback.

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. This key question has been rated Good. 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 had been identified and recorded. Risk management plans were in place and had been regularly reviewed.
- Records did not always contain details of all actions that had been taken to mitigate risks. However, staff were extremely familiar with people, associated risks and how these were to be managed.

We recommend the provider considers current best practice guidance in relation to risk management and recording and update their practice accordingly.

- Maintenance and servicing had been completed as required to ensure the service remained safe. Prompt action was taken when any shortfalls were found.
- A comprehensive system was in place to monitor accidents and incidents to prevent reoccurrences. Any lessons learnt were shared with the staff team.

Systems and processes to safeguard people from the risk of abuse

- Systems and processes were in place to safeguarding people from the risk of abuse.
- Staff had received safeguarding training and had a thorough understanding of their roles and responsibilities in relation to reporting any suspected abuse.
- People were comfortable in the presence of staff and positive engagement took place. Relatives and professionals who visited the service on a regular basis felt people were safe. Comments included, "This is a safe place for [Person's name] to be. I have always been highly impressed with staff and the interaction they have with [Person]."

Staffing and recruitment

- Safe recruitment processes were in place and followed. All appropriate pre-employment checks had been completed before staff started working in the service.
- There was a sufficient number of staff on duty to meet people's needs. There was a person-centred approach to staffing levels. These were adjusted in accordance with people's preferences and when they wished to access the community.

Using medicines safely

- Medicines were stored, administered and recorded safely.
- Staff had received appropriate medicines training and had their competencies in this area assessed.
- Some people were able to manage their own medicines. They had been provided with equipment, such as fridges to ensure medicines could be stored appropriately in their bedrooms.

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured 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 the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up-to-date.

Visiting in care homes

- Visits to Horizon House were in line with government guidelines. No restrictions were in place.

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 for this newly registered service. This key question has been rated 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

- People's needs were thoroughly assessed before admission to ensure the home could provide appropriate support. A professional told us, "I had lots of meetings with the registered manager prior to [Person's name] moving to Horizon House. The registered manager wanted to ensure their needs could be met safely. The admission was very well-planned putting [Person's name] at the centre."
- People's needs were continuously assessed to ensure plans in place remained relevant.

Staff support: induction, training, skills and experience

- Staff received an induction when they joined the service. They worked alongside other staff until they were familiar with people's care and support needs.
- Staff had been provided with mandatory training as well as training specific to people's medical conditions.
- Staff felt supported within their role. Comments included, "The registered manager is very hands on. They are always around and available whenever I need support."

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

- People were supported to maintain their independence and improve their daily living skills in many areas including planning and preparing meals. Staff promoted a healthy, balanced diet.
- People had open access to a kitchen where they could prepare meals of their choice with support from staff. People used the kitchen throughout the inspection to make meals, snacks and refreshments of their choice.

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

- Professionals who visited the service on a regular basis provided extremely positive feedback about how staff worked with other agencies to ensure people's care needs were met. Comments included, "Staff communication is excellent. They always keep me informed of any changes or if a change in support is required" and, "I have seen a massive improvement in [Person's name] self-care and social skills. They have gone from a nervous person to a much more confident, chatty and sociable person. I can't praise the staff there enough for what they have achieved with [Person's name]."
- The staff team had built strong working relationships with all professionals. They were aware of who to contact should they have any concerns. Records showed that when concerns had been identified, professionals had been contacted immediately.

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

- The service had been adapted and designed to meet people's needs.
- There was a homely feel throughout the service with plenty of communal areas and quiet spaces for people to enjoy. People were free to personalise their bedrooms as they wished.
- The communal kitchen was of a commercial design and not in keeping with the rest of the home. Plans were in place for this to be placed.

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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The principles of the MCA had been followed.
- We found one example where a DoLS had not been requested when a person was being deprived of their liberty. The registered manager explained this was due to an error in communication between the person's previous placement and the home. Action was taken to address this.

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 for this newly registered service. This key question has been rated 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 were treated well and supported in accordance with their assessed care and support needs.
- Staff treated people with compassion and kindness. They engaged in meaningful conversation with people and addressed people in their preferred way. Staff were respectful of people's protected characteristics.
- Observations showed staff were familiar with people's needs and they adapted their approach accordingly.

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

- People were fully involved in any decisions about their care and support.
- People were supported to live according to their wishes and values and had access to advocacy support if this was needed. An advocate acts to speak on a person's behalf when they may need support to make sure their views and wishes are known.

Respecting and promoting people's privacy, dignity and independence

- There was a strong emphasis on ensuring people were able to maintain their independence and develop their daily living skills. Positive risk taking was embedded in practice.
- People were treated with dignity and respect by staff who were kind and caring in their approach.
- People's privacy and dignity was respected. Staff were respectful when people wished to spend time alone. One member of staff said, "People's privacy is massively important and all staff here respect that. We know everyone is different and, because we know people so well, we adapt our approach accordingly. It all helps achieve positive outcomes for people."

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 for this newly registered service. This key question has been rated Good. 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 personalised care and support from a team of staff who were familiar with their needs and preferences. Staff were able to clearly describe progress people had made since moving to the service.
- Care plans were in place. These contained person-centred information and had been regularly reviewed.
- Where people had set goals and outcomes, these were recorded. However, records did not clearly evidence progress people had made. We discussed this with the registered manager who agreed to ensure this was appropriately recorded moving forward.

We recommend the provider considers current best practice guidance in relation to care planning and recording outcomes and takes action to update their practice accordingly.

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.

- Information was provided to people in their preferred way.
- Care plans provided detailed information in relation to people's communication needs.

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 were supported to build and maintain social relationships. Staff were familiar with relationships that mattered to people.
- Staffing levels were adjusted to ensure people could be supported to access the community and follow their interests.
- Risk management plans were in place to ensure people's independence was promoted in relation to social relationships, whilst ensuring they remained safe.

Improving care quality in response to complaints or concerns

- A complaints policy and procedure was in place. Processes had been followed when any formal complaints had been made.
- People were able to raise concerns in a number of different ways. Relatives were confident any concerns

would be addressed promptly.

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 for this newly registered service. This key question has been rated 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; 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 registered manager understood requirements in relation to duty of candour and had an open and honest approach.
- People were happy living at Horizon House. There was a warm, welcoming and relaxed atmosphere.
- Staff described a positive culture within the service. They told us they were supported by an open and honest management team who were very supportive. Comments included, "The registered manager is committed to this home and the staff. They really do go above and beyond and nothing is ever too much trouble. I feel I could raise anything with them, and I would be listened to."

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

- The registered manager was clear about their roles. They had effective systems in place to ensure compliance with regulatory requirements.
- A robust auditing system was used to monitor the quality and safety of the service provided.
- Any lessons learnt were shared with the staff team to prevent reoccurrence and improve the service being provided.

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

- People were encouraged to regularly share their views on the service provided. When people had shared their views, these had been listened to and acted upon.
- People were kept up to date with any changes within the service. Friends and relatives were able to visit when they wished, and staff supported people to socialise with others.

Working in partnership with others

- The registered manager had developed strong working relationships with a number of professionals.
- Professionals had confidence in the registered manager and staff team and described the support they were providing as 'life changing'.
- Professionals involved in people's care and support were contacted in a timely manner whenever changes occurred. The registered manager ensured regular multidisciplinary meetings took place to help achieve positive outcomes for people.

