

# Mrs Janet Brewer







# Trezela House

## Inspection report

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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	

## Overall summary

We inspected Trezela House 14 and 15 January 2015, the inspection was announced the day before the visit, this was to ensure people would be present at the service on the day of inspection.

At the last inspection in November 2013 we did not identify any concerns.

Trezela House provides accommodation and personal care for up to eight people who have mental health needs. The home is privately owned. The home has a registered manager in place. A registered manager is a person who has registered with the Care Quality

Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People were happy and relaxed on the day of the inspection. We saw people moving around the home as they wished, interacting with staff and relaxed and engaged in their daily activities. Staff were attentive and available and people had free access to all areas of the

# Summary of findings

service but did not restrain people or prevent them from going where they wished. We saw staff encouraged people to engage in meaningful activity and spoke with them in a friendly and respectful manner.

Care records were detailed and contained specific information to guide staff who were supporting people. Care profiles were developed in a format which was more meaningful for people. This meant staff were able to use them as communication tools. Risk assessments were in place for day to day events such as using a vehicle and one off activities. Where activities were done regularly risk assessments were included in people's care documentation.

Relatives told us Trezela House was a caring environment and staff had a good understanding of people's needs and preferences. We found staff were knowledgeable about the people they supported and spoke of them with affection.

The service adhered to the requirements of the Mental Capacity Act (2005) and the associated Deprivation of Liberty Safeguards which aimed to protect people's rights to make decisions for themselves and to be respected to leave the service if they requested to do so and were not legally prevented from doing so.

People had access to a range of activities. These were arranged according to people's individual interests and preferences. Staff recognised when people became bored with activities and helped them identify new interests.

Staff were well supported through a system of induction and training. Staff told us the training was thorough and gave them confidence to carry out their role effectively. The staff team were supportive of each other and worked together to support people.

People knew how to raise concerns and make complaints. People told us concerns raised in the past had been dealt with promptly and satisfactorily.

Incidents and accidents were recorded. These records were reviewed regularly by all significant parties in order that trends were recognised. This helped staff to keep people safe at the service.

There was an open and supportive culture at Trezela House. Staff and relatives said the registered manager was approachable and available if they needed to discuss any concerns. All staff felt they were fully appreciated by the management and had an understanding of the day to day demands on them.

# Summary of findings

## 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. Staff were confident they could keep people safe whilst supporting them to take day to day risks.

Staffing levels were adequate given the level of independence of people who lived at Trezela House.

Systems in place for the storage and administration of medicines were robust.

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### **Is the service effective?**

The service was effective. Staff were well trained and knowledgeable about the people they supported.

The registered manager displayed a good understanding of the requirements of the Mental Capacity Act (2005) and associated Deprivation of Liberty Safeguards (DoLS). These safeguards aimed to protect people's rights to make decisions for themselves and to be respected to leave the service if they requested to do so and were not legally prevented from doing so.

People were supported to access a range of health services as necessary.

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### **Is the service caring?**

The service was caring. Staff spoke about people fondly and demonstrated a good knowledge of people's needs.

People's preferred method of communication was taken into account.

People's privacy and dignity was respected.

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### **Is the service responsive?**

The service was responsive. Care records were detailed, informative and regularly updated to ensure the service met people's needs.

People had access to a range of activities both in the home and the local community. These were planned in line with people's interests.

The service had a satisfactory complaints policy in place which was adhered to, to ensure the service met people's needs.

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### **Is the service well-led?**

The service was well led. There was a strong and supportive staff team in place.

People and their relatives were regularly consulted about how the service was run. This ensured people felt part of the service and could input their feelings into how the service was managed.

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# Trezela House

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on January 14 and 15 and was announced the day before the visit, this was to ensure people would be present at the service on the day of inspection. The inspection was carried out by one adult social care inspector.

We reviewed the Provider Information Record (PIR) and previous inspection reports before the inspection. The PIR was information given to us by the provider and contained some key information about the service. This enabled us to

ensure we were addressing potential areas of concern and identify any examples of good practice. We also reviewed the information we held about the service and notifications we had received. A notification is information about important events which the service is required to send to us by law.

We looked around the premises and observed how staff interacted with people throughout the day. We also looked at care records relating to people's individual care. This included two care plans. We also read records associated with the management of the service including quality audits.

We spoke with two members of staff, the registered manager and an adult social care diploma student. We contacted five external healthcare professionals to gather their views on the service. We spoke with six people who used the service and three relatives.

# Is the service safe?

## Our findings

Relatives told us they were happy with the care and support their family member received and believed it was a safe environment. One commented; “I do think my relative is safe at Trezela House. In my opinion they do a great job”. Another told us; “All the experiences I have had with Trezela House, they have been excellent. I couldn’t fault them.”

Most people told us they were ‘very happy’ with the support they received at the service. One person was unhappy with their legally enforced accommodation placement but conceded it was not the fault of Trezela House. We observed people were relaxed and at ease with staff, and when they needed help or support they turned to staff without hesitation. During our visit the manager was available at all times to both staff and people who lived at the home.

The home had a safeguarding policy and records showed most staff were up to date with their safeguarding training. Staff were confident they knew how to recognise signs of abuse, they told us they would report any suspected abuse and felt assured these would be taken seriously by the registered manager. Most staff knew who to contact externally if they felt any concerns were not being acted on. A member of staff told us; “I would not have a problem calling the Local Authority safeguarding team if I felt it was necessary.”

Staff told us they supported people to take day to day risks whilst keeping them safe. For example, one person regularly went into the local town by themselves or accompanied by another person who also lived at Trezela House. Staff were assured people would be safe because they had previous exposure to doing this while supported by staff and they also kept the contact details and telephone number of the home in case it was required. The registered manager told us, “Wadebridge is a small town and people make residents from Trezela House welcome and supported in the town”.

. The registered manager demonstrated high expectations for people in their conversations with us. They commented; “We’re always looking to move people forward appropriately.” Care plans contained risk assessments which were appropriate for that person and gave staff clear guidance on how to minimise risk. The registered manager told us that when considering new activities for people they

balanced the risks involved against the likelihood of them happening in order to support people to try new things. For example, one person had recently been horse riding. A risk assessment had been developed in respect of this. If the activity was taken up regularly the assessment would be updated and incorporated into the person’s care plan.

Staff were knowledgeable about people who had complex needs that might challenge others. Information regarding signs of anxiety was recorded in care plans which directed staff as to how they could recognise signs and take steps to avoid people becoming distressed or anxious. Incidents and accidents were recorded appropriately during and after an incident and the information was reviewed and analysed regularly to identify any common triggers. Action taken to diffuse a situation was also recorded in order that the staff team could learn from the experience.

At the time of the inspection Trezela House had a stable staff team who had worked at the service for a long time. Trezela House had a robust recruitment process. Staff recruitment files contained all the relevant recruitment checks to show staff were suitable and safe to work in a care environment. The registered manager told us, “We only employ competent people with experience and knowledge to meet residents’ needs”. Staff told us they felt there was an adequate number of staff to ensure people’s needs were met. One staff member commented, “I do think we have sufficient staff to meet people’s needs. The way the shifts work we normally have two staff on and the majority of people are independent. It works just fine and people are out quite a lot too” At the time of the inspection people were supported appropriately and their needs were met in a timely fashion. In addition, two people who lived at Trezela House received funding for a number of one to one hours with a staff member. We looked at the plans for this one to one time and saw both people used it to access activities in the community. Relatives we spoke with all said they believed there were sufficient numbers of staff to meet people’s needs. One relative commented, “They are a good staff group. Supportive without being over the top and there is always someone on hand if they are needed”.

Safe arrangements were in place for the administration of medicines.. Medicines were stored securely in a locked cupboard. Medicines were administered by trained staff and all staff had up to date medicines training. We checked the Medicines Administration Records (MAR) for one person and found the number of medicines stored tallied with the

## Is the service safe?

number of medicines recorded. One person took responsibility for administering their own medication. This had been risk assessed appropriately and audited procedures were in place which ensured the safe practice of this. This person told us, “I am able to look after my own tablets. I have a secure cabinet in my room where I keep everything. I don’t need any support with this”.

There was clear guidance for staff when administering ‘as required’ medicines (PRN). For example we saw

descriptions of the behaviour that might preclude the necessity of administering the medicines with guidance for how to administer and who to inform. This meant there was clear guidance to help ensure a consistent approach from the staff team.

Are you able to add more of the user voice throughout, for example how people were involved in managing risk, what people felt about staffing numbers and skilled, were people involved in their medicines etc?

# Is the service effective?

## Our findings

Over the two day period of the inspection we saw people have a number of meals. Staff told us people were fully involved in choosing their meals in a variety of ways. For example at breakfast time people had a choice of options including cereals and spreads or a cooked breakfast, enabling people to make meaningful choices. When planning meals ahead of time people's preferences were taken into account and people were encouraged to go shopping with the provider if they wanted to. The registered manager told us, "one or two people usually go shopping each week". Menus were planned on a monthly basis ahead of time, however, people were free to choose an alternative meal if they wanted to. One person told us, "We are normally asked during our residents meeting what we want on the menus". Another person told us, "Food is good here. It's all healthy". People prepared their own lunch independently if they could. People told us they happily got involved in food preparation for evening meals and assisted with cleaning up afterwards.

Relatives told us they had eaten with their family member at the home and found the meals to be good and healthy. One person followed a restricted diet due to a health condition and another person followed a vegetarian diet. Both people told us they were happy with the food provided at Trezela House. A relative of a person who lived at the home told us, "They seem to eat very well. Food is freshly prepared each day and I haven't heard anyone complain about it".

The home followed the recording procedures detailed in the 'Safer Food, Better Business'. This is a Food Standard Agency publication for specific businesses including residential care homes to help caterers and staff prepare and cook safer food. Cornwall Council had undertaken a food hygiene inspection report in November 2014. Overall the report was satisfactory and the service achieved the top food hygiene rating of five. There were a number of improvement recommendations made in the report including having a health and safety policy in place for the home. This had been actioned appropriately.

On starting work for Trezela House staff underwent an induction training programme which introduced new staff into the policies and procedures for working at the home. The registered manager told us one staff / student? had recently completed an induction and had started work at

Trezela House as a placement while undergoing adult social care diploma studies. We spoke with this staff / student? who told us they were happy with their work and confirmed they had received an induction when they started work. This comprised of a mixture of familiarisation with the home and people's needs and a period of shadowing other staff members in the home. We spoke with a new member of staff who described the induction as; "a very good introduction."

Relatives told us they found staff were knowledgeable and competent. Staff had regular training, both in areas such as first aid, infection control and food hygiene and in areas specific to the needs of the people living at Trezela House. For example positive behaviour management and working with people with complex needs. Staff told us, "This is a very good place to work and I am well trained and supported to be able to support the people who live here". In addition, one staff member told us they had attended training in a course directed at 'choice, control and personalisation' which had been hosted by Cornwall Local Authority. We asked the staff member how this had impacted on their work at Trezela House. We were told, "People have choice in everything here really, but we did set up a new system for people to make their own lunches. We also began more activities with people, such as crafts, making Christmas cards and birthday cards and Halloween decorations. People have really enjoyed this".

Staff confirmed they received informal supervisions regularly and annual appraisals. All members of staff said they felt well supported in the home by their immediate manager. The registered manager told us, "We do have a committed, caring staff team here".

When appropriate, people were assessed in line with the Deprivation of Liberty Safeguards (DoLS) as set out in the Mental Capacity Act 2005 (MCA). The MCA is a law about making decisions and what to do when people cannot make decisions for themselves. DoLS is for people who lack the capacity to make decisions for themselves and provides protection to make sure their rights are upheld. The registered manager was up to date with recent changes to the law regarding DoLS and had a good knowledge of their responsibilities under the legislation. Care records showed where DoLS applications had been made. They evidenced the registered manager had followed the correct processes including best interest

## Is the service effective?

meetings with input from families and professionals involved in the decision. The decision was clearly recorded to help ensure staff adhered to the requirements of the authorisation.

People had access to a range of healthcare services as required. For example dentists, opticians and GP's. All were offered an annual health check. Staff talked appropriately to people about medical appointments they were due to attend and gave people reassurance and confidence about what would happen during appointments. For example, one person told us they were due to go for a breast examination and it was clear from our conversation that

they had been reassured and appropriately informed about what to expect. This gave the person confidence to attend the medical appointment. The registered manager told us, "Staff always support people if they need to access services such as hospital. We spoke with the GP practice who had most regular contact with staff and people who lived at Trezela House. We were told, "Generally we are very happy with them. On the whole the residents are very happy there. I have found the management and staff there very responsive and quick to get us involved when required. They make appropriate referrals to primary practice".

# Is the service caring?

## Our findings

The atmosphere at Trezela House was relaxed and friendly. People were relaxed and happily engaged in their daily activities. We saw one person went into town for a walk. Another person bought a DVD they thought others would enjoy watching. We saw people happily joined the person in the lounge to watch the film.

People told us they thought Trezela House was a caring service. Comments included; "I like it here. Staff are very kind. I shall probably see out my days here". Another person commented, "It's a really good service that it helping me gain back my independence". Relatives with told us, "(Person) seems very happy". Relatives said they visited freely and were always made to feel welcome. One said; "I am always made to feel welcome and offered a cup of tea whenever I visit". There were opportunities for relatives to see their family member in private if they wished. A relative told us their family member enjoyed singing in a local choir and enjoyed church services which the home respected and supported the person to do.

Staff spoke fondly of the people they supported. Comments included; "We're very proud of the strides forward people have taken while living here. Every resident comes first and people are at the centre of what we do and what we are here for". Another staff member told us, "It's just great to see them progress". The registered manager told us about people's backgrounds and described the progress they had made and the pride she took in their achievements. An external healthcare professional told us, "The staff group are caring and supportive and seem to do their very best for everyone who lives there".

We saw many positive interactions between people and staff throughout the inspection. One person told us, "They're nice here. I enjoy cooking and baking and they've really helped make this possible for me". Staff knew the people they supported well. Care records contained information regarding people's personal histories and detailed background information. This enabled staff to gain an understanding of what had made people who they were today and the events in their past that had impacted on

them. People had dedicated key workers who were responsible for updating care plans and leading on supporting people. These were chosen according to their experience and relationship with the person concerned. Staff were able to talk about the people they supported knowledgeably. For example one member of staff told us; "If [person's name] is worried about anything they will sometimes stay in their room all day. We would check on them and try and reassure them if possible".

Because of some people's complex health needs staff used a variety of ways to communicate with people. We saw staff would consistently offer visual choice, particularly of food. This helped people make a personal choice about what they ate. Pictures and photographs were also used to help people make choices and supplement information, for example within care documentation.

We visited two people in their rooms. People's rooms were decorated to reflect the person's taste. Staff asked the person if they were happy for us to visit them and they showed us their bedroom and indicated to us that they liked their living area.

People's privacy and dignity was respected. People were free to move about the home and spend time with others or by themselves as they chose. We saw people freely left the service to go shopping or for a walk during both days we inspected. People told us they felt their privacy and dignity were always respected. A relative of a person who lived at Trezela House told us, "It's the best place for (person). (Person) is free to come and go as they want, they have a lot of independence but at the same time they have people to support them and they do this very well, I think".

People had access to advocacy services and Independent Mental Capacity Advocates (IMCAS). An IMCA is a type of advocacy introduced by the Mental Capacity Act. An IMCA or Independent Mental Capacity Advocate provides independent support in relation to important decisions for people who have been assessed as not having the mental capacity to make decisions for themselves. This may be around managing finance or making a decision about where a person lives. We saw an IMCA had been arranged in the past when one person was considering a move.

# Is the service responsive?

## Our findings

Relatives told us they felt they were fully involved in the care planning process and were kept informed of any changes to people's needs.

Care records contained detailed information about people's health and social care needs. Plans were individualised and relevant to the person. Records gave clear guidance to staff on how best to support people. However, we did note that the review process for some people was behind the monthly schedule set down by policy and procedures at the home. A staff member acknowledged the review process had 'fallen behind' due to them being away from the home. The registered manager told us they would ensure all reviews were updated following the inspection. People told us they were included in care plan reviews which they undertook with their 'key worker'. This was an allocated staff member who was responsible for working with the person to ensure their needs were met and reflected their current situation.

People were supported to take part in a wide range of meaningful activities both in and out of the home. For example people attended work placements, choir rehearsals, local community groups, local walks and had passes to local amenities such as the Eden Project. People were supported to use local amenities such as shops and cafes and the registered manager told us people were well known in the local community.

The service had a policy and procedure in place for dealing with any complaints. This was made available to people and their families. Relatives we spoke with told us they knew how to complain and they would be confident that any complaints they had would be dealt with. They described the registered manager as approachable and available if there were any issues they wanted to discuss. The registered manager told us one relative had raised a concern about the continuity of staffing and we saw from records that this had been responded to in a timely manner. Concerns could be raised verbally or in writing, using the service complaint form. The service policy set down the timelines for handling all complaints. The registered manager told us most people were capable of raising their complaint verbally with staff. One person told us, "I tell staff if there's something I'm not happy about". Another person gave us an example of an issue they had raised about moving to another town. The service had worked with other professionals to facilitate this and the person had visited alternative places they were considering a move to in order to be closer to family and friends.

There were thank you cards in care files and on the notice board in the office. One stated; "Many thanks as always for looking after [relative's name] so well."

# Is the service well-led?

## Our findings

Staff described to us an open and supportive culture at Trezela House. All referred to the closeness and supportive nature of the staff team. They said the registered manager was available and accessible and one commented that they discussed; “anything and everything.” The registered manager told us, “We try and make Trezela House as lovely and as happy as we can. It is people’s homes”. Staff described the team as “close knit” and said they were a close team. Staff said they believed the registered manager was aware of what went on at Trezela House on a day to day basis. The provider was a regular presence at the service and was involved in the running of the home. Professionals who were involved in the lives of people who lived at the home spoke positively about how the home was run. One external professional told us, “The management are very good at keeping us involved of relevant things which involve people who live at Trezela House. I have no problems with the service at all”.

Staff meetings were held regularly and staff told us these were an opportunity for them to raise any concerns or ideas they had. They felt their ideas were listened to and acted upon. For example a staff member told us, “One resident is a vegetarian and we encourage (person) to take an active role in choosing and preparing their own food”. Staff told us this was something they had discussed to ensure the person had access to a varied vegetarian diet.

Staff said they felt they were kept up to date with current guidance and the registered manager told us head office passed any relevant information directly to managers across the organisation.

Relatives told us they were pro-actively encouraged to approach the registered manager with any concerns or ideas they might have. They told us the registered manager was; “Always available”. One person commented, “I speak to management regularly and I find them very open and approachable”.

The registered manager and staff told us they were continually gathering the views of people who used the service. They did this formally via residents meetings and through the forum of key worker meetings. Staff said the most reliable way of ascertaining people’s satisfaction was by observing and monitoring behaviour. This was recorded in a variety of ways including daily logs and incident sheets. This helped to capture people’s views and allowed staff to build up a comprehensive picture of how people felt about the service they received. Discussions between the provider, registered manager and staff team considered the learning from the collected information. This allowed the service to learn from and adapt the service to meet the needs of the people who lived at Trezela House

The registered manager told us they had regular supervision and attended monthly managers meetings. They told us they felt well supported in their role; “I’ve always had very good support.”

There was an effective quality assurance system in place to drive continuous improvement within the service. Audits were carried out in line with policies and procedures. For example, the service regularly audited medicines to ensure people had received their prescribed medicines. Medicine stocks were checked against MAR records to ensure stock levels were accurate. Other auditing procedures included health and safety checks and infection control procedures.

This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

This section is primarily information for the provider

## Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.