Beau Sejour Residential Care Home Limited

Beau Sejour Care Services

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

Summary of findings

Overall summary

This inspection was carried out on 25 April 2017 and was unannounced. At their last inspection on 14 January 2015, they were found to be meeting the standards we inspected. At this inspection we found that they continued to meet all the required standards.

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Beau Sejour care home provides accommodation and personal care for up to ten people with learning disabilities, and or physical disabilities. At the time of our inspection there were ten people residing at the home.

The service had a manager who is registered with the Care Quality Commission (CQC). A registered manager is a person who has registered with the CQC 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 and associated Regulations about how the service is run.

People were protected from harm and staff were able to demonstrate they were aware of the risks of abuse and how to report or elevate concerns. We found that there was a robust recruitment process in place. There were sufficient staff deployed to meet people's individual care and support needs at all times. There were suitable arrangements in place for the safe storage and administration of medicines.

People were asked for their consent and staff were aware of MCA principles and where people lacked capacity to make decisions, consent had been obtained in line with the Mental Capacity Act (MCA) 2005.

People were supported to maintain their health and well-being and had access to a range of healthcare professionals such as GP's, district nurses, and dentists. People were also supported to attend hospital appointments when required. People were given choices of what food and drinks they wanted and were supported to maintain a healthy balanced diet.

The environment was 'homely' and we observed that staff treated people kindly and in a way which respected people's privacy and dignity. Staff demonstrated that they knew people well and met their needs in a personalised way. Relatives were extremely complimentary about the care and support provided.

People were encouraged and supported to participate in a wide range of meaningful and suitable activities which took into account peoples individual abilities and interests. People also attended a range of community based events. Staff and relatives of people who used the service told us they were always consulted and involved in developing all aspects of the service, as well as how the home was run. Relatives told us they felt 'listened to' by the management team. People were central to everything that was in place and the home and the management team valued peoples input and was very focused on putting people first. There were systems and processes in place to monitor the overall quality of the service.

The management team were open and transparent about all aspects of the service and demonstrated a

clear vision for the service and people who used the service. Staff felt valued and motivated. People were empowered to make decisions about their lives and staff supported them to challenge themselves, by not letting their disabilities prevent them from living full and active lives.

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.

People were protected from harm and potential abuse by staff who had been trained and knew how to report concerns.

There were sufficient staff on duty at all times who were available to meet people's individual needs and help to keep them safe.

There were robust recruitment checks in place to make sure only suitable staff were employed at the service.

People's medicines were managed safely by staff who had been appropriately trained.

Is the service effective?

Good

People received care and support that was effective.

People were supported by staff who had been trained and who received support and supervision.

People's consent to care and support had been obtained appropriately and in accordance with MCA principles.

People's were supported to eat and drink sufficient amounts to keep them healthy.

People's healthcare needs were met because and they were supported to access a range of healthcare professionals when required

Is the service caring?

Good

People were supported by staff who were caring.

People and their relatives were positive about the way in which care and support was provided.

Staff were knowledgeable about people's needs, preferences and individual requirements.

People and their relatives were involved in the development and review of their care plans.

People's dignity was promoted and respected and their privacy was maintained..

Is the service responsive?

Good

The service was responsive.

People were supported to raise concerns and make complaints if required. Compliments were also recorded.

People who used the service felt 'listened' to and were able to give feedback about how the home was run.

Is the service well-led?

Good

The service was well led.

The management team were open and transparent and were very involved with the day to day running of the service.

The was a range of quality assurance systems and processes in place to help monitor the safety and quality of the service.

There was a people first culture and everyone was valued equally.

People, their relatives and staff had opportunities to share their views and contribute tot he development of the service.

Staff were clear about their roles and were motivated by a supportive management team.

Beau Sejour Care Services

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 25 April 2017 and was unannounced. The inspection was carried out by one inspector. Before our inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us. We also reviewed the provider information return (PIR) submitted to us 12 February 2016. This is information that the provider is required to send to us, which gives us some key information about the service and tells us what the service does well and any improvements they plan to make.

People who used the service were unable to communicate with us verbally due to their complex health conditions. During the inspection we observed staff support people who used the service. We spoke with two visiting relatives, three staff members, the deputy manager and care coordinator. We received feedback from two relatives and representatives of the local authority health and community services involved with the care and support of people who used the service.

We also used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We reviewed care records relating to three people who used the service and other documents central to people's health and well-being. These included staff training records, medication records and quality audits.

Good

Is the service safe?

Our findings

People who used the service could not tell us if they felt safe due to their complex health conditions. However feedback from relatives and family members was positive. One relative told us "This is the safest and best care home in Hertfordshire, it really is, I have never have a moments worry since the day [name] came to live here". Another relative said "I have no worries, the staff are spot on here, I think safety is paramount here". We observed that people were cared for by staff who were aware of how to keep people safe from harm.

There were appropriate arrangements in place to safeguard people from possible abuse. This included a process for reporting concerns as well as a whistleblowing process. Staff were able to describe confidently how they identified possible abuse and the reporting process and had received training in safeguarding people from abuse. Contact details for the local safeguarding team were displayed on the notice board as a reminder for staff. The management team showed us the records from a recent safeguarding event and we saw that they had followed a clear procedure with all information appropriately documented.

We observed that staff managed behaviours that challenged in an appropriate way. For example, by the use of distraction technique and positive interaction with people. We observed that when one person became a little upset staff intervened quickly to reassure the person and they went off to look at something in another room.

Staff were aware of risks to people and had access to detailed and personalised risk assessments. People were involved in decisions about risks associated with their day to day living as much as they were able to be and family members, where appropriate, were also involved. We saw that risk assessments were regularly reviewed and senior staff told us that any time there is a change in a person's ability their care and risk assessment were reviewed to help make sure people were kept safe.

People were able to move around the home freely and without restriction. This included access to an enclosed garden. One person invited us into the garden to look at their bike which was parked up safely. Staff told us they supported the person who enjoyed riding their bike and risk assessments had been completed to good effect to support the person to keep safe.

There were sufficient numbers of suitable staff available to meet people's needs at all times. People's dependency needs were assessed and kept under review to ensure that there was adequate staff on duty with the necessary skills and experience to help keep people safe.

Safe and effective recruitment practices were in place to ensure that staff who were employed at the service were of good character physically fit for the role and suited to work in a care home environment. Pre-employment checks were completed before staff commenced their employment at the home.

People were supported to take their medicines safely by staff who had been trained to administer medicines safely. There were appropriate arrangements for the safe ordering, storage, and administration of people's

medicines.

Good

Is the service effective?

Our findings

People were supported by staff who had received appropriate training and skills to support them in their roles. Relatives told us they felt that staff had the skills and experience to support people safely and effectively. We observed staff supporting people throughout our inspection including moving and handling tasks and staff demonstrated a good overall knowledge of all aspects of effective care delivery.

We saw from records that staff were appropriately trained and received support in the form of individual supervision and team meetings with their line managers. These meeting provided staff with an opportunity to discuss the people in their care and their own training and development needs. One relative told us "I think the staff are a good calibre here a few have left and I think that's because they did not meet the required standards. They don't settle for second best here. They are a good team and all work well together".

New staff were required to complete an induction programme and then shadow more experienced staff on shift until they were signed off as being confident to work in a less supervised role. Staff told us that they were supported to complete specialist training in addition to the core topics. For example where a service user had a specific health condition staff received specialist training to help them understand how to support them as best they could. One example of this was where a moving and handling specialist had recently attended the home and trained a group of staff in specific moving and handling practices for a person who had a particular need. Staff told us they observed the practices and then had an 'observed practice session' to make sure they fully understood what was required to support the person effectively and safely.

We observed staff obtained people's consent before providing care. In some case where people did not communicate verbally staff told us "we explain what we are going to assist people with and they work with us" for example one staff member said "We offer choices when we are supporting people and assist in a variety of ways depending on people's individual method of communication". We found that people's consent was always obtained about decisions regarding how they lived their lives and the care and support provided. One family member told us "This is a real home where people get real choices, it's not just for show, it happens all the time".

Staff and the management had received training in relation to Mental Capacity Act (MCA) 2005 and Deprivation of Liberty Safeguards (DoLS) training. They demonstrated a good understanding and were able to explain how the requirements worked in practice. DoLS apply when people who lack capacity are restricted in some way in their best interests to keep them safe. We found that people's capacity to make decisions had been appropriately assessed. People had access independent advocacy services if required along with family members where this was appropriate.

We saw that people were supported to make choices about what food and drink they had and were involved in menu planning as much as possible. People discussed their preferred food choices on a Sunday and these were recorded for the following week. Pictures were available to help people with choices. We saw

that when people came back from day care or being out for the day they all congregated around the dining table for tea and cakes, fresh fruit and juice and a visiting relative told us "This is offered every day and provides time for people to engage with each other and catch up with the day's events." The home had recently been awarded a five star rating for food and hygiene.

People were supported to maintain their health and wellbeing and had access to relevant healthcare services when required. Staff supported people to attend health related appointments as well as healthcare professional visiting the home. A relative told us that their family member's health had declined and the management and staff had been very supportive in managing their healthcare needs and also in providing them with support and reassurance. People's healthcare appointments and communication such as letters and test results were documented in their care plans.

Good

Is the service caring?

Our findings

Visiting relatives spoke positively about how kind and caring the management and staff were at the home. One person said "I am always welcomed at the home, and offered a cup of tea. They care about me as well as [name]. They really are lovely here, nothing is ever too much trouble for them". Another family member told us "They are genuinely caring, whenever I visit I am made so welcome, they offer me food and drink and I really feel supported. They are honest and treat people like a big family. It's lovely here".

We observed that staff were respectful of people's dignity and privacy, for example speaking quietly to ensure confidentiality was maintained. Knocking on people's doors and waiting for a response before entering. A member of staff told us "We treat people how we would like to be treated ourselves, we care so much about them. I even think about them on my day off. We respect that it's their home and we are visitors".

We observed staff to be interacting with people in a kind and caring manner. We saw that the staff knew people very well and treated them as individuals. Staff had developed positive and caring relationships with the people they supported. One staff member told us "We are all keyworkers to a person and so we do all their care plan reviews and spend lots of time getting to know everything we can about the person including their likes and dislikes and what they enjoy doing. It's the little things that matter and we pay attention to detail". Relatives told us that staff also supported people to maintain meaningful links with families and friends wherever possible. We saw that there was a regular flow of visitors to the home.

People were supported by a consistent staff team most of whom had worked for many years at the service. One staff member told me "I have worked here for nearly 15 years. Almost as long as some of the people have been living here so yes it's like my second family I know all their likes and dislikes very well". We saw when people returned from day care or from being out for the day. It was like a family reunion, the laughter and affection observed between staff and people was so positive and staff and people were genuinely happy to see each other.

There was an inclusive atmosphere in the service. For example no one was left alone or excluded. We saw staff encouraging people to 'engage' and interact rather than just sitting and watching the TV. People were also supported to complete tasks that they enjoyed such as bringing drink to put on the table and putting the laundry away.

Relatives confirmed they were very involved in the development and review of their family members care and support plans and were invited to participate in regular reviews. In addition they were able to attend residents and family meetings to discuss current events and plans for the future.

Care plans were detailed and personalised and provided staff with sufficient information to enable them to fully support the people in their care. They included information such as people's histories and lifestyles which helped staff to understand and respond to their needs appropriately.

There were lots of examples of personalisation within the homes communal areas such as photographs of events, games and puzzles and individuals bedrooms were personalised to reflect people's individual personalities and preferences. For example one person was a keen football supporter and they had lots of memorabilia displayed in their bedroom. People had also been involved in choosing their colour schemes for their bedrooms. .

Good

Is the service responsive?

Our findings

Relatives told us the service was very responsive to peoples changing needs. One family member told us "The managers built an extension so that [name] could have more space and was less restricted due to a decline in their mobility". Another person had changed rooms as well to give them more space for equipment that they now required to assist them. Another visitor told us "[name] has deteriorated and now requires more support than we envisaged, but they are not going anywhere. The management have made arrangements so that they have everything here to support [name]. They are fantastic they really are".

Relatives told us that staff encouraged and supported people to retain as much independence as possible. A staff member told us "We support people to take risks and do things that challenge them; they are so delighted when they have done something they thought they couldn't do". Another staff member said "We like to have a 'can do' attitude and do not allow disabilities to restrict people from doing what they enjoy".

People and their relatives were involved as much as possible in how their care was planned and provided. We saw that all documents were provided in an 'easy read format' and supported with pictorials. This helped staff to be responsive to people's needs and wishes.

We observed staff promoting choice and independence in all aspects of daily living which included areas such as social events. One person told us they supported people to attend religious events if they wished such as going to a place of worship or celebrating cultural events and observing certain holidays. People celebrated many events which included birthday parties for garden parties, bonfire parties and Christmas and New Year celebrations. One relative told us "I have been invited to lots of different functions that they organise here".

People were able to go on holidays with staff if they wished. A family member told us that knew that staff had taken people on holiday regularly over the years. In addition visits to local event, restaurants and attendance at theatres and shows were organised.

People were encouraged and supported to raise any concerns, or worries they had through their key worker sessions or residents meetings.. Staff told us that there had been no formal complaints since the last inspection and records confirmed this to be the case. The service had a complaints policy and people were given an easy read copy to support them to understand the process for raising concerns. A relative told us, "I have no complaints about anything, but if I did I would only have to tell the staff and it would be sorted out, the manager and team are all very approachable".

Good

Is the service well-led?

Our findings

Relatives and staff were very positive about the overall management of the service. We repeatedly heard the same comments about staff and managers being kind, caring, involved, compassionate, interested and about the service being a 'family home'. Relatives were complimentary about all aspects of the service or Beau Sejour
A relative told us, "It is the best home for sure, I would not want [name] anywhere else. They are excellent, all of them". Another relative said "Look and listen to them it's just such a family atmosphere, its brilliant".

The registered manager and provider had owned and managed the service for more than twenty years and were still very involved. There was a positive culture in the Service. Staff told us "I love working here; it's just such a positive vibe when you are here". Another staff member said" It's just one of those places where you don't mind coming here and don't see it like coming to work". The management team had clear objectives for the service and their values were embedded in all aspects of the service. Staff told us "We share the same values for people to receive the best care". Staff were observed to be motivated in their work.

There were systems and processes in place to monitor the overall quality of the service and to make continual improvements. This included audits of records and regular training and support for staff, and development opportunities. For example one staff member told us they were a senior support worker which gave them extra responsibility to 'manage' the shift'. We observed staff to be at ease when interacting with the management team and saw they had the confidence to approach them with any issues, or to request support. They told us that they enjoyed working at the service and felt that the management team were committed to improving people's lives.

People who lived at the home and staff were asked their opinions and were involved in developing all aspects of the service. They were encouraged and supported to have their say about the service provided. A member of staff told us, "We are always discussing things it's an on-going dialogue".

A recent survey had been completed which invited people to share their views and experiences of the quality of the service. This had been evaluated and where required actions put in place to address any shortfalls. The results of this survey were positive and confirmed that people felt there was a good quality of care provided at the home.

The management team demonstrated they had a good overview of all aspects of the service. We saw from records that the home was well maintained with fire safety checks completed, gas, electric and water checks were done regularly. Equipment was well maintained and checked on a regular basis. The management and staff team were open, honest and transparent and clearly demonstrated they were passionate in their approach to provide a good quality of life for the people who were in their care.