

# Harbour Care (UK) Limited

# The Shores

## Inspection report

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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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### About the service

The Shores is a residential care home registered to provide accommodation and personal care for up to seven people diagnosed with a learning disability. At the time of this inspection there were six people living at the home.

### People's experience of using the service and what we found

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

### Right support

Staff understood people and their individual needs well. People were supported by appropriate numbers of staff on each shift to ensure people's safety and meet their needs. Staff knew people well and provided kind, caring, person-centred care and support. People received care and support in an environment that was safe, clean and well maintained. People could express choice about their living environment and were supported to personalise their bedrooms reflecting their choice of furnishings and items that were important to them.

### Right Care

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent. Care plans and risk assessments were detailed and person centred ensuring people were supported to live full, active lives.

### Right culture

There was a relaxed, friendly and welcoming atmosphere at The Shores. Staff demonstrated good understanding around providing people with person centred care and spoke knowledgeably about how people preferred their care and support to be given.

The management team promoted an open and honest culture and staff had confidence in the leadership of the service and felt the service was well led.

For more details please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was requires improvement (published 7 October 2019).

### Why we inspected

This inspection was prompted by a review of the information we held about this service.

The overall rating for this service has changed from requires improvement to good based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Shores on our website at [www.cqc.org.uk](http://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.

# The Shores

## 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 conducted by one inspector.

#### Service and service type

The Shores is a care home. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. This service did not provide nursing care.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission 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 the inspection there was a registered manager in post.

#### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

#### 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 used all of this information to plan our inspection.

#### During the inspection

We met with three of the six people who used the service. We spent time observing and listening to how staff interacted with people. During the visit we spoke with the registered manager, four members of staff and two relatives.

We reviewed a variety of records relating to the management of the service. This included staff rotas, records relating to the recording of accidents and incidents, infection control policies and procedures and statutory notifications. We reviewed three people's care, support and medication records. We looked at three staff files in relation to recruitment and staff supervision.

#### After the inspection

We sought and received written feedback from a health and social care professional of their views of the service.

# 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 as requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Staff understood how to recognise the different types of abuse and spoke knowledgeably about reporting concerns. A member of staff said, "We keep people safe by the support we give and the staff team working well together." The registered manager told us, "We are a safe and happy home. People tell us they feel safe here."
- People told us they felt safe living at The Shores and liked the staff who supported them.
- A relative told us, "Yes, it is safe, it all seems ok. [Person] is settled and safe. The [registered manager] is good at their job and has [persons] best interests at heart." Another relative told us, "Yes, I'm happy and I feel [person] is safe there. They settled in quite well."
- There was a safeguarding and whistleblowing policy that gave staff clear guidance to follow in the event they needed to refer any concerns to the local authority.
- Safeguarding incidents had been reported appropriately to the local authority and CQC.
- Accidents and incidents were recorded, reviewed and analysed to ensure any trends or patterns could be highlighted.
- Incidents and accidents were discussed at staff team meetings and at daily handovers to ensure that learning from incidents could be undertaken. Appropriate action was taken to ensure lessons were learned and shared.

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 the mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least as 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.

Assessing risk, safety monitoring and management

- Risks to people and the service were managed so that people were protected and their wishes supported and respected.

- Detailed, personalised risk assessments were in place. These considered risks relating to the environment as well as any risks to the person. People were supported to take positive risks and were involved and included in their risk assessments. This ensured a reduced risk of harm with the least possible restriction to people's freedom, and independence.
- There were systems in place to ensure the premises were maintained safely. Emergency plans were in place highlighting the support people would need to evacuate the premises in an emergency, such as a fire.
- Up to date service and maintenance certificates relating to electric, gas, fire and water systems were available. Legionella testing had been completed which showed the premises were free from legionella. Legionella are water borne bacteria that can be harmful to people's health.

#### Staffing and recruitment

- There were robust recruitment practices in place and the relevant checks including Disclosure and Barring Service (DBS) checks had been completed on all staff before they commenced their employment at The Shores. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were enough appropriately trained staff employed to support people and the provider had an ongoing programme of staff recruitment in place. A relative told us, "I know staffing is a nationwide issue and I know they use the same agency staff for consistency. I'm happy in the knowledge the [registered manager] has good oversight of everything."
- Staff told us there were enough staff employed to support and care for people safely. A member of staff told us, "We have enough staff to keep people safe. There are always enough staff on shift to ensure people's safety."
- Staff rotas correctly reflected the levels of staff on duty during our inspection visit. Annual leave or staff sickness was covered by existing staff or agency members of staff. Wherever possible the same agency members of staff would provide cover to ensure consistency of care for people living at the home.

#### Using medicines safely

- Medicines were safely managed, stored and administered. People received their medicines when they needed them. Records showed stock levels of medicines were correct and regular medicine audits were completed.
- We identified two medicines that had expired. Both medicines were not in current use. We discussed our findings with the registered manager who immediately ensured they were removed and confirmed they would provide additional training to staff on ensuring out of date medicines were disposed of in a timely manner.
- There were clear protocols for administering PRN (as required) medicine and staff spoke knowledgeably about administering PRN medicine.
- Clear guidance on specific medicines was available for all staff to ensure a good understanding of people's medicines, symptoms and why specific medicines were needed.
- Where people were administered topical creams, body maps and instructions were in place and provided clear guidance for staff.
- Staff who administered medicines had received up to date medicine training and had their competency checked.

#### 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 admitting people safely to the service.
- We were assured that the provider was using personal protective equipment (PPE) effectively and safely. A relative told us, "The staff always wear their masks" and a member of staff told us, "There is enough PPE, we



never run out. We all did our donning and doffing training." Donning and doffing refers to changing into and out of PPE clothing.

- We were assured that 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 that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- The provider was following current government guidance in regards infection prevention and control and visiting in care homes. Visitors to the home were unrestricted at the time of inspection.

# 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 this key question was rated as requires improvement. At this inspection the rating has changed to good. This meant the service was constantly managed and well-led. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; and how the provider understands and acts on duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- Staff, relatives and health and social care professionals all told us they felt the service was well-led, with an open, honest, friendly and supportive culture and a clear management structure. We received many positive comments about the registered manager. One relative told us, "I'm happy in the knowledge [registered manager] has good oversight of everything. They do keep me informed, they do that by phone or when we meet in person. It is definitely well-led, [registered manager] is doing a good job. I am kept involved as well. It is much better; I have no complaints at all."
- A member of staff said, "The [registered manager] always welcomes any ideas put forward at meetings. The meetings are very open and honest. I do feel supported in my job. I would say the culture of The Shores is one of building confidence and fun and enabling the residents to make their own choices and giving them the options to live their best lives."
- A health and social care professional told us, "Overall, I have found the staff to be very responsive during my visits with a good level of care and knowledge regarding [person]. I have found that the [registered manager] has managed the complexities around [person] and their family very well."
- People were supported and encouraged to lead active, healthy lives that enabled them to live fulfilling, independent lives as far as was possible for them.
- Staff told us the management team operated an approachable, open door policy and were always available for advice and guidance. A member of staff said, "We have team meetings about once a month they are useful, and we can speak up and put our ideas across. I feel supported. I would say, The Shores is well-led. I think the management team are approachable, I've never had any problems. We are all happy to discuss anything at all. Communication is good we have a lot of involvement with relatives and families. Communication with staff is managed well...I think it all works quite well."
- The registered manager and provider understood their responsibilities under the duty of candour and promoted an open and honest culture. The duty of candour is a legal obligation to act in an open and transparent way in relation to care and treatment.

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

- Staff spoke knowledgeably about their responsibilities within their roles and told us they worked well together as a team.
- There were effective systems for the registered manager and provider to oversee The Shores and monitor

the quality of service provided. There was a process of continual improvement and quality assurance with a variety of audits completed to ensure the quality of the provision was maintained.

- Staff were confident in the quality of care, support and guidance they were able to offer people which gave a strong focus on person centred care for people. Staff felt valued, respected and well supported.
- Providers are required to notify CQC of significant incidents and events. We reviewed the notifications the service had completed and found notifications had been sent to external agencies and CQC as required.
- The registered manager had a commitment to learning and making improvements to the service people received. Regular spot checks and observations were conducted on staff to ensure they were following their training and meeting people's needs.
- There was a process of continual learning in place. Incidents and accidents were discussed during team meetings, supervisions and hand over sessions. This ensured learning from these events would be gained and appropriate changes implemented to prevent future re-occurrence.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Relatives told us they were regularly asked for their views on the service and felt fully involved with the care of their relative. People and staff told us communication within the service was effective and worked well.
- Staff gave us examples of individualised care and support they had given people. This had led to people having an improved level of independence, communication and sense of well-being whilst still respecting people's choices and preferences.
- A member of staff told us, "We encourage independence and support at all times. It's the little things, for instance [person] had to have help to put their socks on. Now they can do it themselves with encouragement. It's all about the encouragement to keep and maintain their independence, it's very important."
- People could attend regular house meetings. The house meetings gave people an opportunity to put forward their views and raise any concerns they had. People's views and requests were listened to and acted upon.
- Staff team meetings were held regularly and provided staff opportunities to discuss all aspects of working at The Shores. Staff told us they felt valued, were always respected and their views listened to.
- The service worked collaboratively with all relevant external stakeholders and agencies. When changes to people's health needs or conditions were identified, appropriate and timely referrals for external professional support were made.
- Health and social care professionals confirmed there were good working relationships with the service.