

Harbour Care Centre Care Home Service

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Type of inspection:
Unannounced

Completed on:
26 August 2024

Service provided by:
Enhance Healthcare Ltd

Service provider number:
SP2012011938

Service no:
CS2023000111

About the service

Harbour Care Centre is a care home registered to provide support to a maximum of three people with personal and or psychological care needs. At the time of this inspection, they were supporting one person. The service is part of Enhance Healthcare Ltd and is attached to Harbour Care Home (CS2014329901), which is managed by the same provider. The manager of Harbour Care Home is also the manager of Harbour Care Centre.

About the inspection

This was an full, unannounced inspection which took place on 21 and 22 August 2024. The inspection was carried out by two inspectors from the Care Inspectorate. To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection. In making our evaluations of the service we:

- met with the person using the service and spoke with their legal representative
- spoke with five staff and management
- observed practice and daily life
- reviewed documents.

Key messages

- Care was delivered with compassion and dedication.
- The benefit of a multi-disciplinary approach was recognised and promoted.
- Improvement to quality assurance would drive continuous improvement.
- Care planning and risk assessment was good. Key areas of improvement would strengthen outcomes for people.
- Previously made areas for improvement remain in place as the service continues to develop practice.
- As part of this inspection, we assessed the service's self-evaluation of key areas. We found that the service was not yet undertaking self-evaluation. We discussed the benefits of self-evaluation and how this approach should be adopted to support improvement in the service.

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How good is our setting?	5 - Very Good
How well is our care and support planned?	4 - Good

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

4 - Good

We awarded an evaluation of good for this key question. This means we found several important strengths which had a positive impact on people's experiences.

We saw care that was considerate and flexible. At the time of this inspection, there was one person living in the service. Days were focussed around doing things that were enjoyed and meaningful. A relative commented that "the care is right for [loved one]" and reported being happy with how active they were. This evidenced care that enhanced daily life.

People's wellbeing should benefit from their care and support. We found evidence of strong multi-agency partnerships in place, to guide appropriate levels of care. This included regular reviews from social work and relevant health professionals. The staff team recognised the benefit to seeking professional guidance and input to improve experiences for the supported person. Care records we reviewed were consistent and detailed daily care delivery. This helped to evidence the right care being given at the right times.

Our review of medication management found good, safe systems in place. As required medication protocols were also in place. These could be enhanced by including detail about when they should be administered, based on the persons specific method of communication. For example, facial or verbal indicators. This feedback was given to the service. Outstanding area for improvement around care planning applies. See section 'What the service has done to meet any areas for improvement we made at or since the last inspection'.

How good is our leadership?

4 - Good

We awarded an evaluation of good for this key question. This means we found several important strengths which had a positive impact on people's experiences. Some improvement in key areas would enhance people's experiences.

Systems should be in place to regularly evaluate people's experiences and monitor standards of care. We saw audits of accidents and incidents, falls and oversight of weight. We could see that these had informed care planning, for example, increase in weight and BMI, had resulted in a healthy eating plan being implemented. Although manager oversight was in place, this was not clearly formally recorded. Improving this practice would demonstrate what is working well in the service and what improvement is needed.

Although we saw the service had a development plan in place that was being used to drive improvement, we found gaps in staff training had been missed, that could result in poor outcomes. The management team were responsive to this feedback and demonstrated an awareness of where improvement was required to ensure robust quality assurance at Harbour Care Centre. This gave us confidence in further capacity for improvement. A previously made area for improvement remains in place. See section 'What the service has done to meet any areas for improvement we made at or since the last inspection'.

How good is our staff team?

4 - Good

We awarded an evaluation of good for this key question. This means we found several important strengths which had a significant positive impact on people's experiences. Some improvement in key areas would enhance people's experiences.

There was evidence of good practice and noted improvements since our last inspection and we found everyone moving forward to support consistently good outcomes for people.

At this inspection we examined staff recruitment as part of our core assurances and focussed on assessing staffing arrangements. We found staffing arrangements were as required and staff worked well together. We found people using the service were protected by safer recruitment checks that were completed before staff took up post. Staff induction was comprehensive and tailored to the needs of the person receiving care. Agency staff were given sufficient orientation to support the people in their care.

A relative told us, "Staff work well with [supported person] and me" and "I get text messages, phone calls and pictures all the time". They confirmed that the staff team was consistent and that this benefited the supported person.

Staff told us that the management team were supportive and responsive of any concerns or issues raised. The staff team was well led day to day by the team leader. Records indicated supervisions and observations of practice had been carried out for some staff working in the service. A previously made area for improvement remains in place to support consistent oversight of staff development. See section 'What the service has done to meet any areas for improvement we made at or since the last inspection'.

It was clear that the staff team knew the supported persons needs well, however gaps in training impacted their confidence in managing complex physical and behavioural care needs. We approached this with the service at the time of inspection and they were responsive to addressing this. An area for improvement is made. **See area for improvement 1.** This supports a confident and competent staff team, impacting good outcomes for people.

Areas for improvement

1. To ensure safe and consistent practice, the provider should ensure that people receive care from well trained and competent staff. This training should be in line with the needs of supported peoples' specific needs, with systems in place to measure competence.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes' (HSCS 3.14).

How good is our setting?

5 - Very Good

We awarded an evaluation of very good for this key question. We found significant strengths in aspects of the environment that would support positive outcomes for people.

The service benefits from access to secure outdoor spaces. The person living in the service regularly accessed this space. Rubber matting was in place to reduce risk of injury in the event of a fall. This evidenced positive promotion of risk taking which enhanced their life. The environment promoted independent living with access to a kitchen where people could cook, make drinks and snacks, and use the laundry facilities. People were supported to make their own choices about how to spend their day, using both the communal spaces and their own rooms to be active and have privacy as they wished.

Rooms were personalised and the service was clean, comfortable, and well maintained. We found evidence of technology being used to support and enhance care. For example, a touch pad seizure recording unit, to aid staff in accurately timing seizure length. We saw environmental action plans that demonstrated plans to improve the sensory and homeliness of the service. This evidenced people's needs and comfort being drivers for change.

How well is our care and support planned?

4 - Good

We awarded an evaluation of good for this key question. This means we found several important strengths which had a significant positive impact on people's experiences. Some improvements were needed to maximise wellbeing.

Support plans and risk assessments should effectively lead care delivery. We found examples of plans that were personalised and reflected well, the needs and wishes of the supported person. Use of best practice guidance was evident with a strong use of multi-disciplinary input to promote good health and wellbeing. We found a good level of recording around people's daily care and support. This gives confidence that people's health and wellbeing benefitted from care planning.

We found that some plans and risk assessments required reviewing to ensure that they accurately reflected likes, interests and needs. This includes the support needed during periods of distress. Plans would also be enhanced by recording in an easily accessible way, any legal proxies that are in place and what specific powers are agreed. This helps to guide support staff in promoting people's human rights. See section 'What the service has done to meet any areas for improvement we made at or since the last inspection'.

What the service has done to meet any areas for improvement we made at or since the last inspection

Areas for improvement

Previous area for improvement 1

The provider should ensure that audit processes are in place and effective in identifying areas for improvement. Where areas for improvement are identified, they should contribute to a development/ improvement plan for the service.

This is to ensure that care and support is consistent with Health and Social Care Standards (HSCS) which state that: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes.' (HSCS 4.19).

This area for improvement was made on 6 March 2024.

Action taken since then

Some good audit processes were in place to monitor daily clinical care. We found some gaps in this that could be enhanced by clearer management oversight. This would support development planning and drive further improvement at Harbour Care Centre. See section 'How good is our leadership' for more details.

Area for improvement is NOT MET.

Previous area for improvement 2

Staff working in the service should receive regular supervision and review of competency to ensure their learning and development needs are met and they have the right skills to support people to meet their outcomes.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which states that: "I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14).

This area for improvement was made on 6 March 2024.

Action taken since then

Our review of records found some staff had been recently supervised, with competency checks having been undertaken around infection prevention control. This was not consistent across the whole staff team and further improvement in this area would enhance skills, practice and confidence.

Area for improvement is NOT MET.

Previous area for improvement 3

To promote responsive care and ensure that people have the right care at the right time, the service provider should ensure that people have person-centred care plans in place, that offer clear and up to date guidance to support staff.

This is to ensure that care and support is consistent with the Health and Social Care Standards (HSCS) which state that: 'My personal plan (sometimes referred to as a care plan) is right for me because it sets out how my needs will be met, as well as my wishes and choices' (HSCS 1.15).

This area for improvement was made on 6 March 2024.

Action taken since then

Some elements of care planning and risk assessment were detailed and gave good guidance, for example, communication care plan and pain management care plan.

Further work around stress and distress, continence care, legal proxies and activities would be of benefit and clearly direct care.

Area for improvement is NOT MET.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Detailed evaluations

How well do we support people's wellbeing?	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.2 Staff have the right knowledge, competence and development to care for and support people	4 - Good
3.3 Staffing arrangements are right and staff work well together	4 - Good
How good is our setting?	5 - Very Good
4.2 The setting promotes people's independence	5 - Very Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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