

Mrs Linda Parker

Dunblane 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 ●

Summary of findings

Overall summary

Dunblane House is a large terraced house supporting up to four people with mental health difficulties. It is situated in a residential area of Blackpool close to local amenities. It is run as an ordinary domestic household. People live with the owners and share the communal facilities. Each person has their own bedroom. There is an outside area with seating at the rear of the property. At the front of the property there is parking for two vehicles.

At our last inspection we rated the service Good in all domains. At this inspection we found the evidence continued to support the rating of Good. There was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

The inspection visit took place on 05 June 2018 and was announced. We gave the service 48 hours' notice of the inspection visit because the service was a small care home for younger adults who are often out during the day, we needed to be sure someone would be in.

At the time of our inspection visit four people lived at Dunblane House.

There was 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.

We spoke with people who told us they felt safe, comfortable and well supported by staff and observed interactions between staff and people. These were positive friendly and supportive.

Procedures were in place to minimise the risk of unsafe care or abuse and staff understood their responsibilities to report unsafe care or abusive practices. They had received training on safeguarding vulnerable people and knew how to do this.

Medicines were managed safely. People received their medicines when needed and appropriate records had been completed.

Care plans were focused on each person's individual needs and preferences. Staff involved people and if appropriate, their relatives and records were informative about the care people received. Risk assessments had been developed to minimise the potential risk of harm to people during the delivery of their care. These had been kept under review and were relevant to the care provided.

Staff had been recruited safely, appropriately trained and supported. They had the skills, knowledge and experience required to support people. There were sufficient staffing levels in place to provide the support

people required and staff responded promptly when people needed assistance.

We saw people had access to healthcare professionals. People's healthcare needs were met promptly. Staff provided care in a way that respected peoples' dignity, privacy and independence. People told us staff cared for them in the way they wanted.

We looked around the home. The building was a large family home the registered provider and registered manager shared with the people they supported. We found it had been maintained, was clean and hygienic and a safe place for people to live.

The design of the building and facilities provided were appropriate for the care and support provided. We found equipment had been serviced and maintained as required. There were safe infection control procedures and practices and staff had received infection control training. Staff wore protective clothing such as gloves and aprons when needed. This reduced the risk of infection.

People told us they liked the meals and were involved in shopping for and preparation of food. Staff encouraged people to have sufficient healthy and nutritious food and drink.

People had been supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People indicated they enjoyed a variety of meaningful work opportunities, educational and leisure activities. These gave people the opportunity to develop new skills, socialise and get involved in a variety of activities.

People and where appropriate, their relatives were given information about how to complain. People we spoke with told us they felt able to complain and express any concerns. No-one we spoke with had any complaints. People also had information about support from an external advocate should this be required.

The registered provider and registered manager assessed and monitored the quality of the service. These included regular audits and ways to seek people's views about the service provided. People told us the management team and staff were approachable and willing to listen.

Further information is in the detailed findings below.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

Dunblane House

Detailed findings

Background to this inspection

We carried out this comprehensive inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked 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.

Dunblane House is a 'care home.' People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

Prior to our inspection visit we contacted the commissioning department at Blackpool Council and Blackpool Healthwatch. Blackpool is an independent consumer champion for health and social care. This gave us additional information about the service.

The inspection visit took place on 05 June 2018 and was announced. We gave the service 48 hours' notice of the inspection visit because the service was a small care home for younger adults who are often out during the day, we needed to be sure someone would be in. At the time of our inspection visit four people lived at Dunblane House.

The inspection team consisted of an adult social care inspector.

During the visit we spoke with a range of people about the service. They included two people who lived at the home, the registered manager, registered provider and a staff member. We also observed care practices and how staff interacted with people in their care. This helped us understand the experiences of people who lived at Dunblane House.

We looked at two people's care records and medication records. We reviewed other records, including staff training and personnel records and records relating to the management of the home. We checked staffing levels, arrangements for meal provision and checked the building to ensure it was clean, hygienic and a safe place for people to live. This enabled us to determine if people received the care and support they needed in an appropriate environment.

Is the service safe?

Our findings

We asked people, if they felt safe at Dunblane House. One person said, "I am safe here or I wouldn't have stayed here as long as I have." Another person told us, "I am pleased I moved here and feel safe." People told us they knew what to do if they felt unsafe at any time.

Procedures were in place to minimise the potential risk of abuse or unsafe care. Records seen confirmed staff had received safeguarding vulnerable adults training. We spoke with staff who knew what action they would need to take to protect people from abuse. During the inspection process we contacted the local authority and they told us they had no concerns about people's care.

Risks for people were reduced because the staff team had completed risk assessments to identify potential risks to people in their care. We saw these were agreed with people to keep them safe and enable them to be as independent as possible. They were monitored and reviewed regularly. They also provided instructions and guidance for staff.

We looked at how accidents and incidents were managed at the home. Where any incident, accident or 'near miss' occurred the staff team reviewed and reflected on them to see if lessons could be learnt.

There had been no new staff appointed since the last inspection but there were procedures in place to provide safe recruitment. The staff team was small and long standing and they worked closely together. When we inspected the team consisted of the registered provider, registered manager and one member of staff. People told us there were sufficient staff and always someone to talk with or provide assistance. This was demonstrated by the staffing levels during the inspection and on the staff duty rotas we checked. Staffing levels were amended to meet people's needs and provide person centred support.

People said staff supported them with their medicines safely. Where able, people were supported to administer their own medicines once risk assessed. We looked at a sample of medicines and administration records. We saw medicines had been ordered appropriately, checked on receipt into the home, given as prescribed and stored and disposed of correctly. Medicines were managed in line with The National Institute for Health and Care Excellence (NICE) national guidance.

We looked around the home and found it was clean, tidy and maintained. Equipment was serviced regularly. Maintenance and repairs were carried out promptly. Staff had received infection control training and understood their responsibilities in relation to infection control and hygiene. They used personal protective clothing such as disposable gloves and aprons if providing personal care.

Is the service effective?

Our findings

People told us they received care that helped them remain well and encouraged them to get involved in meaningful activities. We found people received effective care because the staff supported them in a consistent way with clear and up to date care records. We saw evidence the provider took into account current legislation, standards and evidence based on guidance to achieve effective outcomes. This supported the service to ensure people received effective, safe and appropriate care which was meeting their needs and protected their rights.

Care records seen showed people had been involved in an assessment of their needs before they moved into the home. Following this a care plan, agreed with the person had been put together.

People told us staff supported them to see healthcare professionals. Care records confirmed this. One person said, "Staff will come with me on health visits if I want." This gave them confidence and information to make informed choices. Staff liaised with other professionals and provided information as needed so people received the right care.

People said they liked the food. They told us they were fully involved in assisting with shopping and food preparation. One person said, "We can choose what we want to eat. It is always very good." Another person said, "I like the meals here. I can get food whenever I want." Records showed people had been assessed on their nutritional needs, allergies and food preferences. We spoke with staff. They knew people's food requirements, likes and dislikes. They encouraged healthy eating and sufficient fluid intake, while respecting individual choices.

The kitchen was clean, organised and stocked with a variety of provisions. Staff told us and training records confirmed they had received training in food safety and were aware of safe food handling practices. The Food Standards Agency, a regulatory body responsible for inspecting services which provide food had awarded the home their top rating of five in relation to meeting food safety standards about cleanliness, food preparation and associated record keeping.

We spoke with staff members and looked at the service's training matrix. All staff had achieved national care qualifications. Staff training included safeguarding, mental health, health and safety and fire safety, infection control, food safety and equality and diversity. Records seen and staff spoken with confirmed they received training relevant to their role. This assisted them to provide care that met people's needs. One staff member told us, "We have loads of training to help us." Staff told us and records seen confirmed they received regular supervision. These were one to one meetings held on a formal basis with their line manager. They told us they could suggest ideas and training needs and were given feedback about their performance.

We looked at how the home gained people's consent to care and treatment in line with the Mental Capacity Act (MCA). Staff made sure that people had choice and control of their lives and supported them in the least restrictive way possible; the policies and systems in the service supported this practice People told us they

knew they could agree or disagree to their care. Their mental capacity had been considered and was reflected in their care records We saw people had provided written consent to care and treatment.

We looked around the home. It was accessible, homely and suitable for people's needs. People had personalised their rooms with belongings reflecting their personality and interests.

Is the service caring?

Our findings

Staff interactions with people were relaxed and friendly throughout the inspection visit. We saw staff had a caring and sensitive approach and people were comfortable and chatty with them. People said the staff helped them promptly when they asked for help or to talk. One person said, "I am more than happy here. It is my home." Another person said, "I am glad I moved here it is so nice and comfortable and I can shower whenever I want." People told us staff supported them to keep in touch with families and friends and to make new friends too.

Staff had a good understanding of protecting and respecting people's human rights. They talked with us about the importance of supporting and responding to people's diverse needs and treated people with respect and care. All staff had received training which included guidance in equality and diversity. There was a sensitive and caring approach, underpinned by awareness of the Equality Act 2010. The Equality Act 2010 legally protects people from discrimination in the work place and in wider society. Staff were able to support people with diverse needs in the way each person wanted. People's personal relationships, beliefs, likes and wishes were recorded in their care records and staff were very knowledgeable about each person. This helped people to receive the right support.

We observed staff treated people in a respectful, sensitive and caring way. We saw one way staff respected people's privacy and dignity was by requesting permission to enter their rooms. They accepted and respected their decision if they refused. They listened to people, gave them time to ask questions and helped them become more confident in their abilities and expectations.

We spoke with the staff team about access to advocacy services should people need their guidance and support. Advocacy services offer independent assistance to people when they require support to make decisions about what is important to them. The service had information details for people. This ensured people's interests would be represented and they could access appropriate services outside of the service to act on their behalf if they wanted this. People's information remained confidential. Records were safely stored and staff knew not to talk about people's personal information in public areas.

Is the service responsive?

Our findings

People experienced a level of care and support that promoted their wellbeing, encouraged them to enjoy a good quality of life and develop skills and hobbies. People told us staff were responsive to their care needs and available when they needed them. They said they were supported by staff to express their views and wishes. This enabled people to make informed choices and decisions about their care.

People told us they were encouraged to have frequent and varied social and leisure opportunities according to each person's likes and dislikes. Activities offered included individual and group activities, voluntary work, college courses, scrabble club, watching sports, pub visits, meals out, attending social events, cinema trips and frequent stays at the provider's caravan in Wales.

We saw care plans were informative, personalised and reviewed regularly. People told us and the care plans we saw demonstrated people were consulted and involved in care planning and reviews.

We looked at arrangements the service had taken to identify, record and meet communication and support needs of people with a disability, impairment or sensory loss. Care plans seen identified whether a person had specific communication difficulties. Staff shared important information about people's support, including communication where needed, with other professionals.

The service had a complaints procedure which was on display in the home for people's attention. People told us they knew how to complain and were comfortable doing so. They told us they discussed any issues with the registered provider and registered manager if they did not like something. They said any minor grumbles were solved by talking with the staff team. One person said, "I have never had a serious complaint but any little problems get quickly sorted."

We saw from care records staff had discussed people's preferences for end of life care where people were willing to do so. We saw the staff team had made sure they had the skills, advice and support to enable a person to remain in the home with familiar people around them at the end of their life. Other people in the home were supported through their loss when a death occurred.

Is the service well-led?

Our findings

There was 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 told us Dunblane house was run as an ordinary domestic house and the registered manager and the registered provider lived there with them. People said they were organised and enthusiastic in the way they ran the home and were very approachable. One person said, "I have a great life here because of [registered manager and the registered provider] They are fantastic, that's why I have stayed here for so long. It is my home."

People told us they were fully involved in decisions about the home. Routines and agreements made and any changes were discussed openly and agreement reached. They said they were able to contribute ideas to the running of the home and were listened to and action taken in response to these. They had completed satisfaction surveys. These confirmed they were happy with the standard of care, accommodation, meals and activities organised. They said they felt safe and the home was well managed. Resident meetings had been held on a regular basis. We saw meetings were minuted so everyone knew what was discussed.

There was a clear management structure in place. The small staff team were, knowledgeable and familiar with the needs of the people they supported. They understood the legal obligations, including conditions of registration from CQC and those placed on them by other external organisations. Discussion with the registered manager, registered provider and member of staff confirmed they were clear about their roles and provided a well-run and consistent service.

The management team completed a variety of audits to effectively govern, assess and monitor the quality of the service and staff. Regular audits had been completed. These included reviewing, medicines, care plans, infection control, staff training and the environment. Actions had been taken as a result of any omissions or shortcomings found.

A member of staff told us they were able to contribute to the way the home ran through staff meetings, supervisions and daily handovers. They also said as they worked closely with the registered provider and registered manager they were able to discuss any ideas or concerns as they arose. They told us they felt supported by the management team.

The staff team worked in partnership with other organisations to make sure they were following current practice, providing a quality service and the people in their care were safe. We saw they sought information, advice and guidance from other agencies such as social services, GP's and other healthcare professionals, so people in their care received the right support. They learnt from incidents that had occurred and made changes to care plans and risk assessments in response to these to improve care and safety.

The service had on display in the entrance of the home their last CQC rating, where people could see it. This has been a legal requirement since 01 April 2015.