

# Lancashire County Council

# Chorley & South Ribble Short Break Services

### **Inspection report**

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Date of inspection visit: 26 April 2018

Date of publication: 21 June 2018

#### 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 took place on 26 April 2018 and it was unannounced. We last inspected the service on 10 and 17 January 2017. At that time we found a breach of regulations in relation to safe care and treatment, around the control of medicines and the management of risks. We also found a breach of regulations in relation to safeguarding service users from abuse and improper treatment.

Following that inspection, we asked the provider to complete an action plan to show how they would make improvements in the areas of safe and well led. At this inspection we found the provider had made the improvements required in accordance with their action plan, so the key questions of safe and well led were found to be rated good. During this inspection we found the service to be meeting the requirements of the current regulations.

Chorley & South Ribble Short Break Services 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.

Chorley & South Ribble Short Break Services is located in a residential area of Leyland. It provides short term accommodation for up to four adults, who have a learning disability, physical disability or sensory impairment and require support with their personal care needs.

All accommodation is at ground floor level. Bedrooms are of single occupancy and have ensuite facilities, two of which are larger in size and have ceiling tracking and specialist facilities suitable for those with a physical disability. There is ramped access to the home and also to the garden area. On road parking is permitted. Public transport links and local amenities are also nearby.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

At the time of our inspection there were 44 people who stayed in the home regularly for short breaks. On the day we inspected the home there were four people staying at Chorley & South Ribble Short Break Services. A team leader was in charge of the home on our arrival. The registered manager, who had been in post for 18 months was on annual leave. However, staff notified her of our presence and she did attend the inspection.

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.

At this inspection, we found that people were 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. Mental capacity assessments had been conducted and Deprivation of Liberty Safeguards had been submitted to the Local Authority, as was deemed necessary. We observed verbal consent was obtained before any activity took place. However, this was not always formalised. We made a recommendation about this.

We found recruitment and disciplinary procedures to be robust and these were being followed in day-to-day practice. People's human rights were being protected and anti-discriminatory practices had been adopted by the home. This helped to safeguard those who stayed at Chorley & South Ribble Short Break Services.

Staff members were very knowledgeable about those in their care. We found new staff to have completed induction programmes and regular supervision sessions were subsequently conducted. Annual appraisals were in the process of being developed. A wide range of training modules were provided for the staff team, although updates could have been more frequent. Evidence was available to show staffing levels were sufficient and were calculated in accordance with people's individual needs.

Although, additional minor issues in relation to medicines management were noted at this inspection, these were dealt with immediately. Therefore, we found that overall medicines were now being managed safely.

Personal Emergency Evacuation Plans (PEEPS), emergency procedures and robust policies had been established. The premises were safe, well maintained and hygienic throughout. The home was very pleasant and suitable for those who lived there. This helped to maintain their safety and well-being.

Systems and equipment within the home had been serviced, in accordance with the manufacturer's recommendations. This helped to ensure they were fit for use and therefore promoted the safety of those who lived at Chorley & South Ribble Short Break Service. Accidents and incidents had been recorded appropriately and a system was in place for assessing risk and monitoring the quality of service provided.

It was clear the management team were open, transparent and visible during the inspection process. Action plans had been developed in response to feedback and the results of the auditing process. However, documentation around risk assessing could have been more streamlined and more details recorded about lessons learned when things went wrong. This would provide a more structured approach to monitoring the quality of service delivered. We made a recommendation about this.

Records were retained in a confidential manner. Those who stayed at the home or their relatives were able to access a range of general information and their records, should they wish to do so. The home produced information in various formats, such as easy read and pictorial presentations.

People's needs had been thoroughly assessed and the care plans we saw were well written, person centred documents. Systems involving digital technology were being gradually introduced in order to move the service forward.

### 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

Medicines were being managed safely and people who stayed at the home were protected by the safeguarding practices. Staff were confident in reporting any suspected incidents of abuse.

Assessments had been conducted within a risk management framework and the premises were safe and hygienic throughout.

New staff were inducted to their role well and recruitment practices were robust. Sufficient numbers of staff were deployed to meet people's assessed needs.

#### Is the service effective?

Good



The service was effective.

Staff were supported through regular supervision and a wide range of learning modules. Those we spoke with felt this was sufficient for them to do their jobs well.

People's needs had been assessed and mental capacity assessments had been conducted. Deprivation of Liberty Safeguard applications had been submitted to the relevant authorities.

People we spoke with provided us with positive feedback about the meals served. They confirmed that choices were offered and it was evident mealtimes were flexible to accommodate daily activities.

#### Is the service caring?

Good



The service was caring.

We observed kind and caring interactions between staff and those who stayed at Chorley & South Ribble Short Break Services. People were respected, with their privacy and dignity being promoted.

Staff members were compassionate and demonstrated a

genuine commitment towards those who used the service. We saw people being treated equally and records confirmed they had been involved in decisions about their care. Good Is the service responsive? The service was responsive. The care plans we saw were well written, person centred documents. They included people's likes, dislikes and preferences. People were able to continue with their daily leisure activities whilst staying at Chorley & South Ribble Short Break Services. Assistive technology was being gradually introduced, in order to move the service forward. Complaints were being well managed and people were protected from discrimination. Good Is the service well-led? The service was well led. People who used the service, relatives and staff were all positive about the manager of the home and the changes they had made since commencing their role. A range of audits were conducted and feedback from those with an interest in the home was sought.

improvements needed to be made.

Action plans were developed when it was identified that

the home and their relatives, as well as for the staff team.

Records confirmed meetings were held for those who stayed at



# Chorley & South Ribble Short Break 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 26 April 2018 and it was unannounced. This meant the home did not know we were going to inspect. The inspection was carried out by two adult social care inspectors from the Care Quality Commission.

Prior to our inspection we reviewed all the information we held about this service, which included notifications informing us about significant events, such as serious injuries and safeguarding concerns. We looked at any information received from other professionals, people who used the service and their family members.

We had received the Provider Information Return (PIR) within the timeframes requested. This is a form that asks the provider to give some key information about the home, what the home does well and any improvements they plan to make.

We used a planning tool to collate all this evidence and information prior to inspecting the home.

During our inspection, we spoke with three people who were staying at Chorley & South Ribble Short Break Services. However, we were not able to obtain verbatim feedback from them. At this service people who stay at the home are known as 'guests.' We contacted three relatives by telephone and spoke with three members of staff, as well as the registered manager of the home. We contacted community health and social care professionals, as well as local commissioning groups responsible for external monitoring of the service.

We 'pathway tracked' the care of two people who were staying at the home. This enabled us to determine if people received the care and support they needed and if any risks to people's health and wellbeing were being appropriately managed.

We also looked at other documentation, which included medicine records, two staff personnel files, training information, minutes of meetings, surveys, audits of the service and other quality monitoring systems.



## Is the service safe?

# Our findings

Guests we spoke with told us they were happy and felt safe staying at Chorley & South Ribble Short Break Services. They liked the staff that supported them. One person told us they received their medicines in a satisfactory way.

Comments we received from relatives included, "Yes, I feel [name] is very safe when at the home. I don't have any worries and am satisfied he will be looked after well." And "I don't have any issues. There are no concerns about [name] safety."

At our last inspection we found risk management processes had not always been embedded in relation to behaviours that posed a risk to others. At this inspection we found improvements had been made in this area.

A wide range of health and social care assessments had been conducted within a risk management framework. These included areas, such as privacy and dignity, behaviours that challenge, community activities, personal care, travelling on public transport and missing persons. They were divided into sections, which highlighted; hazards; potential benefits; potential consequences; preventative measures and action to be taken. These were reviewed prior to each period of respite care and were signed by staff members to indicate they had been read and the contents understood. This helped to maintain people's safety whilst staying at Chorley & South Ribble Short Break Service.

At our last inspection we identified some concerns around the management of medicines. During this inspection we found improvements had been made. However, we noted the temperature of the drugs fridge was not accurate. At the time of our inspection this was not being used to store medication. We were subsequently informed that a replacement drugs fridge had been purchased. We found that overall, medicines were being managed safely.

The registered manager confirmed that medication competency checks were conducted periodically. This helped to ensure those staff that were responsible for the management of medicines continued to be competent within this area of practice. We noted a visual aid had been implemented following a medication error, which displayed a good range of up to date guidance and information for the staff team. This helped to protect guests from any further medication errors.

At our last inspection we identified concerns around safeguarding incidents not always being reported to the Local Authority. At this inspection we found safeguarding incidents had been reported appropriately. The policies and procedures in relation to safeguarding vulnerable people and blowing the whistle on those suspected of potential abuse were well written. All staff we spoke with demonstrated good knowledge of safeguarding procedures and how to recognise the signs of possible abuse. Staff we spoke with told us the importance of safeguarding people was regularly discussed in the monthly team meetings and during supervision sessions.

During our inspection, we observed the day-to-day activity within the communal areas of the home and saw that people's human rights were being consistently promoted. The policies and procedures of the home supported these observations and records showed the importance of protecting people from discriminatory practices. We saw people who lived at the home appeared relaxed and comfortable in the company of staff members.

Those we spoke with felt the staffing levels were sufficient to meet guest's needs. We found that staffing levels were calculated in accordance with the assessed needs of those who were staying at the home and at the time of our inspection these were sufficient.

We looked at the personnel records of two members of staff. We found that recruitment practices were robust. All required checks and documents had been obtained before prospective employees started to work at the home. This helped to ensure all staff appointed were fit to work with the vulnerable people who stayed at Chorley & South Ribble Short Break Services. Each new employee completed an initial three month probationary period before a permanent position at the home was offered. During this period they were assessed and monitored at regular intervals to demonstrate their suitability for permanent employment.

Written policies were in place in relation to disciplinary procedures. This helped to ensure that any incidents of misconduct were managed appropriately, in order to keep people safe from harm. We noted that risk assessments were undertaken for staff in special circumstances, such as medical conditions, which could potentially affect their work performance.

We toured the premises and found these to be well maintained and safe for people to spend time in. We observed good infection control procedures and clinical waste was being disposed of in the correct manner. The home was clean and hygienic throughout and infection control audits were regularly conducted, which helped to promote good infection control practices.

The atmosphere within the home was calm and relaxed. We noted a good amount of information was clearly displayed, such as guidance around slavery and hate crime. This helped to keep those who used the service safe and free from harm.

Records showed that systems and equipment within the home had been serviced, in accordance with the manufacturer's recommendations and a wide range of internal checks had been conducted. This helped to promote the safety of those who stayed at Chorley & South Ribble Short Break Services.

Records we saw showed that environmental risk assessments, including fire safety were in place at the home. The fire alarm was tested each week and fire drills were periodically carried out. This helped to keep people safe. However, the environmental risk assessments we saw were not always up to date and were somewhat disorganised. Therefore, it is recommended that a more structured system be implemented for assessing environmental risks. This would enable an effective monitoring system to be embedded within the practices of the home.

Fire drills were conducted periodically in order to ensure staff were competent in taking appropriate action on activation of the fire alarm. Personal Emergency Evacuation Plans (PEEPS) had been developed. These were detailed and identified how each person should be assisted to evacuate the premises in the event of an emergency. They were easily accessible by the emergency services, should they be required. This helped to ensure those who stayed at the home would be evacuated in the safest and most effective way, in the event of fire or other emergency requiring evacuation procedures.

Records showed that emergency plans were in place and a business continuity plan had been developed. This helped to ensure staff were aware of the correct procedures to follow in the event of an environmental emergency, such as fire, flood, utility disruption or adverse weather conditions.

There were two first aid boxes available in the home, should basic first aid treatment be needed and some staff had completed relevant training. One member of the staff team had been appointed health and safety champion. This helped to ensure first aid boxes were stocked with all necessary equipment and internal safety checks of the premises were regularly conducted.

We found that people who stayed at Chorley & South Ribble Short Break Services were protected by the robust policies, procedures and practices adopted by the home. Accident and incidents had been recorded appropriately in line with data protection guidelines. Records showed that action plans had been developed when improvements needed to be made. This helped to ensure the home provided a safe service for those who stayed at Chorley and South Ribble Short Break Services. However, it is recommended lessons learned be recorded more clearly in order to move the service forward.



# Is the service effective?

# **Our findings**

Guests we spoke with indicated they enjoyed the food served. Comments we received from relatives included; "They [staff] go out of their way to make sure [name] gets the food he likes. He says it is good [food]." And "They [staff] assess [name] needs before he goes to stay each time. They phone us to see if there are any changes since his last stay. If there are someone will visit us to go through everything. There is a comprehensive written handover. [Name] can have quite challenging needs, but the staff are able to accommodate this and manage his needs well. The care plan is updated each time."

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 Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least 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 MCA. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the home was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty were being met.

We established that specific mental capacity assessments in relation to accommodation were conducted by the funding authority before a placement at Chorley & South Ribble Short Break Services was arranged. This enabled the staff team to be aware of individual's capacity to make decisions before they went to stay at the home. Where it was determined that people lacked the capacity to make judgements, meetings were held to ensure decisions were being made in the best interests of those who stayed at Chorley & South Ribble Short Break Services.

We were informed the team leader had made arrangements to attend a meeting at a day care centre, in order to discuss the medication regime of one guest who lived in the home and who attended the day centre. This meeting involved the GP, dietician and family, so that decisions could be made in the best interests of the person in receipt of respite care. The care records we saw stated, 'Any act or decision made on behalf of a person who lacks capacity will be made in their best interests.'

During our inspection we observed staff speaking kindly to people and acknowledging some guests could give their consent to a variety of decisions. We saw staff members gaining agreement from these guests before they undertook any care or activity with them. One member of staff asked a guest, "[Name] please can I write in your diary." And "Please can I give you your envelope." The team leader was very knowledgeable about the MCA and DoLS guidance. He told us some applications to the DoLS team had been made, although none had been approved. He assured us these would be followed up on a regular basis, in order to check the current status of applications.

The care records we saw asked guests if they were able to consent to the support they required and if they had any difficulty communicating with people. It was clear in the records we looked at that one person used sign language to make their needs know and to communicate with others. A communication support agreement had been drawn up to ensure this person had received the support they required, in relation to acceptable methods of communication. Some consent forms had been generated, in relation to the taking and use of photographs. We observed guests who had the capacity to make decisions being consistently asked verbally for their consent prior to activities being undertaken. However, there was no formal written consent obtained from them or their legal representative in relation to the provision of care and support. It is recommended that formal consent be obtained from individuals around the provision of their care and support.

Where people lacked the capacity to make informed decisions, then evidence was available to show decisions were made in their best interests.

The care records we looked at showed people's needs had been thoroughly assessed before they went to stay at Chorley & South Ribble Short Break Services. This helped to ensure the staff team were confident they could provide the care and support people required. The support plans we saw incorporated hospital passports which were colour coded, using a traffic light system to identify levels of need. These provided important information, so that in the event of hospital admission the relevant medical staff would have the necessary details to deliver appropriate care and treatment.

At the time of our inspection we found that effective outcomes were being delivered for those who stayed at Chorley & South Ribble Short Break Services. The staff we spoke with were able to tell us how they supported people and demonstrated good knowledge of individual needs. They told us that wherever possible, people were encouraged to be involved in planning their own care, but if this was not achievable, then carers and family members were also encouraged to participate in the care planning process.

New staff were issued with a broad range of information when they commenced employment. This included job descriptions relevant to their individual roles and a good amount of important policies and procedures, such as disciplinary and grievance, whistle-blowing, fire safety, moving and handling, accident reporting, first aid and confidentiality. A detailed induction programme was completed by all new employees and records showed that regular supervision sessions for staff were conducted.

This was confirmed by staff members we spoke with. These had been improved in response to discussions held at team meetings. However, annual appraisals were still in the development phase. Together these would enable staff to meet with their line manager on an individual basis, in order to discuss best practice, work performance and any concerns or training needs they may have had.

Records we saw showed that a good level of training was provided for the staff team in areas, such as first aid, fire safety, moving and handling, safeguarding people, the Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS), infection control and food hygiene. Staff we spoke with were able to give us some good examples of training they had completed. Staff members we spoke with felt they received sufficient training to help them perform well in their role. However, training updates in some modules could have been more frequent.

Knowledge checks were conducted as part of the interview process and records showed that some competency assessments had been completed in areas, such as safeguarding and the management of medicines. These consolidated details of individual learning and knowledge.

Evidence was available to demonstrate the home had developed good working relationships with community professionals and that these were working effectively. For example, we were told a variety of 'champions' had been appointed from the staff team in areas, such as health and safety, fire awareness, infection control, communication, the mental capacity act and safeguarding. This helped to develop links with other professionals and to continually improve practices within the home.

During the course of our inspection we toured the premises, viewing people's private accommodation, with their consent and communal areas. The home provided a domestic type setting, making it a pleasant and homely environment for people to stay in. However, special adaptations had been made, in order to support those with special needs, physical disabilities or mobility problems. For example an extra-long bed had been provided to accommodate one person who was very tall and the light fittings had been made flush with the ceiling to accommodate the individual's height.

Meals were prepared and served in accordance with guest's community activities and preferences. Guests told us they enjoyed the meals served. A new menu had been developed, which provided a selection of choices and which helped to promote healthy eating. Records we saw documented people's dietary intake, which helped to ensure an adequate nutritional status was being maintained. Guests were encouraged to express their dietary likes and dislikes, to be involved in the preparation of their meals and to participate in selecting food options with support from their key workers.

The home had been awarded five stars for food hygiene by the food standards agency. This was the highest rating that can be achieved and demonstrated the standard was 'very good.' The plans of care we saw provided the staff team with clear guidance around people's specific dietary needs and food preferences. This helped to ensure they maintained good nutrition and hydration.



# Is the service caring?

# **Our findings**

Guests we spoke with told us they liked the staff and were happy being at the service. They looked comfortable in the presence of staff members. They also told us staff respected their privacy and dignity and treated them with kindness.

Relatives we spoke with informed us their loved ones received good care from a kind and caring staff team. One told us, "The staff are genuinely lovely, so kind and caring. I have no worries there at all. Communication is good too." And "[Name] is very settled when he stays there. He loves going and the staff are fabulous with him. It's nice that we feel involved with the care he receives too."

We observed positive interactions between staff and those who were staying at Chorley & South Ribble Short Break Services. We saw staff providing kind and compassionate support for people, but independence was also promoted as far as possible. One member of staff commented, "I love working here. It is so relaxed. Everyone seems to enjoy it."

On the day of our inspection all four guests accessed the community to be involved in a variety of social activities. However, whilst they were at the home we saw staff consistently demonstrating kind and caring skills towards them. The staff team very clearly knew people well and had an excellent rapport with them. We noted written policies to be in place in relation to equality and diversity and guests were seen to be treated equally, being offered the same opportunities. Staff interacted well with guests, by using their preferred method of communication, such as signing or hand gestures. There were posters and leaflets displayed within the home, which provided people with basic guidance of the British Sign Language. Records showed that new employees were provided with clear information about the equality and diversity policies, as part of their induction programme.

We noted the staff team supported guests to maintain healthy relationships. Two guests had evidently formed a solid friendship during previous respite periods and therefore the service attempted to coincide their stays, so they could meet up and spend some time together. We noted that one of these people used basic sign language to assist the other to communicate with us.

Everyone who was staying at the home was approached with warmth, dignity and respect. Information was readily available about advocacy and we were told people would be supported to access this service, should they wish to do so. An advocate is an independent person who helps to ensure that decisions are made in the best interests of those they support.

Relatives we spoke with expressed their satisfaction with the home, the staff and the management team for the care delivered to their loved ones.

Daily log sheets were being maintained for each individual, which highlighted any important information. These were made available for main carers to inform them of events whilst guests were staying at Chorley & South Ribble Short Break Services. Records were maintained in a confidential manner in order to protect

people's personal information, in line with data protection guidelines and these showed that guests or their loved ones had been involved in planning their own care. This helped to ensure support was provided in a way which they preferred. We observed staff knocking on bedroom doors before entering and speaking with people in a respectful manner. The plans of care reflected the importance of maintaining the privacy and dignity of guests. This helped to ensure these areas of care were being consistently promoted.



# Is the service responsive?

# **Our findings**

Everyone we spoke with expressed their satisfaction in relation to the care and support, which was offered to them by the staff team.

Relatives we spoke with told us they were always made to feel welcome to the home. Comments we received from them included, "We are more than happy with the service provided. [Name] loves it there. Everyone is so friendly." And "It is such a nice place. So relaxed. We have a meeting with the staff before [name] goes to stay, so her care plan can be updated, particularly if there are any changes."

Relatives were aware of how to make a complaint and those we spoke with told us they would not hesitate in doing so, should the need arise. One person said, "I have never had to make a complaint, but if I needed to, then I would."

During the course of our inspection we pathway tracked the care and support of two guests, who were staying at Chorley & South Ribble Short Break Services for different lengths of time. Support plans we saw were very well written, person centred and comprehensive documents. They reflected people's health and social care needs well and highlighted individual preferences and choices. The care records of the two guests we pathway tracked included information, such as 'My circle of support', 'What makes a good day', 'What makes a bad day' and 'How to best support me and what to avoid.' Individualised support was offered to those who stayed at the home. One person had reported in their support plan that a bad day was when 'The batteries on my hearing aid run out.' We established that a stock of hearing aid batteries were available, should this happen.

The records we saw stated, 'The support plan will be developed with you to ensure we meet your needs and preferences.' It was evident that individuals and family members were involved in the planning of people's care and support. This helped to ensure the wishes and preferences of guests were taken into consideration during the care planning process. We observed staff members offering guests choices whilst they were at the home.

We noted that support plans were reviewed regularly and always prior to subsequent periods of respite care. One relative we spoke with told us, "They (staff) always ring me before (name) goes to stay at the home to see if there are any changes since they were last there and if there is then someone from the home will come out and go through everything with me and (name). It is very well organised." Another relative commented, "There is always a comprehensive written handover before (name) goes to stay. Everything is considered and the special sheet is put in (name)'s care plan." This helped to ensure the staff team were aware of any changes in people's needs, which were reflected well within the support plans we saw. Community professionals had been involved in the care and treatment of those who lived at the home. This helped to ensure that people's health and social care needs were being appropriately met.

Guests we spoke with were aware who their key workers were. This meant there was a member of staff allocated to work with each guest, which helped to promote person centred care and support. Practices

adopted by the home helped to protect guests from discrimination.

We noted a good amount of information was displayed around the home and systems were in place so that people could access records relating to themselves, in accordance with accessible information standards. The home would produce information in various formats, should the need arise, such as easy read, translations and visual aids. This would allow everyone the same opportunities to access relevant information. E-Learning was part of the training programme for the staff team and the home was in the process of transferring care records onto a computerised system. This promoted the use of assistive technology in moving the service forward.

We noted guests to be involved in a wide range of community activities on a daily basis. A mini bus was available to take people out. On the day of our inspection all four guests participated in day care activities within the community and were attending a disco in the evening with support from their care workers. Guests we spoke with told us they thoroughly enjoyed their individual activities and looked forward to staying at the home. One guest told us they enjoyed going in the garden and liked helping with domestic activities, such as cooking, setting the table for meals and washing the pots afterwards. Another regularly attended the gym whist he was staying at Chorley & South Ribble Short Break Services. During our tour of the premises we noted a wide range of activity material for guests to use, such as CD's, DVD's, lego, soft toys and books.

The complaints procedure was readily available for people and this was produced in a pictorial format, so that everyone had access to relevant information about how to make a complaint, should they so wish. All staff we spoke with demonstrated good knowledge of the complaints procedure. A system was in place for the documentation of complaints. However, the recording of investigations and lessons learned could have been more detailed. It is recommended that complaint investigations be more detailed and focus on lessons learned.

Compliments were recorded within the care files we saw. One recent extract read, 'Thank you for supporting (name) this weekend. (Name) had a super time and what a difference it makes having the bus. (Name) had been to the gym (thanks to support worker) and out and about over the weekend. A big thank you to everyone.'



## Is the service well-led?

# Our findings

Relatives we spoke with told us, "They are a fantastic group of staff. I cannot fault them. They are superb." And "The service is as flexible as possible. They do try to accommodate [name] whenever possible and they will change the arranged dates if we need to and if they can."

We found the management team to be open and transparent throughout our inspection. The management team and staff demonstrated their skills and knowledge to provide good standards of care and support for those who stayed at the home. We established that an on call system had been developed for night time emergencies. This demonstrated staff were supported by the management team and were able to contact senior personnel for advice, as was required. Statutory notifications had been submitted to us as required by law, which informed us of things we needed to know, such as deaths, serious injuries and safeguarding incidents. The previous rating of 'Requires improvement', following the last inspection was clearly displayed within the premises.

All staff spoke highly about the manager of Chorley & South Ribble Short Break Service. One commented, "This is a nice place to work. The manager is very approachable. There have been lots of positive changes since she came on board. We can go to her with any concerns." Another described the manager as 'brilliant'. Following our last inspection the provider submitted a detailed action plan to the Care Quality Commission. This outlined how the service was going to meet the regulations with achievable timeframes being introduced. We saw improvements had been made.

Information guides were issued to all prospective guests, which were available in easy read formats and which outlined the services and facilities available at the home. This enabled people to make an informed choice about accepting a place at Chorley & South Ribble Short Break Services.

The information we requested during the inspection was provided and the management team were cooperative throughout the inspection process.

We noted a large amount of relevant information and guidance was available within the office, which was easily accessible by the staff team. This included a wide range of policies and procedures, such as safeguarding, whistle-blowing, the MCA and DoLS. An eye-catching notice board was displayed in the office, which highlighted the five key questions considered by the Care Quality Commission during the inspection process. We were told this was a teaching aid for the staff team, so that they could monitor how the service was meeting each domain.

Certificates of registration were clearly displayed along with the organisations insurance documents.

Records showed that new employees were provided with clear information in relation to the organisation's visions and values as part of their induction programme. Internal systems had been introduced in order to monitor compliance against the regulations. However, this could now be extended to incorporate detailed oversight by the provider, such as unannounced visits supported by comprehensive reports.

A wide range of detailed policies and procedures were in place at the home. These incorporated areas, such as medicines management, complaints, safeguarding, MCA and DoLS, infection control and health and safety. This helped to ensure the staff team were provided with current legislation and up to date good practice guidance.

Staff we spoke confirmed regular staff meetings were held, although discussions with the manager took place as and when needed. Records showed that regular meetings were held for those who lived at the home and their family members or friends.

People who stayed at Chorley & South Ribble Short Break Services and their relatives were offered the opportunity to complete surveys and to provide feedback on a regular basis. This enabled them to express their views about the care and support provided and the facilities and services available at the home. We saw that positive feedback had been received by the home. Extracts included, '(Name) is always very happy when he stays and that is most important', 'Staff are very helpful and understand (name)'s needs well', '(Name) is completely happy with the service provided' and 'All the staff are caring and helpful.'

Staff and relatives we spoke with confirmed that communication was good and regular contact was made with guests and their families. We saw a good number of positive messages had been sent to the staff team by those who had used the service or their relatives. One recent extract read, 'Thank you for all the fun' and another stated, 'To the lovely staff for your kind thoughts and beautiful flowers.'

We established that regular team meetings were held, which covered areas for discussion, such as health and safety, champion roles, infection control, fire safety, healthy eating, safeguarding and MCA. This helped to ensure important information was disseminated to relevant personnel and enabled employees to discuss topics of interest within an open forum, if they so wished.

Records showed that a range of internal audits had been conducted. This helped to ensure various aspects of the service, such as medicines, support planning and accidents and incidents were being periodically assessed. However, it is recommended that these be more structured and completed more frequently, in order to ensure a consistently robust monitoring system is in place.

We noted Chorley & South Ribble Short Break Services had developed good community links by guests accessing a wide variety of activities outside the home. Detailed accounts of activities had been retained within the guest's support files, which demonstrated a holistic approach to their care and well-being. One member of staff told us, "It is a lovely company. The manager is brilliant and the team leader is lovely too."