

Parade Rest Home Limited

# Parade Rest Home

## Inspection report

Raikes Parade  
Blackpool  
FY1 4EY

Tel: 01253293172

Date of inspection visit:  
04 April 2022

Date of publication:  
26 April 2022

### 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

Parade Rest Home is a residential care home providing accommodation for persons who require personal care to up to 14 people. The service provides support to older people, younger adults and people who may have a sensory impairment, physical disability or be living with dementia. At the time of our inspection there were 12 people using the service.

People's experience of using this service and what we found

Some care plans did not hold all the information to guide staff on people's health and behavioural support requirements. We have made a recommendation about this. Staff were unaware what some medicines were prescribed for. We have made a recommendation about this.

Staff were provided with personal protective equipment to protect people and themselves from the spread of infection. People were supported to maintain valued relationships and visitors were welcomed. Staff were recruited safely and had a good understanding about safeguarding people from the risk of abuse.

People received support with their healthcare and nutritional needs. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. Staff training was ongoing and comments from staff were positive on the training and support they received.

Staff supported people to live healthier lives and to be as independent as possible. Staff were attentive and knowledgeable on how to provide end of life care. Observations showed people were relaxed in the company of staff who were respectful in the care and support they provided.

People spoke positively about the food they received. The provider had a complaints procedure which was made available to people they supported. People and relatives told us they knew how to make a complaint if they had any concerns.

The management team had auditing systems to maintain ongoing oversight of the service and make improvements where necessary. Quality assurance processes ensured people were able to give their views of the service and improvements made when they were identified.

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

This service was registered with us on 29 October 2019 and this is the first inspection.

The last rating for the service under the previous provider was good, published on 14 March 2019.

Why we inspected

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

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

We undertook this inspection at the same time as CQC inspected a range of urgent and emergency care services in Lancashire. To understand the experience of social care providers and people who use social care services, we asked a range of questions in relation to accessing urgent and emergency care. The responses we received have been used to inform and support system wide feedback.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Parade Rest Home 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.

### Is the service effective?

Good ●

The service was effective.

### Is the service caring?

Good ●

The service was caring.

### Is the service responsive?

Good ●

The service was responsive.

### Is the service well-led?

Good ●

The service was well-led.

# Parade Rest Home

## 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

One inspector carried out the inspection.

#### Service and service type

Parade Rest Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Parade Rest Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### 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 our inspection there were two registered managers in post. One of the registered managers was also the provider and will be referred to as the provider within the report.

#### Notice of inspection

This inspection was unannounced.

### What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, Healthwatch and professionals who work with the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

### During the inspection

We spoke with four people who used the service and three relatives about their experience of the care provided. We spoke with five members of staff including the provider, registered manager, senior care worker, care worker and administrator. We had a walk around the home to make sure it was homely, suitable and safe. We observed the care and support people received. This helped us understand the experience of people who could not talk with us.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at three staff files in relation to recruitment and a variety of records relating to the management of the service, including policies and procedures were reviewed.

### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with one health professional who had recently visited the service.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks around people's health conditions were not consistently addressed. One person had an underlying health condition, however there was no plan to guide staff on what action to take.

We recommend the provider consider current guidance on managing risks related to people's ongoing health conditions.

- The provider ensured everyone had a personal emergency evacuation plan (PEEP). A PEEP is a plan for a person who may need assistance, for instance, a person with impaired mobility, to evacuate a building or reach a place of safety in the event of an emergency.
- Staff completed accident records which were reviewed by the manager or provider to identify trends.

Using medicines safely

- The provider was not aware of what all the medicines they administered were for.

We recommend the provider follow current guidance on the safe management of medicines.

- Medicines were stored correctly and administered as prescribed.
- Staff were trained to administer medicines safely.
- Staff understood people's individual risks and what actions were needed to reduce or manage risks.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and their human rights were respected and upheld. Effective safeguarding systems were in place and staff spoken with had a good understanding of what to do to ensure people were protected.
- People told us they received safe care and had no concerns about their safety. One person told us, "Yes I feel safe living here. I'm happy with the staff and the building is secure." One relative commented, "[Relative] is very safe at the home."

Staffing and recruitment

- Effective recruitment procedures were in place. This helped ensure people would be supported by staff with appropriate experience and character and checks were thorough.
- The provider ensured appropriate staffing arrangements were in place to meet the assessed needs of the people in a person-centred and timely way. They shared examples of when staffing levels had increased to

meet the changing needs of people being supported.

#### 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 PPE effectively and safely.
- 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 and registered manager supported people to receive visitors at Parade Rest Home. One relative told us, "I visited with my Aunt on Mother's Day. [Family member] is in a safe bubble in there. It is a blessing." Another relative told how their parent had a weekly meal at the home with their spouse.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People received support from a consistent team of staff, who were aware of the support they needed.
- The management team had reviewed all care plans and referenced current legislation to achieve effective outcomes. This supported staff to ensure people received effective and appropriate care which met their needs.
- Peoples rights were protected. Policies and the initial care assessment supported the principles of equality and diversity.

Staff support: induction, training, skills and experience

- Staff praised the support they received from the registered manager and provider, and said they had regular supervisions to review their work and seek feedback. One staff member told us, "[Registered manager] has been there to support my learning."
- The provider ensured staff received regular training to maintain and update their knowledge. Staff confirmed they carried out training in key areas such as safeguarding and infection prevention.

Supporting people to eat and drink enough to maintain a balanced diet

- The registered manager identified people's individual nutritional needs. Care records reflected the help and support people needed to eat and drink.
- Staff knew the help people needed to achieve their best outcomes such as having a fortified diet. One person told us, "The food is alright, they are good cooks." A second person commented, "They [staff] make my breakfast. I can have anything I want. I have no complaints but I'm piling it on bless them."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The registered manager worked effectively with healthcare professionals to ensure people's healthcare needs were met. Documentation showed they worked with other professionals such as GP's, speech and language therapists and district nurses to ensure people's needs were met effectively. In the event of people going to hospital, essential information was provided to support decision making.
- Feedback was positive on the support people received to live healthier lives. One person told us, "[Carer] has been super with me. She has been good with my [health condition], excellent." One health professional commented, "The provider has got her finger on the pulse with problems and is responsive to guidance. They have got people's best interests in mind."

Adapting service, design, decoration to meet people's needs

- People were able to bring their own items into their rooms and to personalise their rooms as they wanted to.
- Corridors were clutter free, lessening risk when people wanted to travel independently around the home.

Ensuring consent to care and treatment in line with law and guidance

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 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. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The registered manager submitted applications to deprive people of their liberty to the local authority when deemed necessary to keep people safe.
- The registered manager consulted with relatives and health professionals when restrictions were identified as necessary and the least restrictive option was used to keep people safe.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity; Respecting and promoting people's privacy, dignity and independence

- People told us they were treated with respect and kindness by caring and competent staff and our observations confirmed this. One relative told us, "It is a caring rest home. The care is really good." One health professional commented, "The home is homely, and they love the people there."
- We saw staff had an appreciation of people's individual needs around privacy. We observed that staff always knocked on people's bedroom doors and looked round the door before entering.
- Humour was used by both staff and people to cement their relationships.
- The provider was able to share examples of how they promoted people's independence. This included supporting people to drink independently and respecting people's wishes to return to their family home and building on their skills to promote this.

Supporting people to express their views and be involved in making decisions about their care

- Staff supported people to make choices in their daily lives. We observed staff seeking people's choices on when they got up in the morning, what they wanted for their meals and where they would like to eat.
- People said staff spent time with them and listened to what they had to say. One person told us, "[Carer] is my mate. They have been good with me and spends time with me."

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Staff were knowledgeable about the people they supported. Not all the care plans reflected the knowledge staff had on what strategies to use to manage people's behaviours.
- Care plans identified people's ongoing health conditions. The care plans did not always guide staff on how to identify if someone was unwell or what action to take should they become unwell.

We recommend the provider review all care plans to ensure the information guides staff in delivering personalised care.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The provider considered, and documented people's communication needs to ensure staff could meet people's individual needs and preferences.
- Staff were knowledgeable on how to communicate effectively with people. One person received intensive support using picture cards to promote their speech, which boosted their confidence, boosted their trust in staff and enhanced their independence.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff supported people to maintain and develop relationships that were important to them. Arrangements were in place to enable people to have visitors.
- People told us they were happy with the activities on offer and had the opportunity to participate or not. Observations showed people were happy in the company of others. One relative told us, "[Family member] has struck up a friendship with [another person living at The Parade]. He has become one of the family."
- The Parade Rest Home had a dog living at the home that had belonged to a person who no longer lived at the home. People enjoyed watching and talking about the dog.

Improving care quality in response to complaints or concerns

- The service had a complaints policy and process. A relative confirmed they had received this and would be confident to make any issues or concerns known to the management team.

- The manager assured us complaints would be taken seriously in accordance with their policy. We looked at records of complaints and found they had not received any.

#### End of life care and support

- The service supported people to have a dignified and pain-free death. One health professional told us, "The provider did their utmost and was attentive to [person] who was receiving palliative care". Palliative care makes you as comfortable as possible by managing your pain and other distressing symptoms when the illness cannot be cured.

# 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a positive culture throughout the home. One person told us, "The leaders here [management], they are all alright. I like them." One family member said, "They [staff] are brilliant with [relative]." A second relative told us, "[Family member] settled in straight away and staff have been brilliant."
- Staff told us they felt supported and valued by the management team. One staff member commented, "If I have any problems, they [management] are there for you. It's like a family here. I look to them as my family."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager had audits to monitor the standard of care provided. Audits reviewed different aspects of care and actions were taken to make any improvements that had been identified.
- The registered manager and provider knew about their duty to send notifications to external agencies such as the local authority safeguarding team and CQC where required.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider and registered manager ensured people and relatives informed of the care and support delivered and any changes that occurred. People and their relatives completed questionnaires and surveys to allow the provider to gain formal feedback on the care and support delivered.
- People and their relatives knew the provider and told us they were accessible to discuss the care delivered.
- The provider ensured staff had the required support to meet their personal challenges and supported their career development.

Working in partnership with others

- The provider, registered manager and staff worked with health and social care agencies to meet people's health and social care needs. People had been referred for specialist support to manage their ongoing complex health needs.