

Unified Care Limited

Redlands Care Home

Inspection report

44-46 Park Road Lytham St Annes Lancashire FY8 1PN

Tel: 01253725835

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Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Redlands is a residential care home in an adapted domestic property in St Annes, providing personal care to 15 people at the time of the inspection. The service can support up to 20 people. The service supports people who may have previously lived a transient lifestyle, experienced problems with drugs and alcohol and mental health conditions.

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

Staff managed people's medicines safely. We have made a recommendation around ensuring all medicines records are accurate and complete. Staff kept the home clean and tidy. Staff managed risks well and had plans to follow in case of emergencies. The service had systems to protect people from the risk of abuse and improper treatment.

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.

The service put people at the heart of the care they received. Staff identified people's needs and preferences and worked to ensure people were happy with the care they received. The service was led by a registered manager who was described as approachable and supportive. The culture at the service was open and inclusive. Staff understood their roles and responsibilities and worked well with external agencies to meet people's needs. The provider monitored the quality of the service using a range of systems.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 10 September 2019).

Why we inspected

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.

The inspection was prompted in part due to concerns received about staff training and culture. A decision was made for us to inspect and examine those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the full report.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the

overall rating. The overall rating for the service has not changed.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Redlands Care Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good •



Redlands Care 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

The inspection was carried out by one inspector.

Service and service type

Redlands Care Home is a 'care home' without nursing care. 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. 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 was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

During our visit to the home, we spoke with six people who used the service. We also spoke with four staff, including the registered manager. Following the inspection visit, we spoke with three external professionals to gain their feedback about the service.

We looked around each area of the home to make sure It was safe, homely and suitable. We spent time observing the care and support people received. This helped us to understand the experience of people who could not or chose not to speak with us.

We reviewed two people's care documentation and multiple medicines administration records, along with associated medicines documentation. We observed medicines administration and checked how medicines were stored.

We reviewed a range of records related to the management of the service, including safety certificates, staff training data and quality assurance systems.



Is the service safe?

Our findings

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

At our last inspection we rated this key question good. rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Some medicines records were not complete and accurate. Some records related to the application of topical creams did not show directions were followed consistently. Where people were prescribed variable dose medicines, staff did not always record the dose administered.
- One person was prescribed a thickening agent for their drinks, to reduce risks around safe swallowing. However, staff were not always recording its use. Discussions with staff provided assurances that they were following professional guidance, however the records were not maintained accurately.

We recommend the provider reviews their medicines management systems, to ensure records are complete and accurate.

• People received their medicines from staff who had been trained, and had their competence assessed, to administer them safely. Where people were prescribed 'as required' medicines, staff produced written instructions and information about how and when these medicines could be given to people, to ensure they were used safely.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. People we spoke with told us they felt safe. Comments we received included, "I'm very happy. I've been here 5 years and I'm very happy with everything. The staff are very good, very respectful." And, "Safe? Oh, aye. I've got a nice room and I'm very well looked after."
- The provider had systems to record, report and analyse any allegations of abuse. Staff had received training to recognise abuse and knew what action to take to keep people safe, including reporting any allegations to external agencies.

Assessing risk, safety monitoring and management

- Staff managed risks to people's safety. They assessed and regularly reviewed risks to people, to manage any identified risks and keep people safe from avoidable harm. Staff were familiar with people's individual risk management plans.
- The provider ensured the environment and equipment were safe. The registered manager ensured equipment was inspected and serviced when it needed to be and had plans to keep people safe in the event of an emergency.

Learning lessons when things go wrong

• Accidents and incidents were used to learn and make improvements. Staff recorded accidents and incidents, which the registered manager reviewed on a regular basis to identify any trends, themes and

areas for improvement. They shared any lessons learned with the staff team, to reduce the risk of similar incidents happening again and improve the safety of the service.

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

• We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- The service was staffed sufficiently. People who used the service told us there were enough staff on duty. Staff told us they felt there were enough staff deployed to meet people's needs and to keep them safe.
- The registered manager followed safe recruitment practices and kept all the records, as required by law. Staff we spoke with confirmed the recruitment process remained the same as at the last inspection.

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 supporting people living at the service to minimise the spread of infection
- 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 responding effectively to risks and signs of infection.
- 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 followed current guidance in relation to visiting. People could receive visitors into the home.



Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection, we made a recommendation to the provider to ensure their systems to assess, monitor and improve the service were fit for purpose. At this inspection, we found the provider had made improvements.

- The registered manager used a variety of method to assess, monitor and improve the quality of the service provided. We saw they had formalised processes since our last inspection. They used audits, along with feedback from people and staff to identify areas for improvement.
- The registered manager understood their legal obligations, including conditions of CQC registration and those of other organisations. We found the service was well-organised, with clear lines of responsibility and accountability.
- The registered manager and staff were experienced, knowledgeable and familiar with the needs of people they supported. People were complimentary about the staff team and the management of the service. One person told us, "[Manager and deputy] are good, nice people."

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

- The registered manager had created a culture that was open, inclusive and put people at the centre of the care and support they received. Staff ensured people's needs were met through ongoing review of their care and referenced current legislation and best practice guidance to achieve good outcomes for people. One person told us, "It's good. They look after you. [Manager] is a very good manager, he knows what's going on."
- The staff team worked well together to achieve good outcomes for people. Staff we spoke with told us about how they worked as team to ensure people received care that met their needs. One said, "We have a good team and a very good level of support."

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 provider had a policy and procedure which provided guidance around the duty of candour responsibility if something was to go wrong. The registered manager knew how to share information with relevant parties, when necessary.

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

- The service engaged with people, others acting on their behalf and staff in an inclusive way. The registered manager used face to face meetings to gain feedback about the service. We saw various topics about the service were discussed in meetings where people were able to influence decision making, for example in relation to menus and activities. One person told us, "I can tell them if I'm not happy with something."
- The registered manager continually engaged with staff. Staff meetings were held, along with individual meetings. This gave staff the opportunity to influence how the service was delivered to people. A staff member told us, "[Manager] is very approachable. His door is always open. We are encouraged to do things for the residents, he's very supportive and open to ideas and suggestions."
- The service worked effectively in partnership with a range of external professionals. This helped to ensure people's needs continued to be met and their wellbeing enhanced.
- Feedback we received from professionals who worked with the service was very positive. One said, "The staff are very polite, pleasant and will ask questions to the appropriate agency to ensure the care provided is suitable for the patient. The staff will not hesitate to ring or email and communication is always maintained." Another said, "Redlands are a truly lovely home, staff are always very helpful and always discuss any concerns. I have never had any concerns with Redlands care home. It is a pleasure to provide support for them."