

Pro-Care Disperse Housing Ltd

# Pro-Care Dispersed Housing Ltd Avondale Lodge

## Inspection report

419 Central Drive  
Blackpool  
FY1 6LE  
Tel: 01253 341118  
Website: None

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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 

### Overall summary

The inspection visit at Avondale Lodge was undertaken on 12 August 2015 and was unannounced.

Avondale Lodge provides care and support for a maximum of 6 people who live with mental health conditions. At the time of our inspection, the service was fully occupied. Avondale Lodge is situated in a residential area of Blackpool close to local shops. It offers six single room accommodation on three floors. Additionally, there is a dining room and communal lounge.

A registered manager was in place. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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.

# Summary of findings

At the last inspection on 16 December 2013, we found the provider was meeting all the requirements of the regulations inspected.

During this inspection, people we spoke with told us they felt safe. Procedures were in place to ensure staff had a good understanding of how to protect people against abuse. There was a relaxed and calm atmosphere within Avondale Lodge and staff used a respectful approach when engaging with and supporting individuals.

The registered manager ensured people were safe when receiving their medicines. For example, medicines were securely stored and associated documents were clearly recorded. One person told us, "The staff look after my medication, which is what I prefer as it keeps me safe."

We found staffing levels at Avondale Lodge were sufficient to meet people's needs. Suitable processes had been followed in the recruitment of appropriate staff. People told us they had confidence that staff were effectively trained and were experienced in their roles.

Care records were well-organised, in-depth and personalised to the requirements of people who lived at the home. Risk assessments were in place to manage potential risks to people from receiving unsafe or ineffective care. There was documented evidence of people's consent to care and support. We noted people were not deprived of their liberty throughout our

inspection. We observed people were fully involved in their care planning and support. Their individual preferences and cultural needs were recorded and respected. One person told us, "I feel well supported."

Mealtimes were flexible with people eating at times that suited their lifestyle. Individuals were supported to eat snacks and drinks throughout the day. Records contained risk assessments to minimise the risk to people of malnutrition and dehydration.

People who lived at the service presented with mental health conditions that required monitoring of their underlying symptoms. Staff had a good understanding of this and had developed caring and sensitive relationships. Where people deteriorated, staff immediately sought advice and support from other providers, such as care co-ordinators and the mental health team.

The registered manager had systems in place to assist people to comment about their care. People we spoke with told us they felt staff and the management team listened to them and acted upon their concerns.

There was a range of regular audits to check the quality of the service. The registered manager had a caring and open approach in their management of Avondale Lodge. People told us the service was well-led and staff said the management team were supportive and approachable.

# Summary of findings

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

The service was safe.

People told us they felt safe and staff demonstrated a good understanding about safeguarding procedures.

Staffing levels were sufficient to ensure people's requirements were met in a timely manner. The registered manager had recruited appropriate staff and completed all the relevant checks when employing them.

We observed medication was administered safely.

Good



### Is the service effective?

The service was effective.

Staff received training and supervision to support them in their roles. People told us they were supported by experienced, knowledgeable personnel.

Care records contained evidence people had consented to their care. Staff had an in-depth, working knowledge of the MCA and DoLS.

People were protected against the risks of malnutrition and said they enjoyed the food provided.

Good



### Is the service caring?

The service was caring.

People and their representatives told us they felt involved in their care planning. Care records were personalised around the individual's requirements.

We observed staff were respectful towards people. People said staff were available whenever they needed advice or support. We noted people's dignity and privacy were maintained throughout our inspection.

Good



### Is the service responsive?

The service was responsive.

Staff worked with people to agree and achieve their goals. Care plans were reviewed with people to ensure they continued to meet their changing needs.

A variety of activities were in place and people were supported to link in with the local community.

An up-to-date complaints policy was in place. People were supported to make a complaint if they chose to.

Good



### Is the service well-led?

The service was well-led.

Good



# Summary of findings

The registered manager had a visible presence within the service. People and staff felt the management team were supportive and approachable. People were assisted to comment about their experiences of care and support.

The registered manager had oversight of and acted upon the quality of the service provided. There was a range of quality audits, policies and procedures in place.

# Pro-Care Dispersed Housing Ltd Avondale Lodge

## 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.

The inspection team consisted of an adult social care inspector.

Prior to our unannounced inspection on 12 August 2015 we reviewed the information we held about Avondale Lodge. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people who lived at the home. We checked

safeguarding alerts, comments and concerns received about the home. At the time of our inspection there were no safeguarding concerns being investigated by the local authority in relation to people's safety at the service.

We spoke with a range of people about Avondale Lodge. They included the registered manager, two staff, including one designated as the house manager, and two people who lived at the home. We also spoke with the commissioning department at the local authority who told us they had no ongoing concerns about Avondale Lodge. We did this to gain an overview of what people experienced whilst living at the home.

We also spent time observing staff interactions with people who lived at the home and looked at records. We checked documents in relation to three people who lived at Avondale Lodge and two staff files. We reviewed records about staff training and support, as well as those related to the management and safety of the home.

# Is the service safe?

## Our findings

All the people we talked with told us they felt safe. One person said, “I feel safe here.” We noted the safeguarding policy and procedures were on display on the notice board at the entrance to the service. This was additionally made available in pictorial format to help people clearly understand what to do if they had concerns. The registered manager told us, “The service users are very aware now that they can raise concerns with me and I will make sure any issues are sorted out straight away.”

Prior to our inspection we received information of concern from the registered manager.

This related to a safeguarding that involved staff and service users. The registered manager had reported this to us and worked with the local authority to address the staffing issues. The management team and staff had worked within their policies and documented actions taken to protect people who lived at Avondale Lodge.

We observed people who lived at the service were happy and settled. The registered manager told us, “The residents are more settled now and are happy how we’ve managed this. They see I have listened to them, acted on their serious concerns and managed the situation.” One person confirmed, “There were some problems recently, but [the registered manager] dealt with them very well. I feel safer now and I feel listened to.”

There were procedures in place to enable staff to raise an alert. When we discussed the principles of safeguarding people against abuse with staff, they demonstrated a good understanding. One staff member explained, “We might involve the crisis team and, where necessary, involve the police, local authority, the care co-ordinator and CQC. I would also inform my manager.” Training records we reviewed showed staff had received related information to underpin their knowledge and understanding.

We checked how accidents and incidents were recorded and responded to within the home. We found accidents had been documented along with a record of actions taken to reduce the risk of further incidents. This meant incidents at the home had been monitored to ensure the recurrence of risk to people was minimised.

We observed signs displayed throughout Avondale Lodge to advise people and staff to boil water before use. This was

in relation to a recent contaminant found in water throughout much of Lancashire. This meant the management team had informed people in urgent and untoward situations to keep them safe.

There was a business continuity plan to demonstrate how the provider planned to operate in emergency situations. The intention of this document was to ensure people continued to be supported safely under urgent circumstances, such as the outbreak of a fire.

Care records contained an assessment of people’s needs on admission. This led into a review of any associated risks. These related to potential risks of harm or injury and appropriate actions to manage risk. They covered risks related to, for example, nutrition, unplanned leave, self-neglect, kitchen access, falls, behaviour management and alcohol use. This demonstrated the registered manager had arrangements in place to minimise potential risks of receiving care to people it supported.

We checked staffing levels the registered manager had in place and noted these were sufficient to keep people safe. A member of staff was on duty at all times to ensure people’s support requirements were met in a timely manner. One person told us, “There’s always staff around, I don’t think there’s any issues with that.” Another person said there was an, “Adequate amount of staff”. The management team told us the registered manager and ‘house manager’ were on call if an urgent situation arose.

We found the registered manager had followed safe practices in relation to the recruitment of new staff. Staff files contained reference and criminal record checks, qualifications and employment history. Interview questions used in recruitment were relevant and specific to the client group being supported. A staff member told us, “I had to submit an application form and I can confirm I did not start work until after my DBS [Disclosure and Barring Service] and two references were in place. I got a lot of support and supervision when I started.”

A member of the management team explained induction support involved introducing new staff to people who lived at the home. We were told, “We discuss the service users’ needs and then look at how to do different things, such as medication.” The management team supported staff until they felt confident to work on their own.

We looked at medication processes to see if people received their medicines safely. This was done in a safe,

## Is the service safe?

discrete and appropriate manner and we noted staff were experienced and well-trained. Medicines were dispensed when people required them. One person told us, "I get my medication when I need it." Associated medication records, including risk assessments, were clear, comprehensive and completed in-line with national guidance. We noted there were no medication risk assessment review dates to ensure people's related needs were updated regularly. The management team assured us this would be addressed as a priority.

There was a clear audit trail of medicines received, dispensed and returned to the pharmacy. Medication was

stored safely and within a clean environment. One person told us, "I have a controlled drug which the staff lock in a separate cupboard in the office, which is always locked when staff are not there. That's really important as it is then safe and secure." We were informed the local pharmacy had arranged a visit on 20 August 2015 to complete a medicines audit. The purpose of this was to check that medication processes were being undertaken safely. This showed the registered manager had systems in place to ensure the safe management of people's medicines.

# Is the service effective?

## Our findings

People told us they felt their support was delivered by experienced and well-trained staff. One person said, “The care is good here, they encourage me to help myself”. Another person commented, “The staff support me really well.”

We reviewed training records and found staff had received information to support them in their role. This included mental health conditions, Mental Capacity Act and medication. Staff had undertaken qualifications appropriate to their role and responsibility. A staff member told us, “I am prepared to pay for my level 3 NVQ [National vocational Qualification] in Mental health. The registered manager is supportive in this and is looking with [the provider] to see if they can support me in any way.” One person who lived at the home stated, “Yes, I think the staff are right for working here. They’re properly trained and I think they do their jobs well. They’re very experienced.” This meant staff were enabled to work effectively in providing care for people who lived at the home.

Staff told us they received regular supervision and appraisal to support them to carry out their roles and responsibilities. Supervision was a one-to-one support meeting between individual staff and a senior staff member to review their role and responsibilities. Records confirmed staff had opportunities to discuss issues they had and to explore their professional development. A staff member told us, “I get supervision every month to check if I had any concerns, training needs, etc. They are useful to help me look at my work and where I can improve.”

Throughout our inspection we noted the atmosphere was calm and welcoming and people were relaxed. Staff interactions engaged with people in a knowledgeable way and had a good understanding of how to support individuals. A staff member told us, “It’s giving people space and allowing them to do things when they’re ready.”

Care records contained documented evidence of people’s consent to their care and preferences around how they wished to be supported. A staff member told us, “We work together and support the service user to get on with their lives. We can’t do that unless the resident decides how they want us to help them.” One person who lived at the home

confirmed, “I have signed to agree with my support.” This meant people’s needs and preferences had been identified and care planned to ensure they did not receive inappropriate support.

Avondale Lodge had policies in place in relation to the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS). CQC is required by law to monitor the operation of DoLS. We discussed the requirements of the MCA and the associated DoLS with the registered manager. The MCA is legislation designed to protect people who are unable to make decisions for themselves and to ensure that any decisions are made in people’s best interests. DoLS are part of this legislation and ensures, where someone may be deprived of their liberty, the least restrictive option is taken.

There had been no applications made to deprive a person of their liberty in order to safeguard them. We did not observe people being restricted or deprived of their liberty during our inspection. One person told us, “They never force me to do anything or stop me from doing what I want. I feel free and in control as much as possible.” Staff demonstrated a good understanding of the legislation and related processes. One staff member explained, “The MCA is about the individual’s rights and not taking this away from them. If people have capacity, then they have the right to make their own decisions, even if we might think they are not always the right decision.”

We carried out kitchen checks and noted cleaning records were in place and that the food preparation areas were clean and tidy. People were supported to make themselves snacks and drinks whenever they wished, ensuring they were protected against dehydration. Mealtimes were flexible with people eating at times that suited their lifestyle. We noted the main meal had only one option. However, we were told if people did not like this they could have an alternative. One person told us, “The food is good. There is plenty to eat and we can have what we want, when we want it.” Another person said, “The foods good, I make suggestions and they provide it”. A staff member told us, “We ask what people want on the day and that includes if somebody wants something different. There’s always a choice.” This demonstrated people’s preferences in relation to nutrition were identified and supported.

We noted the food storage areas and cupboards were well-stocked with a variety of foods. Avondale Lodge had been awarded a five star-rating following their last



## Is the service effective?

inspection by the Food Standards Agency. This graded the service as 'excellent' in relation to meeting food safety standards about cleanliness, food preparation and associated record-keeping.

We saw a communication book was in place to keep staff on different shifts informed about any changes or requirements. This included notes about people's changes in health and forthcoming appointments.

Where an individual's health needs had changed, staff worked closely with other providers to ensure they received

support to meet their ongoing needs. Care records confirmed staff engaged with mental health services and care co-ordinators, for example, to assist people to maintain their support levels. The registered manager told us, "We saw [the service user] was starting to have more panic attacks and his mental health was deteriorating. So we sought professional support and advice and he agreed to go into hospital for additional support." This demonstrated people were supported to maintain their health by having access to other services.

# Is the service caring?

## Our findings

We observed staff interacted with people by using a friendly and supportive approach. One person told us, “I can go to the staff anytime. They’re very approachable.” Another person stated, “They care for us here and they are compassionate.” A staff member told us, “I enjoy my job. It’s very challenging, but I care about the service users and we’re very close.”

We observed staff consistently spending time with people who lived at the home, sitting and talking in a friendly and reassuring manner. A staff member told us, “I’ve got to know the residents really well and I can tell when they’re not right. I’ll go and have a chat with them to see if they need anything.” Additionally, where appropriate, staff challenged people about their behaviours using a supportive and gentle approach. We noted staff did this in a non-judgemental and non-patronising manner, working with people at their own pace. One person told us, “The staff push me to look after myself and encourage me to be as independent as possible. They do it gently.”

We found people who lived at the home cared for each other. For example, we heard an individual shouting upstairs. Another person immediately went to a staff member, who had been out of earshot, and quietly explained the situation. The staff member immediately went to check on the individual and returned to reassure the other person that they were settled again. One person told us, “They care and I know when I need support, or just a chat say, they’re there straight away. They give me time and are also friendly, which is exactly what I need.”

Care records we reviewed included details about people’s specific and individual requirements, for example, in relation to their religion and sexual orientation. A staff member told us, “We sit down with the service users in

one-to-ones and check their likes/dislikes and any concerns they have. We also have key work feedback sessions.” This meant staff had discussed if people had any needs in relation to their rights under the Equality Act 2010.

When talking with staff they showed a good knowledge of people’s likes, dislikes and preferences. A staff member told us, “We have two service users who are vegetarian, so we make sure they get what they want to eat.” They talked about getting it right for people, showing a person centred approach rather than it being a task-lead service. One person said, “I’ve lived here [for many years] and seen a lot of changes. This is the best it’s been. Can’t say better than that. I’m very happy living here.”

People’s records were personalised and detailed. Goals were agreed and set to help people achieve as much independence as possible. One person told us, “They use this ‘star’, which helps me to see how I’m progressing.” Documents evidenced people or their representatives had been involved in care assessment, planning and review. One person said, “They asked me about my care and discussed what sort of support I need.” A staff member explained, “It’s important we involve the residents in their care. This is about prompting them and understanding what they feel is their needs.”

The policy about visiting was on display at the entrance of the service so that relatives and friends were clearly informed. Visiting times were ample to meet people’s related needs and clearly outlined associated rules, such as not bringing alcohol into the home. One person told us, “I don’t have any relatives, but I have a friend from ‘Blackpool Buddies’. They never stop him from coming and I can see him whenever.”

We observed staff protect people’s dignity, for example, by knocking on people’s doors and engaging in a respectful manner. One person told us, “They are compassionate and respect your privacy. There is a good atmosphere in the house, it’s pleasant.” This demonstrated staff had a caring approach because people’s privacy was promoted.

# Is the service responsive?

## Our findings

People told us they felt staff were responsive to their needs and supported them to maintain their independence. One person said, “They encourage you gently. Sometimes we can be a bit lazy, so they push us a bit. It’s good because it makes me take some responsibility.”

The philosophy of the home, management team and staff centred upon assisting people to be as independent as possible and to meet their agreed goals. Care records contained a document called a ‘recovery star’ that measured how people were managing such areas as their goals, life skills, self-care and relationships. This was evaluated on a regular basis to check how individuals had progressed and staff told us they used the document to discuss care with service users. A staff member told us, “We use the ‘recovery star’ as a way of asking the service users ‘What do you want to do? How do you want to get better?’”. This meant the registered manager and staff maintained people’s independence by checking their progress and being responsive to their needs.

Care records were comprehensive and personalised to the requirements of individuals who lived at Avondale Lodge. These were updated to meet people’s changing needs and records were signed and dated by staff. People told us staff used their records in their key discussions to identify how they were progressing with their goals and to amend support where this was not helping. One person said, “I have a care plan, which was discussed and agreed with me. I meet regularly with one of the staff to discuss this and add any changes if need be.” A staff member told us, “I feel for the guys and I love working with them. It’s great seeing them improve and going back out there and getting on with their lives.” This demonstrated people were protected against the risks of receiving inappropriate care because staff worked with them to update their plans and respond to their changing needs.

Staff demonstrated they had a comprehensive understanding of each person in their care. Avondale Lodge was a small home and we were told the staff worked and communicated together to reflect upon how responsive

they were to people’s requirements. One staff member said, “I was quite upset when [a service user] went into hospital recently. I wish I could have done more to prevent that. I’ve been thinking about what I could have done differently.”

During our inspection, we observed people were comfortable and there was a relaxed atmosphere within the building. A variety of activities were provided for people’s well-being, which included quiz and film nights, accompanied with a food buffet, and interactive computer games. Two people were supported to learn a musical instrument, whilst others chose to participate in the home decoration and gardening. A staff member told us, “Two of our residents access a local voluntary group called ‘Blackpool Buddies’, who come and visit them and take them out to go shopping, for example.”

Additionally, the provider had employed an outreach worker who spent time between the four homes within the organisation. Their role was to support people with their activities and to achieve their planned goals, as well as to attend appointments with individuals who requested this. A staff member told us, “We have an outreach worker twice-a-week who takes people to their activities, appointments, etc.” This showed people were supported to engage with the local community and to improve their well-being through activities.

The notice board at the entrance to the service contained details about the home’s complaints procedure. This was made available in different formats, such as pictorial posters, to help people to fully understand how to make a complaint if they chose to. Details included reporting concerns to the Local Government Ombudsman if people felt their complaint was not being managed appropriately. One person told us, “If I had a problem I feel I could go to the staff or manager and I am confident they would deal with it.”

At the time of our inspection no complaints had been received by the registered manager. Staff were able to describe how they would deal with a complaint, including referring the matter to the registered manager. Staff awareness and information made available to people had been updated following a recent safeguarding. This showed the registered manager had acted to ensure people were fully supported to make a complaint if they chose to.

# Is the service well-led?

## Our findings

People told us they felt the home was well-organised and led by the management team who had a visible presence. One person said, “The managers are ok. They listen to what I have to say. It feels like a family and Avondale is well-organised and managed.”

We saw evidence the registered manager followed up on issues and these were managed effectively. There was good, visible leadership and the registered manager showed a thorough understanding of their role. Staff understood what was expected of them. A staff member told us, “It’s good leadership here. [The registered manager] is very supportive. He listens and has good leadership skills”.

We observed the registered manager worked with staff in providing support and had a good understanding of people’s requirements and personal histories. One person said, “They run it how it should be”. Staff told us the registered manager was supportive and approachable. One staff member said, “[The registered manager] is ok. If he can help in any way, he will do. He’s very supportive and if there is anything I need to know I feel I can to him or [the provider].” This showed Avondale Lodge was well-led because the registered manager had a visible presence about the home.

There was a range of quality audits in place to monitor the service provided to ensure people received safe and appropriate care. These included checks of health and safety, medication and fire safety and ensured the service provided remained consistent. Policies and procedures were in place to underpin staff knowledge and understanding in relation to care practices. This meant the registered manager monitored whether the home was maintaining an effective service.

We checked and found hot water was available throughout the home. The service’s gas and electric safety certification were up-to-date. Fire safety and equipment was monitored and maintained and checks were documented. This demonstrated the registered provider had oversight of and had checked environmental safety.

We were told residents’ meetings were held monthly to check the service provided and to address any issues. A member of the management team said, “The agenda is set from the last meeting and all the monthly reports. It means we check what concerns there were and what we still need to address.” We saw the minutes from the last meeting and noted discussion topics included activities, meals, laundry issues and appointments. We found concerns raised at the previous meeting were followed up. This showed people’s concerns were listened to and acted upon to improve their quality of care.

People told us they were further supported to comment about the service through satisfaction questionnaires. These were retained in people’s care files so staff could review them when support plans were being updated. Surveys covered a variety of areas to check the individual’s experiences. These included support and care; how safe people felt; staff regard to their privacy and dignity; respect for cultural and religious needs; involvement in care; and their understanding of how to complain.

We reviewed completed forms from the last survey, which were positive about the quality of the service provided. One person told us, “As things stand, I wouldn’t change anything about Avondale. We are able to talk about any concerns or problems in our resident meetings or our one-to-ones.”