

Oakleaf Care Limited Clifton Lawns

Inspection report

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Ratings

Overall rating for this service	Good	
Is the service safe?	Good	
Is the service effective?	Good	
Is the service caring?	Good	
Is the service responsive?	Good	
Is the service well-led?	Good	

Overall summary

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 and to pilot a new inspection process being introduced by CQC which looks at the overall quality of the service.

Clifton Lawns is registered for up to 18 men who have severe and enduring mental health needs and require ongoing care and rehabilitation. There were 15 people living at the home on the day of our inspection. This was an unannounced inspection. During the inspection we spoke with five people who used the service, two support workers, the deputy manager, the registered manager and a visiting community based professional. A registered manager is a person who has registered with the Care Quality Commission to manage the service and has the legal responsibility for meeting the requirements of the law; as does the provider.

We last inspected this service on 31 December 2013 when we found it was meeting the regulations we reviewed.

Summary of findings

We found that people living in Clifton Lawns felt safe. Staffing levels were flexible in order to meet the individual needs of people who used the service.

Staff understood their responsibilities under the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards (DoLS). We found action had been taken were necessary to ensure people's capacity to make their own decisions had been assessed. Where any restrictions were in place we found these were legally authorised under the Mental Health Act 1983 or with people's consent.

People received the support they required to take their medicines as prescribed. Staff responsible for administering medicines were regularly assessed to ensure their practice was safe.

Staff received a range of training and told us they were supported so they could deliver effective care. People reported the food was good. Where appropriate people who used the service were supported to make their own meals.

We observed good interactions between staff and people who used the service. People told us staff treated them with dignity and respect and were supportive in helping them to achieve their goals. This was confirmed by feedback from professionals we contacted prior to the inspection. People's needs were assessed and regularly reviewed so that staff could deliver personalised care and support. Staff ensured they worked closely with the wider multi-professional care team to ensure people's needs were met.

Systems were in place to record and review complaints. People were encouraged to express their views about the service they received. Records we looked at indicated people had been satisfied with the way any complaints they had made had been dealt with.

People who used the service were supported to take part in individual and group activities both in the home and in the community. These activities were designed to support people to maintain and develop the skills they needed to progress to more independent living.

Staff told us they enjoyed working at Clifton Lawns and felt well supported by the registered manager and other staff in the home. People who used the service, staff and community based professionals told us registered manager was approachable and open to ideas to improve the service.

The registered manager had systems in place to regularly monitor and assess the quality of care provided in Clifton Lawns. Arrangements were in place to seek and act upon the views and opinions of people who used the service. Community based professionals who were involved in supporting people were also asked to provide feedback on the service provided at Clifton Lawns.

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. Staff we spoke with knew how to keep people who used the service safe. Staffing levels were flexible to meet people's individual needs. Staff understood their responsibilities under the Mental Health Act 1983, the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards (DoLS). People were not restricted in the home unless this was legally authorised. Arrangements were in place to ensure medicines were safely administered. 	Good	
 Is the service effective? The service was effective. Staff received a range of training and told us they were well supported to effectively undertake their role. People were encouraged to maintain a healthy diet. They told us the quality of food served in the home was good. People were also offered support to prepare their own fresh food. People were supported to maintain good physical and mental health through regular monitoring in the home and attendance at external appointments. 	Good	
Is the service caring?The service was caring. People who used the service told us staff were kind, caring and supportive in helping them achieve their goals.People told us they were treated with dignity and respect. This was confirmed by the positive interactions we observed between people who used the service and staff during our inspection.	Good	
 Is the service responsive? The service was responsive to people's needs. People told us they were involved in agreeing how their care and support needs should be met. Care records showed people had their needs assessed and regularly reviewed both by staff in the home and the wider care team. Any changes to people's care plans were documented to allow staff to deliver responsive care. We saw that complaints were appropriately handled. Records indicated people had been satisfied with the way their concerns had been dealt with. 	Good	
 Is the service well-led? The service was well-led. People who used the service, staff and community based professionals reported the registered manager was approachable, supportive and open to ideas to improve the service. There were systems in place to regularly assess and monitor the quality of the service provided in Clifton Lawns. Arrangements were in place to seek and act upon feedback from people who used the service and community based professionals who visited people at Clifton Lawns. 	Good	



Clifton Lawns Detailed findings

Background to this inspection

We visited the home on 30 July 2014 and spoke with five people who used the service, two support workers, the deputy manager, the registered manager and a visiting community based professional.

The inspection team consisted of a lead inspector and an inspection manager.

Before our inspection we reviewed the information we held about the service including notifications the provider had made to us and the pre-inspection information pack that they had completed. We contacted the Local Authority safeguarding team and the commissioners of the service from four areas to obtain their views about the service. We contacted 10 community based health and social care professionals who were responsible for monitoring the care and support people received at Clifton Lawns and received feedback from three of these professionals. This helped us inform what areas we would focus on as part of our inspection. During the inspection we observed care and support in the communal areas of the home. We looked at the care records for three people who used the service and medication records for a further four people. We also looked at a range of records relating to how the service was managed; these included training records and policies and procedures.

This report was written during the testing phase of our new approach to regulating adult social care services. After this testing phase, inspection of consent to care and treatment, restraint, and practice under the Mental Capacity Act 2005 (MCA) was moved from the key question 'Is the service safe?' to 'Is the service effective?'

The ratings for this location were awarded in October 2014. They can be directly compared with any other service we have rated since then, including in relation to consent, restraint, and the MCA under the 'Effective' section. Our written findings in relation to these topics, however, can be read in the 'Is the service safe' sections of this report.

Is the service safe?

Our findings

We found the service was safe. All the people we spoke with who used the service told us they felt safe in the home. No one expressed any concerns about bullying or harassment in Clifton Lawns. We noted the most recent satisfaction survey completed in May and June 2014 by people who used the service included positive responses about the care and treatment people received in the home. One person commented, "Compared to other places I have stayed this is the best. I like most of the residents and staff. I like the overall cleanliness and facilities and more important I feel safe and secure." Another person stated, "I am happy with the way I am treated and how my personal needs are met."

Staff we spoke with told us they would always spend additional time with people who used the service if there were concerns that a deterioration in their mental health might make them vulnerable in the home.

We saw a flow chart was on display in the reception area of the home which informed people what action they could take if they had any concerns about their own welfare or that of other people in the home. This indicated the home supported people who used the service to understand how to keep themselves safe.

All of the professionals we spoke with or received feedback from were positive about the support provided at Clifton Lawns and had no concerns about the safety of people who lived there. This positive feedback was repeated in the responses we saw from a questionnaire sent to community based professionals by the provider that asked their opinion of the home.

Staff told us they had received training in the safeguarding of vulnerable adults. This was confirmed by staff training records we looked at. All the staff we spoke with were able to tell us how they would respond to allegations or incidents of abuse; they also were the aware of the lines of reporting concerns in the home. Information we reviewed prior to the inspection provided evidence that the registered manager had reported safeguarding incidents to all relevant authorities including CQC and, where necessary, the police. This should help ensure measures were put in place, where necessary, to protect the safety of people who used the service and others. All the staff we spoke with told us they had received training in both the Mental Health Act 1983 and the Mental Capacity Act 2005. Policies and procedures were in place to provide guidance for staff about their responsibilities under these pieces of legislation which are in place to safeguard the rights and responsibilities of people who may not consent to their care and treatment or may lack the capacity to make some of their own decisions.

Records we looked at showed seven people were required to live at Clifton Lawns under the provisions of the Mental Health Act 1983. Care files clearly recorded what restrictions were authorised for people under this legislation. Staff demonstrated to us they understood what this meant for people's day to day care and treatment.

Staff we spoke with were able to tell us how they supported people to make their own decisions wherever possible. One person who used the service told us staff had respected his decision to change his care plan and were encouraging him to consider other activities to promote his recovery and well-being. From records we looked at we saw another person who had capacity to consent to decisions about their care had consented to a care plan which included staff placing restrictions on the amount of money given to them each day in order to safeguard their health.

Records we looked at provided evidence that, where necessary, assessments had been undertaken of people's capacity to make particular decisions. One care plan we looked at included an assessment of a person's capacity to decide whether to smoke. We saw this assessment had been completed in accordance with the principles of the Mental Capacity Act. This meant the person's rights had been protected as unnecessary restrictions had not been placed on them.

Staff were able to tell us what action they would take if they considered they needed to place any restrictions on individuals who lived at Clifton Lawns which were outside those authorised for certain people who used the service under the Mental Health Act. Staff understood the need to comply with the principles of the Mental Capacity Act 2005 and to ensure any restrictions, to which a person was unable to consent, were legally authorised under the Deprivation of Liberty Safeguards (DoLS). Records we looked at confirmed staff had followed the correct legal

Is the service safe?

procedure when they considered a person might need to be deprived of their liberty. This should help ensure people were not subject to restrictions which were unlawfully placed on them.

We noted risk assessments were in place which detailed the action that needed to be taken to safeguard people in the home from the risks of substance misuse, deterioration in their mental health and the risk of not taking their medicines as prescribed. We noted restrictions on people's freedom were minimised as much as possible in order to support people to access community resources and to maintain contact with family and friends.

People we spoke with told us they received the support they needed to take their medicines as prescribed. We noted, where it was assessed as appropriate, people were supported to take responsibility for their own medication in a staged approach which was monitored by staff. This meant there were systems in place to support people to take those risks which had been agreed appropriate by their care team.

Where staff were responsible for the administration of people's medicines we saw systems were in place to record what medication people had taken. We looked at the Medication Administration Record (MAR) charts for four people who used the service and found these were fully completed. Risk management plans were in place to record what action staff should take when people needed to take their medication away from the home. We also saw regular checks were undertaken by the registered manager to ensure nursing staff in the home were able to safely administer medication to people who used the service.

We looked at the files held for three staff who were employed in the service. We saw there were robust recruitment and selection procedures in place which met the requirements of the current regulations. All the staff files we reviewed provided evidence that the registered manager had completed the necessary checks before people were employed to work in the home. This should help protect people against the risks of unsuitable staff. We saw the registered manager maintained a record to ensure that nursing staff were registered with the Nursing and Midwifery Council (NMC). This should help ensure people received care and treatment from nursing staff who were required to meet national standards and code of conduct.

People we spoke with told us there were always enough staff on duty to meet their needs. We saw evidence that people were supported by staff to undertake individual and group activities; these included voluntary work at a local farm and attendance at college courses. Staff we spoke with told us people who used the service were encouraged to book appointments or activities they wanted to do in the diary so that staffing levels could be organised to accommodate these. They told us they always had enough time to spend with people on an individual basis. This indicated there were enough staff to keep people safe and meet their individual needs.

Is the service effective?

Our findings

We found the service was effective. This was because people who used the service told us they were supported by staff who knew them well and had the right skills and knowledge to meet their needs. One person told us, "Staff support you with anything you want to do." Comments in the recent satisfaction survey completed by people who used the service included, "Staff are polite, staff are motivated and kind and always looking after my needs" and "They [the staff] let you do more than other places and give you the opportunity to do the right thing."

Feedback we had received from community based professionals prior to the inspection confirmed the care and treatment provided at Clifton Lawns supported people who used the service to be as independent as possible.

We spoke with a community based professional who was visiting on the day of the inspection. They told us staff communicated effectively with them and were always receptive to any suggestions or advice they gave. They said they were pleased that staff had been able to manage the complex needs of the person they were visiting and as a result had succeeded in keeping the person out of hospital for three years. This indicated the service was effective at meeting people's health and social care needs.

We spoke with two of the support workers on duty on the day of our inspection. They told us they enjoyed working at Clifton Lawns and felt they received training which enabled them to be effective in their role; this included mental health awareness, break away and de-escalation techniques; this training is designed to support staff to work effectively with people with complex mental health needs whose behaviour might challenge the service.

All the staff we spoke with confirmed they had received an induction when they started work at Clifton Lawns. This included shadowing experienced staff and completion of mandatory training such as fire safety, safeguarding adults, infection control and food hygiene. Staff confirmed they had felt well prepared for their role before they were expected to work independently in the home. The registered manager told us all staff were expected to successfully complete a probationary period, although, where necessary, the length of this probation period could be extended to support people to achieve the standard required to work effectively in the home. This should help ensure people were supported by staff who had the necessary skills and knowledge to meet their needs.

Staff told us and records confirmed they received regular supervision from more senior staff. The registered manager told us supervision sessions were used to promote the professional development of all staff. This was confirmed by staff who told us they had been supported to gain nationally recognised qualifications in health and social care.

We spoke with the registered nurse on duty who also had the role of deputy manager in the home. They told us they felt the staff team worked well together and roles and responsibilities were appropriately delegated in order to ensure people's needs were met effectively. The deputy manager also told us the registered manager was in the process of sourcing leadership training which they would be supported to access to promote their professional development. This showed there were plans in place to develop the knowledge and skills of staff.

The registered manager told us some people who used the service had requested staff undertake training in understanding substance misuse in order to better understand their needs. We were told the registered manager was in the process of organising this training as well as training in working with people with a learning disability since this had been identified as an area in which staff would benefit from additional knowledge and skills. This demonstrated the registered manager was striving to ensure best practice to meet the needs of people in the home.

The registered manager told us senior staff had recently received training in the use of the 'recovery star' in Clifton Lawns. This is a nationally recognised tool which supports people who use services to work collaboratively with staff to identify what is important to them and the goals they wish to achieve. We were told the intention was to introduce the concept of the recovery star to people who used the service and support workers over the next few weeks. Nursing staff would then work collaboratively with people who used the service and their support workers to develop recovery based care plans. This should help ensure people received the support they wanted and needed to progress in Clifton Lawns.

Is the service effective?

People who used the service told us the food provided at Clifton Lawns was of good quality. One person commented, "Meals are really good." We saw positive feedback had been given about the meals in the resident survey. Comments people made included, "Fantastic food and service provided" and ""Always good food."

We saw people who used the service were encouraged to maintain or develop their independent living skills by taking part in 'shop and cook' sessions. The deputy manager told us people were given a budget for these sessions and were expected to purchase fresh ingredients for their meals. This should help promote healthy eating for people who used the service. From the care records we looked at we saw people in Clifton Lawns were supported to access health care services in relation to their mental and physical health needs. This included attendance at the well man clinic at the local health centre as well as appointments with podiatrists, opticians and GPs. Physical health care plans were in place to identify people's needs and included the action staff should take to support people to meet these needs. Nurses in the service completed monthly health checks with people. Staff we spoke with told us they encouraged people to take part in physical activities including a local gym as well as organised walks. This indicated people were supported as much as possible to maintain good physical and mental health.

Is the service caring?

Our findings

We found the service was caring. People who used the service told us the staff were kind and supportive. One person told us they had experienced a few problems with the attitude of staff in the past. However, these had been reported to the manager and there had been no further instances of behaviour which concerned the person. This indicated people were listened to in Clifton Lawns.

We saw people who used the service had made positive comments about staff in the satisfaction survey. These included, "All the staff are nice and it's a nice place to live" and, "I am happy with the staff overall." During our inspection we observed positive interactions between staff and people who used the service. This included staff encouraging people to decide what activities they wished to do in the day as well as engaging them in using the facilities available in the home, such as the pool table and computers.

We received positive feedback about staff from community based professionals who responded to our request for information prior to the inspection. One professional commented, "I have been impressed with the untrained staff who have been caring and sensitive to my client's needs." Another professional told us, "I have found that staff have responded quickly and appropriately to any requests I have made to them in respect of providing information or care plans and find the team accessible and approachable. Senior staff make themselves available for discussion whenever needed and I have noted a caring attitude on visits and a willingness to work with service users to identify and meet needs from their perspective where possible."

People who used the service told us they were involved in planning their own care. One person commented, "I can decide what's in my care plan." We saw people had signed care plans to indicate their agreement with the level of support which they were to receive. People were encouraged to retain a copy of their care plan for their own reference and staff had documented when this had been refused. Records we looked at showed regular community meetings took place in Clifton Lawns. These were used as a forum to encourage people to express their views about the service they received and to make any suggestions about how things could be improved or developed. Minutes from the most recent meeting were on display on the notice board in the entrance hall. We saw people had been encouraged to consider activities in which they would like to become involved; these had included opportunities for volunteering in the local community and visits to local attractions.

We saw people had also been consulted about receiving therapeutic earnings; this is a small amount of money, which does not affect people's benefits, which would be given to them for completing chosen tasks in the home. This was intended to encourage people to continue to develop their independent living skills and sense of community in the home. Records showed people who used the service had voted to accept this scheme in the home. The registered manager told us this vote had been the week before our inspection so they were in the early stages of introducing the programme and would continue to review its success in motivating people to participate in tasks in the home.

The registered manager told us people were encouraged to access advocacy services including Independent Mental Health Advocates (IMHA) when people were subject to restrictions authorised under the Mental Health Act; access to these services would help ensure people understood their rights and were supported to express their views about the care and treatment they received. People who used the service told us staff treated them with dignity and respect. We saw people had individual bedrooms with en-suite facilities. This meant they were able to have the privacy they needed in the home. Facilities were provided for relatives and community based professionals to see people who used the service in private. A multi-faith room was available for people who used the service to help meet their religious and cultural needs.

Is the service responsive?

Our findings

We found the service was responsive to people's needs. People who used the service told us they were able to decide what was included in their support plans. Records we looked at provided evidence that care and support plans were personalised and based on an assessment of the needs and risks of each individual. Care plans we saw included those related to medication, social needs and budgeting. Staff told us care plans were discussed regularly with people who used the service to ensure they continued to be relevant to their needs.

We were told people who were referred to the service were able to undertake a process of gradual transfer to the home. This meant staff in Clifton Lawns were able to develop a relationship of trust with people and involve them in developing a care plan to meet their health and social care needs while they were at the home. Records we looked at showed community based professionals had commented positively on the admission process to the home. One person had stated, "The admission processes were well handled and allowed for a gradual transfer of the service user to manage their anxiety." This indicated staff were able to respond flexibly in order to meet the individual needs of people referred there.

Systems were in place to ensure the service responded to people's changing needs. These included daily handovers, review meetings with the person's key worker in the home and regular multi-professional review meetings with each person's care team. We saw people were supported to attend these meetings, with the involvement of advocacy services if necessary, in order to express their views about the care and treatment they received in Clifton Lawns.

Regular community meetings took place in the home. These were a forum for people to raise any suggestions or concerns about their experience in Clifton Lawns. One person told us, "We have community meetings where we are asked for our ideas". People were also given the opportunity to complete satisfaction surveys in which they were asked their views about the care and support they received in the home. We saw people had made very positive comments in the most recently completed survey. Comments included, "I like the way the home is run and don't think it could be made better" and, "I'm generally happy with the way things are progressing".

Professionals we contacted who visited the home regularly or commissioned the service provided in Clifton Lawns told us they found staff to be responsive to any suggestions they made regarding people's individual care and treatment. This should help ensure people received care which was appropriate to their individual needs.

People told us there was a range of activities available for them to participate in both in the home and in the local community; this included the use of computers, fitness sessions and a walking group. We found people who used the service were encouraged to become as independent as possible with staff support tailored to meet their individual needs.

We asked people if they knew how to make a complaint if they had any concerns about the care and support they received in Clifton Lawns. We were told any concerns would be raised with the manager. All the people we spoke with were confident they would be listened to and taken seriously if they made a complaint.

We saw complaints forms were readily available in the home. This meant people were encouraged to give their feedback about the service they received. A log of complaints was maintained by the registered manager. We saw evidence that all complaints had been investigated in line with the policy and procedure for the home and that people were satisfied with the outcome of their complaint.

Is the service well-led?

Our findings

The service was well-led. A registered manager was in place who had been in post for five years. A registered manager is a person who has registered with the Care Quality Commission to manage the service and has the legal responsibility for meeting the requirements of the law; as does the provider.

People who used the service and staff told us the registered manager was very approachable and was always ready to listen to any concerns or suggestions. One person told us, "I would speak to the manager if I had a complaint and they would look into it." This view about the approachability of the manager was confirmed in the positive responses we saw in the most recent satisfaction survey completed by people who used the service.

Staff told us they enjoyed working in Clifton Lawns. They said they felt well supported by all members of the staff team. One staff member told us the registered manager was always keen to receive ideas from staff about how the service could be improved.

The registered manager told us they had focused on establishing the reputation of Clifton Lawns as a provider of excellent mental health care. They told us they had developed good relationships with commissioners of services and with community based professionals which had led to an increase of referrals to the home. All the feedback we received from professionals prior to the inspection confirmed they considered the service provided in Clifton Lawns was good. The visiting professional we spoke with during the inspection told us they would have no hesitation in recommending the service to others.

Staff told us they were aware of the whistle blowing (reporting poor practice) policy in the home and would have no hesitation about raising any concerns with the registered manager or if necessary any of the board of directors responsible for overseeing the service provided by the home. We were told the board of directors had regular meetings at Clifton Lawns and people who used the service were encouraged to speak to them if they had any issues they wanted to raise. This indicated there was an emphasis on maintaining an open culture throughout the home.

Quality assurance systems were in place in Clifton Lawns including regular audits of care plans, medication administration records and health and safety in the home.

We saw actions had been taken where necessary when issues had been identified. This indicated the registered manager was striving to continuously improve practice in the home.

We saw systems were in place to review learning from incidents. This included staff working closely with community based professionals to review whether people's needs could continue to be met at Clifton Lawns or whether a more appropriate placement needed to be sought. On the day of the inspection we noted one person was supported by staff to return to Clifton Lawns from hospital, where they had been readmitted following an incident at the home. We saw risk management plans were in place for staff to follow to try and ensure further incidents were avoided.

The registered manager told us they recognised the need to ensure the care and support delivered in the home was in line with best practice. In order to achieve this they told us they received regular updates regarding national guidelines which were then implemented in the service as relevant. They told us they were also involved in attending local partnership meetings and care home managers meetings in order to benchmark the service provided in Clifton Lawns against that provided in other homes.

The registered manager told us they recognised the key challenge of the service was to continue to motivate people to develop the skills required for more independent living. However, they told us they continued to strive for this by ensuring the culture of the home was that which valued people who used the service as individuals and promoted their right to lead their own care as much as possible. Our discussions with staff confirmed they understood the values which underpinned the philosophy of the home.

The registered manager told us the home had developed strong links and partnerships with community organisations. These were used to support people who lived at Clifton Lawns to develop their confidence and skills in a range of settings. People who used the service told us they valued the support they received from staff to develop and maintain links with friends, family and the wider community.

The visiting professional we spoke with during our inspection told us they had been impressed by the actions of the registered manager in ensuring the necessary care plans and risk assessments were in place for a person to

Is the service well-led?

spend time away from the home with their partner. This provided evidence the registered manager was proactive in trying to ensure people received the care and support they wanted in a safe and appropriate manner.