

Prime Life Limited

Clarence House & The Granary

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 ●

Summary of findings

Overall summary

Clarence House & The Granary is a residential care home providing personal care for up to 21 people who live with learning disabilities. The accommodation consists of two houses situated in the same grounds. Clarence House can accommodate up to 12 people; The Granary can accommodate up to nine people. At the time of the inspection 18 people were living at the home.

The service had been developed and designed before Registering the Right Support and other best practice guidance was introduced. The service was a large home, bigger than most domestic style properties. However, the size of the service having a negative impact on people was mitigated by the building design fitting into the residential area. There were deliberately no identifying signs or anything else outside to indicate it was a care home.

The principles of Registering the Right Support reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. The service applied these principles.

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

People using the service received planned and co-ordinated person-centred support that was appropriate and inclusive for them. People's care and support focused on them having as many opportunities as possible to gain new skills and become more independent.

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.

People were involved in developing and reviewing their care plans and they had regular opportunities to share their views and opinions.

Staff knew people well and treated them with respect and kindness. They understood the importance of maintaining people's privacy and dignity.

Risks to people's health, safety and welfare had been identified and management plans were in place to minimise those risks. People were supported by staff who understood how to recognise and report any signs of abuse. Medicines were managed safely and in line with good practice guidance.

There were enough staff, who were well trained and supported to meet people's needs. There were systems in place to ensure new staff were recruited safely and were suitable to work with people who lived in the home.

Staff ensured people had access to appropriate healthcare services and their health needs were met in a

timely manner. They supported people to eat and drink enough to maintain their health.

People were encouraged to take part in their local community and engage in hobbies and interests of their choice. They were also supported to maintain relationships with family and friends.

There was an open and responsive culture within the home and systems to monitor the quality of services and drive improvements were in place.

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 25 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Clarence House & The Granary

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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Clarence House & The Granary is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

This inspection was announced.

We gave the service a short period of notice of the inspection. This was because people are often out and we wanted to be sure there would be people at home to speak with us.

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 who work with the service. We used all of this information to plan our 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.

During the inspection

We spoke with eight people who lived at Clarence House & The Granary about their experience of the care provided. We spoke with seven members of staff including the registered manager, two senior support workers, two care workers, the cook and the maintenance person.

We reviewed a range of records. This included three people's care records and multiple medication records. A variety of records relating to the management of the service, including staff supervision and quality assurance records also reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at recruitment data and staff training data.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at Clarence House & The Granary. One person said, "[Registered manager] is a marvellous woman 'cos she keeps us safe." Another person said, "They've spoke to me about being careful when I'm out; like being bullied or teased."
- Staff were trained how to recognise signs of abuse and report any situations about which they had concerns. They demonstrated their understanding of this when we spoke with them.
- Information was available around the home about how to contact relevant external agencies to report any situations which may be abusive. The information was available in words and pictures so that everyone could access it.

Assessing risk, safety monitoring and management

- Risks to people's health, safety and welfare had been assessed and plans were in place to minimise those risks. The management plans were reviewed and updated regularly.
- Staff demonstrated their knowledge of the risks people faced and the actions needed to minimise the risks in line with people's care plans.
- Staff also demonstrated their knowledge of how to support people who experienced distressed behaviours. At the time of the inspection the registered manager told us no-one was subject to the use of physical restraint. However, they were aware of a situation where this may be required in the future and were working closely with health and social care professionals to ensure appropriate management plans were in place should the need arise.
- Personal emergency evacuation plans (PEEP's) were in place to ensure everyone would be supported to leave the buildings safely in the event of an emergency, such as a fire. People explained to us what they would do in an emergency and where they would go to stay safe.

Staffing and recruitment

- There were enough staff on duty to meet people's needs and wishes, including one to one support hours. People told us there were always staff around when they wanted them and they responded quickly to requests for support. One person told us, "They're always there to listen to you or take you out."
- The provider had recruitment procedures in place to ensure they employed staff who were suitable to work with the people who lived in the home. Records showed, for example, checks were carried out on employment history and identity. The provider also carried out checks with the Disclosure and Barring Service (DBS) about anyone applying to work in the home.

Using medicines safely

- People told us they received their medicines as they were prescribed for them. We saw staff administered medicines at the times prescribed by people's doctors.
- Medicines were stored and administered in line with best practice guidance. This included medicines which required special storage and recording; known as 'controlled medicines'.
- Where people administered their own medicines, such as inhalers, risk assessments were in place to demonstrate their safety to do so.
- Where people were prescribed medicines they only needed at certain times; known as 'prn'; protocols were in place to guide staff about how and when to use them.

Preventing and controlling infection

- On the day of the inspection both Clarence House and The Granary buildings were clean and tidy throughout.
- Staff demonstrated their understanding of how to prevent and control the spread of any infections and used personal protective equipment (PPE) when supporting people with personal care.
- A member of staff was identified to take a lead on infection prevention and control arrangements. They attended regular meetings with local authority specialists to ensure their knowledge and skills were kept up to date.

Learning lessons when things go wrong

- The registered manager regularly reviewed and analysed reports of, for example, accidents, incidents or complaints. This meant any trends or themes could be identified and actions taken to minimise future risks.
- We saw the registered manager had taken action to improve a person's care and safety following an incident being highlighted to them.

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.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- Staff who were new to the home undertook a programme of induction based on the Care Certificate, which sets out common induction standards for social care staff.
- Following induction, staff received on-going training which was relevant to their work and the needs of the people they supported.
- Staff said the training programme helped them to keep up to date with good practice and develop their skills.
- Staff told us, and records confirmed, they had opportunities to review their work and discuss their development through regular supervision and appraisal sessions.

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

- People told us they enjoyed the food provided for them and there were always drinks and snacks available when they wanted them. We saw people choosing various cooked breakfasts and lunchtime meal options.
- People told us staff supported them to make healthy food choices. One person said they had undertaken a training course about healthy eating and showed us their certificate of completion.
- Throughout the inspection we saw people were encouraged to take drinks of their choice.
- The cook and care staff were aware of people's dietary needs and preferences and developed menus with them. Information about people's dietary needs was recorded in their care plans.

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

- People's health needs were assessed, planned for and regularly reviewed.
- People described how staff supported them to visit healthcare professionals such as GP's, dentists, opticians and chiropodists.
- People told us how they were supported to clean their teeth. Staff were aware of the importance of people maintaining their oral hygiene.
- Staff considered people's mental well-being as well as their physical health. Records showed staff worked with specialist healthcare professionals such as psychiatrists and asthma nurses to ensure people's health needs were monitored effectively. One person told us how they had been referred to 'talking therapy' services and said this helped them to feel better.

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

- People told us they thought the home was comfortable and they had everything they needed. Three

people allowed us to see their bedrooms which were decorated and furnished in line with their preferences.

- There were various lounges in both buildings where people could choose to spend their time and they were decorated in a homely and comfortable style. One person had their own lounge area next to their bedroom which gave them more personal space to relax in quietly.
- A regularly serviced stair lift was available in Clarence House should anyone need help using the stairs.
- A member of the provider's maintenance team was working in the home on the day of the inspection. We saw they carried out repairs and maintenance which had been highlighted by the staff team and kept records of regular health and safety checks.

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

- People's needs were assessed when they were admitted to the home and regularly reviewed to ensure they continued to receive the right support.
- People told us staff met their needs and wishes and listened to them when they wanted to make changes to their care and support.
- Evidence-based assessment tools were used to assess people's needs and identified risks such as nationally recognised tissue viability scoring charts.

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 Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. 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.

- We saw staff understood how to present information to enable people to make their own decisions wherever possible. Decision specific mental capacity assessments were in place where people were not able to do this.
- We saw how a person had been supported to make a complex decision about their healthcare. They told us staff had spent time helping them to understand everything about the subject before they made their final decision.
- At our last inspection we found decisions taken in people's best interest had not always been recorded. At this inspection we found records had improved and contained information about who had been involved in the decision making process and the decided outcomes.
- Seven people were subject to regularly reviewed DoLS authorisations. There were no conditions attached to the authorisations.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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; Supporting people to express their views and be involved in making decisions about their care

- People spoke positively about all of the staff who worked with them. One person said, "They're all great; they really help us and care about us."
- We saw people were relaxed in the company of staff and sought them out when they needed support. There was lots of jovial banter and laughter between people and staff members.
- Staff received training about equality and diversity and considered protected characteristics under the Equality Act 2010. This meant, for example, people's religious or cultural needs could be met effectively.
- People knew who their keyworkers were and told us they regularly spent time with them. They said they discussed things like personal shopping, holidays and what they wanted to achieve.
- One person told us how they had chosen to move from The Granary into Clarence House and how staff had supported them with this. They said the move and the staff support had made them, "A different person". They said they were now more confident and enjoyed their life more.
- Throughout the inspection we saw people were encouraged to make their own choices and decisions such as what they wanted to eat and how they wanted to spend their time.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their privacy and dignity. They gave us examples such as staff knocking on bedroom doors before they entered and addressing people by their chosen names. One person described how staff helped them to maintain their dignity by making sure their hair was kept tidy and their nails were painted.
- People told us staff encouraged them to maintain and develop their independence. Some people told us about working in the kitchen helping to wash dishes and cook. One person told us how staff supported them to regularly stay at a friends house. They said, for example staff helped them to get their medicines ready and made sure they had their mobile phone with them in case they needed to have contact with staff whilst they were away.
- The registered manager told us that two people had achieved their aim of being able to live more independently and were due to move into their own homes in the near future.
- We saw equipment was provided to help people maintain their independence, for example, a special door opening system was in place where a person was not able to use a lock and key.
- Two people we spoke with told us how staff had supported them to develop work skills. One person had secured volunteer work in a local charity shop and another at a local luncheon club.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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; 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

- People told us they were happy with the care and support they received.
- People's care records contained key information such as, life stories, what was important to the person, their likes and dislikes and their preferred routines. This helped staff to provide care and support that was tailored to each person.
- During the inspection we saw people reviewing their care plans with keyworkers and noted they were asked if they wanted to change anything about their care and support as part of the discussion.
- People were supported to follow their chosen hobbies and interests and take an active part in their local community. We saw examples such as, people taking part in local church activities and one person had recently joined a local community choir. Several people attended a local luncheon club and local coffee mornings. Other people had joined a local gardening and wildlife group.
- Activities people enjoyed were also available within the home. For example, there were regular exercise and craft sessions planned for people to join in with.
- People told us they were supported to maintain relationships with their family and friends.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The ways in which people communicated was recorded in their care plans and staff demonstrated knowledge of people's preferred methods of communication.
- Information was available for people in words, pictures and symbols so that each person could access the information in the way they preferred.
- In addition, we saw staff explained issues to people clearly and used body language where required to help convey meanings. This meant that people could make more informed choices and decisions.

Improving care quality in response to complaints or concerns

- People told us they knew how to make a complaint if they needed to. They said they were confident the registered manager and staff would help them to resolve any issues.
- The provider had a complaints policy in place which was displayed for people and visitors to use if they needed to.
- The registered manager told us no complaints had been received since the last inspection.

End of life care and support

- No-one who lived at Clarence House & The Granary required end of life care at the time of the inspection.
- The registered manager and staff had considered the subject of end of life care. Plans were in place to support people to record their wishes when they were ready to discuss them.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People told us the registered manager made sure they had everything they needed and they could talk to her about anything that bothered them. One person said, "[Registered manager] is a very, very nice lady." Another person told us, "[Registered manager] is very helpful."
- Staff told us the registered manager was supportive and open in her approach to the management of the home. They made comments like, "She keeps you up to date with everything" and "She'll help you sort out any problems."
- People who lived in the home and staff members told us the registered manager listened to and respected their views and opinions. They told us about regular meetings where they were able to contribute to improving and developing the services provided. An example of this was about improving the garden area and developing a vegetable patch. We saw that work had commenced to achieve this.
- People, their relatives and visitors were also offered the opportunity to share their views about the services provided by way of regular questionnaires.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 was aware of and had systems in place to ensure compliance with duty of candour responsibilities. The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment.
- The registered manager also understood their regulatory responsibilities. For example, they sent us the required information about Deprivation of Liberty Safeguard (DoLS) authorisations wherever necessary.
- Quality assurance audits were undertaken to help drive improvements in the services provided. The registered manager had an action in place to address any shortfalls identified by audits. For example, a bathroom and the laundry area had been identified as needing refurbishment and plans were in place to achieve this.
- Staff were aware of the registered provider's whistleblowing policy and told us they would not hesitate to use it if they had concerns which were not being addressed.

Continuous learning and improving care; Working in partnership with others

- The registered manager and staff maintained positive working relationships with other agencies who were

involved in the lives of the people who lived at Clarence House & the Granary. These included local health services, local authority commissioners and local safeguarding teams.

- The registered manager attended regular meetings with other managers in the registered provider's organisation. They also attended regular meetings at local adult social care networks. This helped them to keep up to date with good practice and share learning across organisations.