

Blackpool Borough Council

The Arc

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

The Assessment and Rehabilitation Centre (The ARC), is an integrated provider with health and social services working together to provide care and support for up to 33 people. The staff team consists of rehabilitation support workers, occupational therapists, physiotherapists and nurses. Accommodation is located on two floors with a lift available between floors. Twenty-three people were staying at The ARC when we made the site visit.

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

People told us they felt safe at the ARC and the staff team supported them safely. People were able to be as independent as possible because staff assessed risks and helped them manage avoidable risks. Staff demonstrated a good understanding about how to safeguard people from the risk of abuse. Staff supported people with their medicines according to national guidelines. Staff recruitment procedures were robust and there were enough staff to care for people safely.

Staff were knowledgeable about how to use PPE and how to prevent and control infection and followed national and local guidance. The infection prevention and control policy was up to date. The building was clean and hygienic, so the risk of infection outbreaks was reduced and managed. They were knowledgeable about infection and from the start of the pandemic, the service had been supporting people who were COVID-19 positive. The building was maintained and equipment serviced as required to make sure this was safe and in working order.

Care records were personalised, and it was clear they had been planned and agreed with the individual. We saw examples of person focused discussions. The provider had a complaints policy. People knew how to complain and said any concerns were dealt with promptly and to their satisfaction. Staff had assessed and knew people's specific communication needs. The service did not support people needing end of life care.

We received positive feedback from people supported and staff about the leadership and management at The ARC. People told us they felt involved in how their care was provided and understood the restrictions in The ARC related to the COVID-19 pandemic. Staff felt well supported. The manager and senior team monitored and audited the service to make sure the quality of care was good. They understood and acted on legal obligations, including conditions of CQC registration and those of other organisations. They worked in partnership with other services and organisations to keep people safe and improve their well-being.

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

Rating at last inspection and update:

The last rating for this service was requires improvement (published 1 April 2020) and there was a breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no

longer in breach of regulations.

Why we inspected

This was a planned inspection based on the previous rating. We carried out an unannounced comprehensive inspection of this service on 03 March 2020. A breach of legal requirements was found in relation to good governance.

We undertook this focused inspection to check the service had followed their action plan and to confirm they now met legal requirements. We found improvements had been made and the provider was no longer in breach of regulations. This report only covers our findings in relation to the Key Questions safe, responsive and Well-led which contain those requirements. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

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

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

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.

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

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 responsive?

Good ●

The service was responsive

Details are in our well-Led findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

The Arc

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 safe, responsive and well led domains and provided a rating for the service under the Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by an inspector.

Service and service type

The ARC is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 did not have a manager registered with the Care Quality Commission when we inspected. The previous registered manager had left the service since the last inspection. There was a temporary manager and the organisation were recruiting for a permanent manager. Registered managers and providers 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 a short period of notice of the inspection. This was because we needed to discuss the safety of people supported, staff and inspectors with reference to COVID-19.

We started the inspection activity on 28 October 2020 and ended on 30 October 2020. This included telephone and video calls to people supported, relatives and staff. We also requested information to be sent

to us by the service. We made a site visit on the 29 October 2020.

What we did before the inspection

We reviewed information we had received about the service since the comprehensive inspection. This included notifications we had received from the provider, about incidents that affected the health, safety and welfare of people supported by the service. We sought feedback from professionals who work with the service, including health and local authority. 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 two people who were receiving support at The ARC and a relative about their experience of the care provided. We spoke with the manager and seven staff. We reviewed a range of records. This included two people's care records and several medication records. We observed staff administering medicines. We looked at Covid-19 risk assessments for people supported and staff and talked with the manager about recruitment. We also looked at a variety of management records. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead in ongoing improvements. We looked around the building to check it was clean, hygienic and a safe place for people to receive care and support.

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 requires improvement. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong
We recommended the provider seek advice at the last inspection as risks were not always recorded and sometimes left staff without relevant information. Accidents and incidents were not investigated, so action to reduce similar risks was not always taken.

At this inspection staff had recorded and updated risks which were person centred and showed staff had enough information to support people. The manager had investigated incidents and accidents and taken action to reduce these.

- The manager was aware of their responsibility to report any issues to relevant external agencies and did so promptly.

Preventing and controlling infection

- The manager made sure the service had robust safety hygiene and infection prevention and control (IPC) practices. There was easily accessible personal protective equipment (PPE), hand washing and sanitising facilities throughout the building which helped reduce infection risks. Staff and visitors used PPE effectively and safely. This was monitored by senior staff.
- People could be admitted to the service even if COVID positive or COVID status unknown. Areas within the building were zoned, dependent on the COVID status of each person. Staff worked in specific zones. The layout and use of different areas had been adapted to enable social distancing and shielding.
- The IPC policy was up to date. Staff had completed IPC training. People supported and staff had regular testing which helped with prompt management of infection.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and avoidable harm. People told us they felt safe. One person told us, "The staff are brilliant. I always feel safe here."
- Staff were trained in safeguarding vulnerable adults and knew what to do if they suspected a person was being harmed or abused. They knew who to contact and had arrangements in place to support people in emergency or unexpected situations.

Using medicines safely

- People received their medicines as prescribed. We saw staff giving people their medicines at the correct time and in line with good practice guidance. Medicine administration records (MARs) were completed accurately and medicines stored securely.
- Staff were trained in managing medicines safely and had regular checks to make sure they were giving

people their medicines correctly.

Staffing and recruitment

- Potential staff were interviewed, and references and recruitment checks were made before they could work in the service. This reduced the risk of appointing unsuitable staff. They received training to assist them in their role.
- Staff were sufficient in number, suitably skilled and experienced and able to meet people's needs. People said although each person was cared for in their bedroom, staff spent time with them. One person told us, "I don't feel lonely as the staff are always popping in and out. I get more company here than at home."

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 requires improvement. At this inspection this key question has improved to good. This meant people's needs were met through good organisation and delivery.

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

At the last inspection we recommended the provider seek advice and guidance, in relation to record keeping, as care records did not always reflect people's needs. There were gaps in care reports so it was not clear what care and support had been provided to individuals. Care plans and charts were not always updated. There was no guidance for supporting a person who would not cooperate with their care or to support staff to try to reach a positive outcome with the person.

On this inspection care records were personalised, informative and clearly involved the person in how they wanted their support provided. We saw a care record where staff had spoken with a person who became agitated and anxious at times. Staff worked with the person on strategies the individual found helpful in order to calm themselves. This made the person's stay more supportive and positive.

- Staff gave care that met people's needs, respected their choices and helped their well-being. People told us staff listened to them and fully involved them in their care.

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

- People told us because of the pandemic, social distancing and shielding, they were cared for in their rooms. However staff frequently interacted with them and supported them to keep in contact with family and friends.
- Most people only stayed in The ARC for a short time, while rehabilitating from illness or injury. Visitors were able to see family members if allowed under the national and local guidelines but were expected to wear appropriate PPE provided by The ARC.

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.

- Staff were aware of the AIS. They made sure people with a disability or sensory loss were given information in a way they could understand.

- Staff knew how each person communicated, including where people needed extra support with speech, hearing, sight or understanding. This was recorded in their care plans.

Improving care quality in response to complaints or concerns

- People and their representatives had access to complaints information. They told us they knew how to complain and would feel comfortable doing so without fear of a negative response.
- We saw where people had made complaints these were investigated promptly, the complainant informed of the findings, action taken and apologies made where needed.

End of life care and support

- As an Assessment and Rehabilitation Centre, The ARC does not provide end of life care.

Is the service well-led?

Our findings

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

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

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

At our last inspection the provider had failed to maintain good records of care planning, monitoring and evaluation, risk assessment and management. Care records did not always contain information to support staff to deliver care.

This was a breach of regulation 17 (good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Care planning records and risk assessments had been updated and were informative, personalised and up to date. Senior staff monitored and audited care practice and care records, infection control and management of the service.
- Since the last inspection the previous registered manager had left the organisation and cancelled their registration with CQC. A manager from another part of the organisation has temporarily moved into the manager post and has led the team since then. The Provider is currently recruiting a permanent manager for the post.
- There was a clear staffing structure and lines of responsibility and accountability which people understood. Staff told us the way the different disciplines worked together and alongside each other had improved during the temporary manager's leadership. Comments included. "It's early days yet but we are working so much better together." And "[The manager] has made a real difference and understands the different roles here."
- The service had effective systems to check people were supported correctly. The manager carried out frequent audits on quality and safety and took action if shortfalls were found. They kept senior managers informed about the management of the service.
- The manager followed current and relevant legislation along with best practice guidelines. This helped them keep people safe and to meet their diverse needs. They understood legal obligations, including conditions of CQC registration and those of other organisations.
- The provider and manager understood their responsibilities under the duty of candour to apologise to people and/or their relatives if mistakes were made. They told us where they felt something had gone

wrong, they looked at how an issue, accident and incident occurred, and evaluated what lessons could be learnt to reduce risks of similar events.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The manager and provider planned and delivered effective, safe person-centred care. Admissions were safe and discharges well planned. They were open and transparent and focused on providing a good standard of care.
- The manager regularly sought people's views and those of their relatives. People were praising of the manager and felt well cared for. One person told us, "[The manager] is dead approachable. She will bend over backwards to help you."
- Staff were complimentary about the manager and their leadership and support. Comments included; "Things have improved since [the manager] came. She supports us, works with us and alongside us." And, "The last few months have been a bit of a roller coaster but [manager] has supported us every step of the way."

Continuous learning and improving care; Working in partnership with others

- The manager encouraged learning and development during handovers, discussions and with training to assist staff to consistently improve outcomes for people.
- The management team made sure they were aware of current legislation, standards and evidence-based guidance. They looked at how this could improve the care and support they provided.
- The manager maintained good working relationships with partner agencies. They had been involved in piloting closer and more frequent working relationships that positively impacted people's health and well-being.
- Staff had developed links within the local community, although most of these were on hold because of the restrictions in relation to the Coronavirus pandemic.