

# Blackpool Borough Council The Phoenix Centre

#### **Inspection report**

Stratford Place Ferguson Road Blackpool Lancashire FY1 6RN Date of inspection visit: 08 January 2019

Good

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Ratings

#### Overall rating for this service

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 Phoenix Centre is run by Blackpool Borough Council. Within the building there is a residential mental health service for people with a primary diagnosis of enduring mental illness who are experiencing a mental health crisis. The service offers short stays from one night to up to two weeks to enable a period of recovery. The location also provides a domiciliary service for people who live in the local community. This includes supporting people with personal care needs and assisting people to be as independent as they can be. In addition, the Phoenix Centre provides a supported living scheme and extra supported living scheme in houses within the community. The aim of the services is to provide rehabilitation for people to move on to accommodation of their choice. A Shared Lives Service is also managed from the Centre. The service provides care and support to individuals within Shared Lives Carers homes throughout the Blackpool community. The services each had a registered manager.

At the last inspection carried out on 24 and 26 May 2016 the service was rated Good. At this inspection we found the evidence continued to support the rating of Good. There was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

There were registered managers in place for each service. A registered manager is a person who has registered with the Care Quality Commission 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.

People supported by all the services told us they were safe, well cared for and liked the staff who supported them. Comments received included, "I am enjoying my stay at the Phoenix Centre and I feel completely safe. The staff have been great with me." And, "I feel completely safe with the staff who support me. They have never let me down."

Procedures were in place to record safeguarding concerns, accidents and incidents and take necessary action as required. Staff had received safeguarding training and understood their responsibilities to report unsafe care or abusive practices.

Risk assessments had been developed to minimise the potential risk of harm to people during the delivery of their care. These had been kept under review and were relevant to the care provided.

Staff had been recruited safely, appropriately trained and supported. They had skills, knowledge and experience required to support people with their care and social needs.

Staff responsible for assisting people with their medicines had received training to ensure they had the competency and skills required.

People's care and support had been planned with them and was person centred. They told us they had been consulted and listened to about how their care would be delivered.

Care plans were organised and had identified care and support people required. We found they were informative about care people had received.

We saw there was an emphasis on promoting dignity, respect and independence for people supported by all services. They told us they were treated as individuals and received person centred care.

The registered managers understood the requirements of the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS). This meant they were working within the law to support people who may lack capacity to make their own decisions.

We looked around the building of the Phoenix Centre and found it had been maintained, was clean and hygienic and a safe place for people to stay. We found equipment had been serviced and maintained as required. The design of the building and facilities provided were appropriate for the care and support provided.

The services had safe infection control procedures in place and staff had received infection control training.

Meal times at the Phoenix Centre, supported living and shared lives houses were relaxed and organised around people's individual daily routines. People told us they enjoyed the quality and choice of meals provided for them.

People were supported to have access to healthcare professionals and their healthcare needs had been met.

People supported by all services told us staff were caring towards them. Staff we spoke with understood the importance of high standards of care to give people meaningful lives.

The services had information about support from an external advocate should this be required by people they supported.

The services had a complaints procedure which was made available to people and their family when they commenced using the service. The people we spoke with told us they were happy with their service and had no complaints.

The registered mangers used a variety of methods to assess and monitor the quality of the service. These included regular audits and satisfaction surveys to seek their views about the service provided.

Further information is in the detailed findings below.

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

We always ask the following five questions of services.

<b>Is the service safe?</b> The service remains Good.	Good ●
<b>Is the service effective?</b> The service remains Good.	Good ●
<b>Is the service caring?</b> The service remains Good.	Good ●
<b>Is the service responsive?</b> The service remains Good.	Good ●
<b>Is the service well-led?</b> The service remains Good.	Good •



# The Phoenix Centre 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 Phoenix Centre is a 'care home.' People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

The Phoenix Centre is also a domiciliary care agency. It provides personal care and support to individuals within their own homes throughout the community.

The Phoenix Centre provides care and support to people living in a supported living setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The Phoenix Centre provides care and support to individuals within Shared Lives Carers homes throughout the community. CQC does not regulate premises used for Shared Lives; this inspection looked at people's personal care and support.

This comprehensive inspection visit took place on 08 January 2019 and was announced. The provider was given 24 hours' notice because the location provides a care service to people who lived in the community. We needed to be sure that we could access the office premises.

The inspection team consisted of three adult social care inspectors and two experts-by-experience. The expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service. The experts by experience supporting this inspection had a background supporting older people and people with a learning disability.

Before our inspection we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people supported by the service and previous inspection reports. We also checked to see if any information concerning the care and welfare of people supported by the service had been received. We contacted the commissioning department at Blackpool Borough Council and Healthwatch Blackpool. Healthwatch Blackpool is an independent consumer champion for health and social care. This helped us to gain a balanced overview of what people experienced accessing the service.

As part of the inspection we used information the provider sent us in the Provider Information Returns. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

We did not use the Short Observational Framework for Inspection (SOFI) during our visit. SOFI is a way of observing care to help us understand the experience of people who could not talk with us. This was because people who lived at the Phoenix Centre were able to speak with us and tell us about their experiences and the support they received.

During the inspection visit we spoke with a range of people about the service. They included three people staying at the Phoenix Centre, seven people receiving home care support, two people receiving supported living, two people receiving extra support supported living and five people living with shared lives carers. We also spoke with the head of service, five registered managers, five support workers, four shared lives support officers and seven shared lives carers. We observed care practices and how staff interacted with people in their care. This helped us understand the experience of people supported by the services.

We looked at care records of five people from the service's. We also viewed a range of other documentation. This included records relating to the management of each service, medication records, recruitment and supervision arrangements and staffing levels. We also checked the Phoenix Centres environment to ensure it was clean, hygienic and a safe place for people to stay.

# Our findings

People supported by all services told us they felt safe in the care of staff who supported them. One person staying at the Phoenix Centre said, "I feel completely safe here the staff are so helpful and kind. They go the extra mile and make time to spend with me which makes me feel better." A person supported by the Supported Living Service said, "I go out all the time on my own but feel safe because staff know my routine and when to expect me back."

The services continued to have procedures in place to minimise the potential risk of abuse or unsafe care. Records seen and staff spoken with confirmed they had received safeguarding vulnerable adults training. Staff spoken with understood their responsibility to report any concerns they may observe and keep people safe.

Potential risks to people's welfare had been assessed and procedures put in place to minimise these. Risk assessments we saw provided instructions for staff members when they delivered their support. These included nutrition support, medical conditions, mobility, fire and environmental safety. The assessments had been kept under review with the involvement of each person to ensure support provided was appropriate to keep them safe.

We looked at the staffing levels across all service's within the Phoenix Centre. We found they continued to ensure there were sufficient numbers of staff available to meet people's needs. People supported by the services told us they were happy with their support and staff were available when they needed them. Comments received included, "The biggest bonus here at the Phoenix Centre is you are never alone and know the staff are there for you. They really are great." And, "My carers are always on time, within a few minutes! They don't have to ring if running late as I know they will arrive and look after me."

We looked at recruitment procedures and documentation for staff for each service. Records seen confirmed appropriate recruitment checks had been made to ensure staff were suitable and safe to work with vulnerable people.

We found people's medicines continued to be managed safely by all of the service's. Medicines were managed in line with The National Institute for Health and Care Excellence (NICE) national guidance. People supported by the services told us they were happy with the support they received with their medicines.

We looked around the building of the Phoenix Centre and found it continued to be clean, tidy and maintained. Staff had received infection control training and understood their responsibilities in relation to infection control and hygiene.

We asked the registered managers where lessons had been learned and improvements made when things had gone wrong. The registered manager of the Home Care Service told us following a medication error all staff had been retrained in medication administration and competency checks implemented. The registered manager also told us where support was being provided with medication administration the service was

ensuring visits were at least four hours apart.

#### Is the service effective?

### Our findings

We saw evidence all service's were referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. This supported the service's to ensure people received effective, safe and appropriate care which met their needs and protected their rights. One person staying at the Phoenix Centre said, "I love it here every single member of staff is absolutely brilliant. They know exactly what help I need from them and I get it 100%." One person supported from the Home Care Service said, "The staff who visit me are well trained and definitely know what they are doing."

We looked at care plan records for all service's and found a full assessment of people's needs had been completed before service's commenced their support. Following the assessment services, in consultation with the person had produced a plan of care for staff to follow. These had been kept under review to ensure the information was up to date and appropriate to meet the person's needs.

We spoke with staff members from all service's and looked at their training matrix's. Staff had achieved or were working towards national care qualifications. In addition, staff completed the service's mandatory training including health and safety, diabetes awareness, moving and handling people, safeguarding adults and end of life care. This ensured people were supported by staff who had the right competencies, knowledge, qualifications and skills.

The service's provided equality and diversity training to all staff and this was refreshed annually. The training taught staff to respect people's individual beliefs including religion, culture and sexuality. This confirmed the service's were able to accommodate diversity in the workplace and create a positive and inclusive environment.

Staff based at the Phoenix Centre continued to encourage people to have some healthy option meals and eat fresh vegetables and fruit. It was clear from our discussions with people staying at the Centre they had choices of food and were involved in their own food provision shopping as part of their rehabilitation programme.

We found people who received support from the domiciliary service, supported living and shared lives services had their dietary needs documented listing the level of support they required with meal provision. Staff who prepared food had completed 'food and hygiene' training. We spoke with people supported by the service's and they told us they were happy with the arrangements in place for meal provision. Comments received from people supported by Home Care and Shared Lives included, "They do whatever I ask them for and it is always well made." And, "I don't have a favourite meal but (carer) knows what I like and makes it for me."

People's healthcare needs were carefully monitored and discussed with the person or family members as part of the care planning process. Care records seen confirmed visits to and from General Practitioners (GP's) and other healthcare professionals had been recorded. The records were informative and had documented the reason for the visit and what the outcome had been.

The service's shared information with other professionals about people's needs on a need to know basis. For example, when people were visited by healthcare services staff would assist with the visit to provide information about the person's communication and support needs. This meant health professionals had information about people's care needs to ensure the right care or treatment could be provided for them.

We found the building and grounds of the Phoenix Centre were appropriate for the care and support provided. People staying at the Centre were housed on the ground floor and had access to communal areas including a lounge, kitchen dining room and a craft room. All bedrooms were single occupancy with ensuite facilities.

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 with appropriate legal authority. 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. Also whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority. We saw these were being met.

# Our findings

During our inspection visit we spent time observing interactions between staff and people in their care. This helped us assess and understand whether people who used the service's received care that was meeting their individual needs. We saw staff were caring and attentive. They were polite, respectful, kind and showed genuine compassion to people in their care.

People supported by the service's told us they were very happy, well cared for and liked the staff who supported them. Comments received included, "The staff at the Phoenix Centre are absolutely brilliant. They make time to spend with you and they really care about you." And, "The staff who visit me are very caring and thoughtful."

Staff had a good understanding of protecting and respecting people's human rights. Care records seen had documented people's preferences and information about their backgrounds. Additionally, each service had carefully considered people's human rights and support to maintain their individuality. This included checks of protected characteristics as defined under the Equality Act 2010, such as their religion, disability, cultural background and sexual orientation. Information covered any support they wanted to retain their independence and live a meaningful life.

We spoke with the registered managers about access to advocacy services should people in their care require their guidance and support. The service had information details for people if this was needed. This ensured people's interests would be represented and they could access appropriate services outside of the service to act on their behalf.

We noted that privacy, dignity and independence were integral parts of the care planning process, particularly during the provision of intimate personal care and the promotion of people's abilities. People we spoke with confirmed staff treated them with respect and upheld their dignity. We observed staff members spoke with people in a respectful way and were kind, caring and patient.

#### Is the service responsive?

## Our findings

We found the service's provided care and support that was focused on individual needs, preferences and routines of people they supported. People we spoke with told us how they were supported by staff to express their views and wishes. This enabled people to make informed choices and decisions about their care.

We looked at what arrangements the service's had taken to identify record and meet communication and support needs of people with a disability, impairment or sensory loss. We saw people's communication needs had been assessed and where support was required this had been met.

The Phoenix Centre had Wi-Fi (wireless connectivity) in the building enabling people who stayed at the Centre to have internet access through their hand held computers and mobile phones. The registered manager told us this enabled people staying at the centre to maintain contact with family members, friends, and watch films at their leisure.

The service's had a complaints procedure which was issued to people on their admission to the home. The procedure was clear in explaining how a complaint could be made and reassured people these would be dealt with. The people we spoke with told us they were happy and had no complaints.

The Home Care Service had documented people's end of life wishes so staff were aware of these. We saw people had been supported to remain in their own home where possible as they headed towards end of life care. This allowed people to remain comfortable in their familiar, homely surroundings, supported by staff known to them.

# Our findings

People supported by the service's told us they were happy with the way in which the service's were managed. Comments received included, "They do everything professionally and look after me well. Really well managed service." And, "This is a fantastic service. I would recommend it to anyone suffering with mental health problems."

There were five registered managers in place, one for each service. A registered manager is a person who has registered with the Care Quality Commission 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.

We found each service had clear lines of responsibility and accountability. The registered managers and their staff teams were experienced, knowledgeable and familiar with the needs of the people they supported. Discussion with the staff on duty at each service confirmed they were clear about their role and between them and management provided a well run and consistent service.

Each service had systems and procedures in place to monitor and assess the quality of their service. Regular audits had been completed reviewing the services medication procedures, care plans, environment and staffing levels. Actions had been taken as a result of any omissions or shortcomings found so continuous improvement could be maintained.

Staff told us they were able to contribute to the way their service operated through staff meetings, supervisions and daily handovers. They told us they felt supported by their registered manager.

Surveys completed by people supported by each service confirmed they were extremely satisfied with their care and support. We looked at a sample of comments received about the Home Care Service. They included, 'To all the wonderful carers who are so kind and helpful. A big thank you.' And, 'Thank you to everyone who helps care for me so admirably and compassionately. I am so grateful. Thank you.'

Each service worked in partnership with other organisations to make sure they followed current practice, providing a quality service and people in their care were safe. These included healthcare professionals such as G.P's, district nurses, falls prevention team and occupational therapists. This ensured a multi-disciplinary approach had been taken to support care provision for people in their care.

The service had on display in the reception area of their premises and their website their last CQC rating, where people could see it. This has been a legal requirement since 01 April 2015.