

# Abbeyfield Silverdale And District Society Limited

# Abbeyfield Silverdale & District Society Limited

## Inspection report

Cove House  
Cove Road, Silverdale  
Carnforth  
Lancashire  
LA5 0SG

Date of inspection visit:  
14 March 2016

Date of publication:  
14 April 2016

Tel: 01524701219

Website: [www.silverdale-abbeyfield.org](http://www.silverdale-abbeyfield.org)

## 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

This inspection was carried out on the 14 March 2016 and was unannounced. We last inspected Abbeyfield Silverdale & District Society Limited in July 2014 and identified no breaches in the regulations we looked at.

Abbeyfield Silverdale & District Society Limited is a registered society and an exempt charity for tax purposes. The society owns a home in the village of Silverdale. The home is a large detached property in its own grounds in a residential area overlooking the sea. The home is set on two floors and accommodates up to 22 older people. There are large gardens surrounding the home which are accessible and used by people living there. There are a range of aids and adaptations suitable to meet the needs of people living there. Parking is available in the grounds of the home.

The home is managed by a registered manager. A registered manager has legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People told us they were happy living at Abbeyfield Silverdale and the care met their individual needs. People described staff as 'very pleasant' and told us they trusted staff.

There were systems in place to protect people at risk of harm and abuse. Staff were able to define abuse and the actions to take if they suspected people were being abused.

We found individual risk assessments were carried out and care plans were developed to document the measures required to reduce risk. Staff were knowledgeable of the measures in place and we observed these were followed these to ensure people's safety was maintained.

We found medicines were managed safely. We saw people were supported to take their medicines in a dignified manner. There were systems in place to ensure medicines were stored securely.

We saw appropriate recruitment checks were carried out to ensure suitable people were employed to work at the home and there were sufficient staff to meet people's needs. We saw staff could undertake tasks supporting people without feeling rushed. People told us they were supported promptly.

Staff received support from the management team to ensure training needs were identified. We found staff received appropriate training to enable them to meet people's needs.

Processes were in place to ensure people's freedom was not inappropriately restricted and staff told us they would report any concerns to the registered manager.

We saw people were offered a variety of foods and people told us, "It's fine." And, "It's alright." We saw people were offered a choice of meals and snacks throughout the day.

People were referred to other health professionals for further advice and support when assessed needs indicated this was appropriate.

We saw staff treated people with respect and kindness and relatives told us they were involved in their family member's care planning.

Staff knew the likes and dislikes of people who lived at the home and delivered care and support in accordance with people's expressed wishes. During the inspection we saw people were supported to carry out activities which were meaningful to them.

There was a complaints policy in place, which was understood by staff. People told us they would speak with staff if they had any concerns.

We saw systems were in place to identify if improvements were required. People who lived at the home were offered the opportunity to participate in annual questionnaires and the registered manager completed audits to identify if improvements were required. In addition the registered provider also monitored the quality of service by carrying out quality assurance checks.

## 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.

People received their medicines safely.

Assessments were undertaken to ensure risks to people who used the service were identified. Written plans were in place to manage these risks.

Recruitment checks were in place to ensure staff were safely recruited. The staffing provision was arranged to ensure people were supported in an individual and prompt manner. Staff were appropriately skilled to promote people's safety and well-being

Staff were aware of the policies and processes in place to raise safeguarding concerns if the need arose.

### Is the service effective?

Good 

The service was effective.

People's needs were assessed in accordance with their care plans.

People were enabled to make choices in relation to their food and drink and were encouraged to eat foods which met their needs and preferences.

Referrals were made to other health professionals to ensure care and treatment met people's individual needs.

The management demonstrated their understanding of the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS).

### Is the service caring?

Good 

The service was caring.

Staff were patient when interacting with people who lived at the home and people's wishes were respected.

Staff were able to describe the likes, dislikes and preferences of people who lived at the home.

People's privacy and dignity were respected.

### **Is the service responsive?**

The service was responsive.

People were involved in the development of their care plans and documentation reflected their needs and wishes.

People were able to participate in activities which were meaningful to them.

There was a complaints policy in place to enable people's complaints to be addressed. Staff were aware of the complaints procedures in place.

**Good** ●

### **Is the service well-led?**

The service was well-led.

Staff told us they were supported by the management team.

Communication between staff was good. Staff consulted with each other to ensure people's wishes were met.

There were quality assurance systems in place to identify if improvements were required.

**Good** ●

# Abbeyfield Silverdale & District Society Limited

## **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.

This inspection was carried out on the 14 March 2016 and was unannounced. The inspection was carried out by one adult social care inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. The expert by experience who supported this inspection had experience of caring for older people. At the time of the inspection there were twenty people living at Abbeyfield Silverdale.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed information the Care Quality Commission (CQC) holds about the home. This included any statutory notifications, adult safeguarding information and comments and concerns. This information helped us plan the inspection effectively. We also contacted the Lancashire Commissioning Department at the local authority. We did this to gain an overview of what people experienced whilst living at the home.

During the inspection we spoke with nine people who lived at Abbeyfield Silverdale and three relatives. We spoke with the registered manager, the general manager and the training co-ordinator. We also spoke with the chef, three care staff and three relatives.

We looked at all areas of the home, for example we viewed the lounge and dining area, bedrooms and the kitchen. This was so we could observe interactions between people who lived at the home and staff.

We looked at a range of documentation which included three care records and a sample of medication and administration records. We also looked at records relating to the management of the home. These included health and safety certification, recruitment and training records, minutes of meetings and quality assurance surveys.

## Is the service safe?

### Our findings

People who lived at the home told us they felt safe. We were told, "It's safe enough." And, "I'm safe here." None of the relatives we spoke with voiced any concerns regarding their family member's safety.

We viewed three care records to look how risks were identified and managed. Individualised risk assessments were carried out appropriate to people's needs. We saw care documentation contained instruction for staff to ensure risks were minimised. For example we noted one person required specific support to mobilise. Care documentation contained information to guide staff on the how to support the person safely. We spoke with the person who confirmed staff supported them in accordance with their assessed needs. This helped ensure the safety of the person was maintained.

During the inspection we saw staff followed the risk assessments in place. We observed a staff member supporting a person to mobilise. We discussed this with them. They were able to explain the assessment in place and the reasons for this. We viewed the persons care documentation and saw the risk assessment corresponded with the support we had observed. This helped minimise the risk of accident or injury.

We asked the registered manager how they monitored accidents and incidents within the home. We were told all incidents and accidents were reported using the registered providers reporting system. This information was then reviewed by the registered manager. We viewed the documentation provided and saw evidence this took place.

Staff told us they had received training to deal with safeguarding matters. We asked staff to give examples of abuse. They were able to describe the types of abuse which may occur. Staff were also able to explain the signs and symptoms of abuse and how they would report these. Staff told us they would immediately report any concerns they had to the registered manager or the general manager. Staff also told us they would report concerns to the local safeguarding authorities if this was required. One staff member told us, "The numbers we need are in the office. It was made very clear to me that safeguarding is expected of us."

We asked the registered manager how they ensured sufficient numbers of staff were available to meet people's needs. They told us they reviewed the needs of people who lived at the home. We were informed if people's needs changed, extra staff were made available to ensure people received care and support that met their needs. The staff we spoke with also confirmed additional staff were made available if the need arose.

We observed people being supported in a prompt way. We timed three call bells during busy times at the home and saw these were answered in less than two minutes. Three people commented staff were busy. Comments we received included, "I think if they had more staff it would help, I don't really have to wait long. They seem to be very busy carrying on with routine things." And, "They always come quickly, I'm happy with that." Relatives we spoke with expressed no concerns with the staffing levels at the home. We discussed the feedback we had received with the registered manager and general manager. They told us they were confident there were sufficient staff to meet people's needs. They told us they would continue to monitor



the staffing levels by observation and viewing call bell records to ensure extra staff were not required.

We reviewed documentation which showed safe recruitment checks were carried out before a prospective staff member person started work at the home. We spoke with one staff member who had been recently recruited. They told us they had completed a disclosure and barring check (DBS) prior to being employed. This is a check which helps ensure suitable people are employed. We reviewed their recruitment file and saw the required checks were completed. We noted appropriate references were obtained. This demonstrated safe recruitment checks were carried out.

During this inspection we checked to see if medicines were managed safely. We saw care staff administered medicines to people individually. This minimised the risk of incorrect medicines being given. We looked at a sample of medicine and administration records and saw these were completed correctly. We checked the stock of two medicines and saw the records and the amount of medicines matched. This indicated medicines were being administered correctly. The staff member we spoke with explained the processes in place for the ordering and receipt of medicines. They were knowledgeable of the processes in place and we saw appropriate storage was in place to ensure medicines were stored safely.

We saw checks were in place to ensure the environment was maintained to a safe standard. We saw documentation which evidenced electrical and lifting equipment was checked to ensure its safety. We also saw the temperature of the water was monitored to ensure the risk of scalds had been minimised. At the time of the inspection we were informed a legionella risk assessment was being completed.

There was a fire risk assessment in place and the staff we spoke with were knowledgeable of this. Staff told us they had received training in this area and were confident they could respond appropriately if the need arose.

## Is the service effective?

### Our findings

People who lived at Abbeyfield Silverdale and their family members gave positive feedback regarding the care provided. People told us staff supported them in the way they had agreed and they found staff were knowledgeable of their needs. Comments we received from people who lived at the home included, "I'm happy with the way staff help me." And, "I'm well looked after."

We saw documentation which evidenced people were supported to see other health professionals as their assessed needs required. For example we saw people were referred to doctors and district nurses if there was a need to do so. People told us they were supported to seek further medical advice if this was required. One person said they were supported, "Right away." A further person said, "Yes, I am."

Care files evidenced people's nutritional needs were monitored. We saw nutritional assessments were carried out and people were weighed in accordance with their assessed needs. Staff told us if they were concerned with people's nutritional intake, they would refer people to other health professionals for further advice and guidance.

We viewed menus which evidenced a wide choice of different foods were available and we saw the kitchen was well stocked with fresh fruit, vegetables and dry and tinned supplies. We spoke with the chef who told us people were asked to select their meal choice on a daily basis. During the inspection we saw this was carried out. We saw people were offered alternatives if they declined the two choices offered. People who lived at the home told us the menu was flexible and overall, they liked the food provided. Comments we received included, "It's fine." And, "It's alright." Also, "No complaints."

We observed the lunch time meal being served. We saw people were asked where they wanted to eat their meal. People who chose to eat in the dining area were supported to do so. We noted one person chose to eat in their private room. They declined the cooked meal and were provided with an alternative. We saw the meal portions were adequate and people were offered a dessert in addition to their main meal. During the meal we saw hot and cold drinks were available and were provided for people. We saw these were replenished throughout the lunch.

We asked the registered manager how they ensured people were supported to eat foods appropriate to their needs. We were told people were asked if they had any food allergies and if so, this was accommodated. The registered manager told us they were aware of their responsibilities in respect of this.

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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

We spoke with the registered manager to assess their understanding of their responsibilities regarding making appropriate applications. From our conversations it was clear they understood the processes in place. The registered manager told us they were aware of the processes in place and would ensure these were followed if the need arose. There were no current applications made to deprive a person of their liberty in order to safeguard them. We did not see any restrictive practices during our inspection visit and observed people moving around the home freely.

We asked staff to describe their understanding of the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS) and how this related to the day to day practice in the home. Staff could give examples of practices which may be considered restrictive and said any concerns would be reported to the registered provider. Staff told us they had received training in this area and would seek further guidance from the registered manager if they had any concerns.

We asked staff what training they had received to carry out their roles. Staff told us they had received an induction which included training in areas such as moving and handling, safeguarding and medicines management. Staff also confirmed they were provided with regular refresher training to ensure their skills were maintained. We discussed this with the training co-ordinator and saw computer records which evidenced this. Staff also told us their training needs were discussed with them at supervision and appraisals.

We discussed supervision with the registered manager. The registered manager told us they had a schedule in place to ensure staff received a regular one to one meeting to discuss their training needs. They told us they operated an 'open door' policy and encouraged staff to come to them as they wished. All the staff we spoke with told us they felt well supported by the management team. Staff told us they were able to approach the registered manager to discuss any areas in which they required clarity. Staff also told us they received an annual appraisal. An appraisal is a meeting between a staff member and their line manager where training and staff performance is discussed. We viewed four appraisal records. These evidenced appraisals took place to ensure staff performance was monitored.

## Is the service caring?

### Our findings

People who lived at the home were complimentary of staff. We were told, "They all treat me well." Also, "I can't complain." One person described staff as, "Supportive, very supportive." Relatives we spoke with were complimentary of the way staff supported their family member. A relative we spoke with told us, "The staff are fantastic, very caring."

We saw staff were caring. For example we observed staff taking an interest in what people were doing and what they had to say. We saw one staff member complimented a person on their choice of jewellery. We saw the person responded positively to this and asked the staff member to fetch a further item of jewellery from their room. This resulted in other people joining in the conversation. We saw people shared their memories of fashion and personal clothing preferences. This was supported by the staff member who spoke with people about their choices. Our observations showed this was welcomed by people who lived at Abbeyfield Silverdale.

During the inspection we saw staff responded promptly to people's needs. We observed staff responding quickly and tactfully if people required assistance or support. Staff spoke respectfully and gently to people and offered support. On the day of the inspection we saw one staff member sat with a person while they talked about their relative. We saw this was appreciated by the person.

Staff spoke affectionately about people who lived at the home. One staff member told us, "I like working here because of the residents." A further staff member said, "This is a good place. The residents are lovely." Staff also showed an awareness of what was important to people who lived at the home. One staff member explained the importance of a person's relationship with their family.

We discussed the provision of advocacy services with the registered provider. We were informed there were no people accessing advocacy services at the time of the inspection; however this would be arranged at people's request.

During the inspection we saw staff took care to respect people's privacy and uphold their dignity. For example we saw bedroom and bathroom doors were closed when personal care was delivered. We observed staff knocking on people's doors prior to entering their rooms and staff ensured people's confidential records were not left unsecured. This helped ensure people's personal details remained private and people's dignity was protected.

We looked at care records of three people. We found the care records contained information about people's current needs as well as their wishes and preferences. We saw evidence to demonstrate people's care plans were reviewed with them and updated on a regular basis. This ensured staff had up to date information about people's needs.

Prior to our inspection visit we contacted external agencies about the service. They included the commissioning department at the local authority. We received no negative comments or concerns

regarding the care provided by the service.

## Is the service responsive?

### Our findings

People who lived at the home told us they felt care provided was responsive to their individual needs. One person said, "The care I get is good, very good." And, "I'm happy and looked after well." None of the relatives we spoke with expressed any concerns with the care their family member received.

Care records we looked at evidenced people who lived at the home were consulted about the support they required. Also family members and people important to them had been consulted where appropriate. We saw people's social histories and hobbies and interests were documented. Staff told us they spoke to people and their families to gain this information. All the relatives we spoke with told us they had been involved in their family member's care. This helped ensure important information was recorded to ensure care and support was in response to people's wishes and preferences.

The care records we looked at contained up to date information regarding people's needs and wishes. We saw care plans were regularly reviewed and updated. One person told us they had been involved in their care review. This helped ensure accurate information was available to enable people's needs and wishes to be met.

We found an activities programme was displayed in the reception of Abbeyfield Silverdale. During the inspection we observed activities taking place. We saw people were asked to participate in armchair yoga. We saw the activity take place and noted this was enjoyed by people who lived at the home.

People who lived at the home also told us activities were provided for them to participate in if they wished to do so. We were told, "I've been for a walk round the grounds, I've played dominoes and bingo." And, "If it's nice I go for a walk with a carer." Also, "I've always done craft work and I watch television." This demonstrated people were encouraged to engage in social events to minimise the risk of social isolation.

We saw there was a complaints procedure in place which described the response people could expect if they made a complaint. This was displayed in the private rooms of people who lived at the home. Staff told us if people were unhappy with any aspect of the home they would pass this on to the registered manager. This demonstrated there was a procedure in place, which staff were aware of to enable complaints to be addressed.

We viewed the complaints log at Abbeyfield Silverdale. At the time of the inspection we saw one formal complaint had been made. We saw this had been investigated and concluded within the timeframe stated in the complaints policy. The registered manager told us they encouraged people and relatives to raise any comments with them before they became areas of concern. They told us this helped ensure comments were addressed quickly and resolved.

People told us if they had any complaints they could complain to staff at the home. One person told us, "I would speak to [registered manager] but if it was a little thing, then the carers." Relatives we spoke with told us they would raise concerns with the registered manager.

## Is the service well-led?

### Our findings

Staff told us they considered the morale at Abbeyfield Silverdale to be good. They told us they were respected and supported by the management team. Comments we received included, "The managers are excellent. They're always available." And, "The [registered manager] is good. Always ready to listen."

We asked the registered manager how they maintained an overview of the performance of Abbeyfield Silverdale. We were told audits were completed to identify if improvements were required. We saw evidence of audits in accidents and medicines management. We were told these were analysed for trends and actions taken as required. We saw documentation which confirmed this.

Staff told us the registered manager was approachable and interested in feedback from people and staff who worked at the home. All the staff we spoke with told us they received support and guidance from the registered manager. They also told us if improvements were required, they were informed of the actions required through staff meetings or on an individual basis. We viewed the minutes of staff meetings which confirmed this.

We asked the registered manager what systems were in place to enable people who lived at the home to give feedback regarding the quality of service provided. The registered manager told us they offered annual surveys to relatives and people who lived at the home. We viewed the results of the most recently completed survey and noted the registered manager was in the process of addressing any suggestions for improvements. For example we found suggestions to improve the food had been made. We saw the registered manager had consulted with the chef regarding this to identify if improvements could be made.

The general manager told us quality assurance checks were also carried out by trustees of the Abbeyfield Silverdale Limited. We were shown documentation that evidenced the checks were carried out. For example we viewed an audit which identified a training matrix would be advantageous. During the inspection we saw a training matrix was in place. This allowed the registered manager to review the training attendance of staff who worked at the home.

We asked the registered manager if there were meetings in place to enable people to give verbal feedback on the care and support they received. The registered manager told us meetings took place and we saw documentation which evidenced this. We saw a comment had been made regarding the fire alarm system. As a result the registered manager had arranged an educational session for people to attend if they wished to do so. This demonstrated the registered manager responded to comments from people who lived at the home.

During the inspection we saw the registered manager knew people who lived at the home. Through our conversations with the registered manager we found the registered manager was knowledgeable of people's needs and preferences. This demonstrated the registered manager played an active role in the running of Abbeyfield Silverdale.