

Knowsley Metropolitan Borough Council Lydbury Crescent Chance for a Break Service

Inspection report

23-25 Lydbury Crescent Southdene Kirkby Merseyside L32 9RD Date of inspection visit: 23 May 2023

Good

Date of publication: 16 June 2023

Tel: 01515466551

Ratings

Overall rating for this service

Is the service safe?	Good	
Is the service well-led?	Good	

Summary of findings

Overall summary

About the service

Lydbury Crescent Chance for a Break Service is a care home which provides short breaks for people living with learning disabilities, physical disabilities and sensory impairments and autistic people. The service provides accommodation and personal care for up to five people at any one time. The service had 10 people booked to receive respite services during the year. There were four people using the service at the time of the inspection.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence, and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

People's experience of using this service

Right support: Staff supported people in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. The right amount of suitably skilled and experienced staff worked flexibly around people's needs, choices, and interests.

Right care: Managers and staff were committed to ensuring people received person-centred care and support which promoted their privacy, dignity, and human rights. Managers and staff knew how to protect people from poor care and abuse, and they had a positive attitude towards ensuring people were able to take positive risks as part of an everyday lifestyle.

Right culture: People were valued, respected, and supported to live their chosen lifestyle throughout their stay. Staff empowered people to make choices and to be independent. The registered manager inspired confidence in the staff team and led by example. Quality assurance processes enabled ongoing improvement. Learning was shared and community presence was well established.

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 21 October 2017).

Why we inspected This was a planned inspection.

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 that the service can respond to COVID-19 and other infection outbreaks effectively.

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You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Lydbury Crescent Chance for a Break Service on our website at www.cqc.org.uk.

Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our reinspection programme. If any concerning information is received, 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 well-led?	Good •
Is the service well-led? The service was well led.	Good •



Lydbury Crescent Chance for a Break Service

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 This inspection was carried out by 1 inspector.

Service and service type

Lydbury Crescent Chance for a Break Service 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We telephoned the registered manager on the morning of our visit. This was because the service is only open when people are receiving a respite service and we needed to be sure there was somebody available to support the inspection.

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, professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with 3 people who used the service and 3 family members/carers about their experience of the service. We met with 6 members of staff and spoke with 3. We also spoke with the registered manager, assistant manager, and an operations manager.

We reviewed a range of records. This included 3 people's care records and medication records. We reviewed staff recruitment, supervision and training and looked at a variety of records relating to the management of the service, including audits, policies, and procedures.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks relating to the health, safety and welfare of people were assessed and their safety was monitored and managed.
- People's risk assessments were reviewed prior to each stay and their support plans were updated to reflect any changes. Plans guided staff on how to support people to remain safe whilst taking positive risks enabling them maximum independence, choice, and control over their lives.
- There were measures in place to support people safely during their stay in the event of an emergency. For example, during an evacuation of the premises.
- The premises and equipment were checked regularly to make sure they were safe for use. Certificates were held at the premises confirming compliance with systems and equipment such as gas, electricity, and firefighting equipment.
- Staff completed training in topics of health and safety including, fire safety, first aid and the use of equipment.

Learning lessons when things go wrong

- There was a culture of reflective practice when things went wrong.
- Reviews were carried out following incidents and appropriate action was taken to mitigate future risk. Areas for learning were discussed with staff at all levels.

Systems and processes to safeguard people from the risk of abuse

- There were systems in place to protect people from the risk of abuse or harm.
- There were safeguarding and whistleblowing policies in place and staff received training on safeguarding adults from abuse.
- Staff were aware of the different indicators and types of abuse and the procedures for reporting any concerns they had. Staff told us, "I wouldn't hesitate to report abuse" and "I'd report it straight away."

• People told us they felt safe from harm and would speak up if they had any concerns about their safety or the way they were treated. Their comments included, "I feel very safe here all the staff and other guests are lovely to me" and "I'd tell someone right away." Family members/carers told us they were confident people were kept safe. A family member said, "Definitely, 100 % safe."

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

• We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- People received care and support from the right amount of suitably skilled and experienced staff.
- Staff rotas were organised flexibly around occupancy levels and people's needs.
- People told us there was always enough staff on duty to provide them with the right support. A family member said, "They [staff] are on the ball" and a carer said, "Really good, can't fault any of them [staff]."

• Staff were safely recruited. A range of pre-employment checks were carried out on all applicants to ensure they were fit and suitable. An enhanced check with the Disclosure and Barring Service (DBS) was mandatory for all applicants.

Using medicines safely

- Medicines were stored, recorded, and administered safely.
- Staff with responsibilities for managing medicines had completed the required training and competency checks. Staff had access to current policies, procedures, and best practice guidance for the safe management of medicines.

• People arrived with their prescribed medicines and a medication administration record (MAR) listing their prescribed medicines and instructions for use. Medicine stocks and records were checked on arrival by 2 staff for accuracy and they were audited daily to ensure people had received their medicines correctly.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

• Visits to the service were carried out in line with current government guidance.

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 our last inspection we rated this key question good. The rating for this key question has remained 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; Continuous learning and improving care

- Managers and staff understood their roles and responsibilities and they showed a lot of passion for ensuring people received a high-quality service.
- The registered manager and staff team were very experienced and kept up to date with their learning and best practice.
- Managers at all levels, maintained oversight of the service to support continual improvement and ongoing regulatory compliance. They completed regular audits and checks to measure quality and performance and acted quickly to make improvements that were needed.
- People, staff, family members/carers were complementary about the registered manager and staff team. Their comments included, "They are all very good indeed, so accommodating" and "They provide a very good service."

Promoting a positive culture that is person-centred, open, inclusive, and empowering, which achieves good outcomes for people.

- The culture of the service was positive, open, inclusive, and empowering.
- People were empowered during their stay to make choices and decisions about their daily lives and the running of the service. Throughout their stay people were fully involved in planning things such as meals, routines, and activities. One person took the lead on planning improvements to the garden in preparation for the summer months.
- We observed equality between people and staff, they shared mealtimes around the dining table and engaged in meaningful conversations. One person told us, "We have a great laugh with them all [staff] they include us all the time."
- Outcomes for people were positive. People told us they looked forward to and enjoyed their stay at Lydbury Crescent. Their comments included, "I can't wait to get here, I just love it" "All the staff are lovely and make it so nice" and "I do all the things I like. I am very happy here."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- There was a focus on engaging and involving people and others to ensure they had a say in all aspects of the service. Information was shared with people at a pace and in a way they could understand.
- People were contacted prior to each stay to discuss any changes they wished to make to their support plan since their last stay. Family members/carers were involved where this was appropriate.

- People or family members/carers on their behalf were invited to complete a survey about their experiences following each stay.
- Daily handovers and regular staff meetings were held to inform staff about any changes which impacted on people's support and the running of the service.

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 provider and registered manager understood and acted on the duty of candour.
- When things went wrong the relevant people and agencies were notified and an explanation and apology was given.
- The provider and registered manager notified CQC without delay of any event or incident which had occurred at the service that affected the health, safety, and welfare of people. This enabled CQC where needed to follow-up on any action taken.

Working in partnership with others

- Managers and staff worked in partnership with others to ensure the best possible outcomes for people.
- Family members/carers commented on how well managers and staff communicated with them about people's needs to ensure they were fully understood and met.
- Specialist advice from other professionals was obtained where this was required for people, and it was reflected in the way care and support was provided.
- There were positive working relationships and good lines of communication with staff from other community-based services used by people during their stay, including day services and community centres.