

Mrs Linda Parker

# Dunblane House

## Inspection report

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Blackpool  
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Date of inspection visit:  
18 October 2023

Date of publication:  
15 November 2023

## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Dunblane House is a large terraced house supporting up to four people living with learning difficulties. It is situated in a residential area of Blackpool close to local amenities. It is run as a domestic family household. People live with the owners and share the communal facilities. Each person has their own bedroom. There is an outside area with seating at the rear of the property. At the time of the inspection 2 people lived at the home.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

#### Right Support:

The service supported people to have choices and promoted their independence. This is a small family run home however staff had completed training to ensure they understood the meaning of the service they provided. People were supported to pursue their interests whilst living at Dunblane House. One person said, "I like going to the centre and enjoy playing dominoes." People were encouraged to have maximum choice and control of their lives. The provider and staff helped them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. People's medication was managed by staff and required prompting support only. Staff were trained to administer medication.

#### Right Care:

People received kind and compassionate care from the provider and their family. One person said, "I am so glad to be a part of the family and live here." The provider and staff protected and respected people's privacy and dignity. They spoke about people with respect and were knowledgeable about people who lived at Dunblane House. Staff understood how to protect people from poor care and abuse. They had received training on how to recognise and report abuse. No new staff had been recruited since the previous inspection and the home was run as a family home. Where appropriate, the provider and staff encouraged and enabled people to take positive risks and live an independent life as possible.

#### Right Culture:

The service promoted person-centred care involving people who used the service and their families. People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the management team and staff. People were involved in planning their care. The provider and registered manager evaluated the quality of support provided to people. This involved the person, their families and other professionals as appropriate. Staff ensured risks of a closed culture were minimised, so people received support based on transparency and respect. The management team had an informal range of

systems and processes to monitor the quality of the service and drive improvements.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The service was rated good on the 08 July 2018

#### Why we inspected

We undertook this inspection to assess that the service is applying the principles of right support, right care and right culture.

#### 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 well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below

# Dunblane House

## 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.

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

The inspection was carried out by 1 inspector.

#### Service and service type

Dunblane House is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Dunblane House is a care home without nursing care. 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. The registered manager was not available during the inspection process.

#### Notice of inspection

This was a small family run home so we gave the service 24 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be available to support the inspection. Inspection activity started on 17 October 2023 and ended on the 20 October 2023.

#### What we did before the inspection

We reviewed information we had received about the service since their registration. We sought feedback from the local authority and professionals who work with the service. 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 used all this information to plan our inspection.

During the inspection

We spoke with 2 people who lived at Dunblane House, the provider and registered manager. We looked at a range of records. These included 2 people's care records, fire and maintenance records and audits of the service.

# 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 remains the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

### Staffing and recruitment

- There were no new staff employed. This was a family run home with family members who provided the staffing levels as of the previous inspection. One of the people who lived at the home said, "We look after ourselves with [provider] if we need them. They are a family to me."

### Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse and their human rights were respected and upheld.

Safeguarding systems were in place.

- The registered manager, provider and staff had received training about how to protect people from abuse. Written evidence showed training around safeguarding guidance was updated.

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

- People had individual risk assessments in place which covered a variety of risks and care plans detailed how staff could reduce risk for them.

- Health and safety checks were regularly carried out on the building, environment and equipment.

Emergency evacuation plans were in place which included the level of support each person needed in the event of fire.

- A system of recording accidents and incidents was in place. However, no incidents had happened since the previous inspection. One person said, "I am safe here and can manage on my own."

### Using medicines safely

- The 2 people received their medication on an individual basis when required. Staff and the provider only prompt and encourage one person who was on medication prescribed by the doctor. Medicines were kept in locked facilities.

- Staff had received medicines training and had their competencies assessed. The provider and registered manager checked medication administration was safe and acted on any discrepancies through their auditing systems they had in place.

### Preventing and controlling infection

- We were assured that the provider was using PPE effectively and safely if required.

- We were assured that the provider was promoting safety through the layout and hygiene practices of the home.

- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.

# 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 remains the same. This meant people's outcomes were consistently good, and people's feedback confirmed this

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

- There was a positive culture throughout the home and a family atmosphere. One person said, "We are just one family and do things together."
- The registered manager and the provider had the skills and knowledge to lead the service effectively.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; 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 had auditing systems to maintain ongoing oversight and continued development of Dunblane House. For example any issues identified would be dealt with by the provider.
- The registered manager and provider understood their responsibilities to keep CQC informed of events which may affect people and the care delivery. They were open and honest about what achievements had been accomplished. In addition, what had not worked so well and where improvements might be needed.
- Duty of candour was understood, and it was clear in the way if any complaints were made, they would be listened to, and concerns and worries would be investigated by the appropriate persons.

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

- Systems and processes were developed to ensure people and relatives were fully engaged with the running of Dunblane House. This included informal meetings and regular contact with visiting relatives. Dunblane House was run as a family home and feedback from people was on an informal day to day basis.

Working in partnership with others

- Records and discussion demonstrated the service worked in partnership with a variety of health and social care professionals to ensure people received the support they needed. These included social workers and General practitioners (GP).