

Mr Patrick Joseph Gilligan and Mrs Carol
Josephine Gilligan

Brooklands House Rest Home

Inspection report

3 Woodville Terrace
Lytham St Annes
Lancashire
FY8 5QB

Tel: 01253736393

Date of inspection visit:
17 July 2019

Date of publication:
02 September 2019

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About The service

Brooklands House Rest Home is a large detached residential home situated in an area of Lytham St Annes overlooking parkland. At the time of our inspection visit, there were 29 people living at Brooklands House Rest Home they are registered for 30 people. The home is situated on three floors accessed by a passenger lift and stairs. There are a range of aids and adaptations in place to meet the needs of people who lived there.

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

Brooklands House Rest Home was praised by people they cared for, relatives and by visiting professionals. People spoke extremely positively about ways in which the quality of their life had impacted on them and how well they were supported. All comments from people told us staff were extremely caring and made a real difference to their quality of life. They told us their work ethic and dedication has impacted on their life at Brooklands House Rest Home. This was in terms of confidence, wellbeing and their independence.

Risk assessments had been developed to minimise the potential risk of harm to people during the delivery of their care. People told us they felt safe when supported by staff. Staffing levels were sufficient. We confirmed this by our observations and discussions with people. Staff knew how to protect people from abuse and we saw safeguarding training was provided. The service managed people's medicines safely. The provider ensured safety checks of the home environment were completed regularly.

The management team ensured staff received an effective induction and training programme, staff confirmed this. People spoke positively about the quality of meals provided and praised the cooks. Staff ensured people received support with their healthcare needs. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People told us staff knew them well and provided care that reflected their needs and choices. Activities were varied, and people told us there were trips and entertainment regularly provided. Staff offered people choices and encouraged them to make decisions about their care. No formal complaints had been received by the service since the last inspection.

The management team were clear about their roles and obligations to people and provided care which resulted in good outcomes for people. They worked in partnership with a variety of agencies to ensure people's health and social needs were met. The service used a variety of methods to assess and monitor the quality of the service on a regular basis.

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

Rating at the last inspection

The last rating for this service was good (published 17 January 2017)

Why we inspected

This was a planned inspection based on the previous rating

Follow up: The next scheduled inspection will be in keeping with the overall rating. We will continue to monitor information we receive from and about the service. We may inspect sooner if we receive concerning information about the service.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Outstanding ☆

The service was exceptionally caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Brooklands House Rest Home

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

The inspection was carried out by an inspector and a 2nd inspector.

Service and service type

Brooklands House Rest Home 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 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.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection, including information from the provider about important events that had taken place at the service, which they are required to send us. We sought feedback from the local authority and Healthwatch Lancashire. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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 and we used this to plan our inspection.

During the inspection

We spoke with five people who lived at the home, a relative, one healthcare professional and the provider/registered manager about their experiences of Brooklands House Rest Home. We also spoke with six members of staff, deputy manager, the administrator and the cook. We observed care practices and how staff interacted with people in their care. This helped us understand the experience of people supported by the service.

We looked at care records of two people and arrangements for meal provision. We also looked at records relating to the management of the home and medicines records of two people. We reviewed the services staffing levels and walked around the building to ensure it was clean, hygienic and a safe place for people to live.

After the inspection

We continued to communicate with the provider to corroborate our findings and further information was sent by the provider in response to the feedback provided during the inspection visit.

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 remained the same.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider/registered manager protected people from the risk of abuse and their human rights were respected and upheld. Care practices observed were safe and people told us they received safe care. One person said, "Always well cared for and feel perfectly safe here."
- Safeguarding procedures continued to be followed and staff had a good understanding of what to do to ensure people were protected from abuse. Staff told us training was provided and updated. One staff member, "The training around abuse and safeguarding is important and we know that. This is why we have it updated and new staff receive it straight away."

Assessing risk, safety monitoring and management

- The service managed risks to people's safety appropriately. We found care plans contained completed assessments of people's risks. These included, mobility, falls and fire safety. The assessments provided information for staff about people's risks and how best to support the person to reduce the risk.
- Accident records contained evidence staff had taken appropriate action when people had experienced accidents, including falls.

Staffing and recruitment

- Staff continued to be recruited safely. Pre-employment checks had been carried out including a criminal records check. We confirmed this from records we looked at. One staff member said, "It all had to be in place before I could start to work at the home."
- The service was staffed sufficiently. The management team continued to provide staff with different skills to support people. Extra staff were deployed when people required specific support such as on a one to one basis or trips out. Staff confirmed levels of personnel on duty were sufficient to ensure people had a good quality of life.

Using medicines safely

- Medicines were managed safely, and people received their medicines when they should. People spoken with confirmed this. Medicines were recorded within people's medication administration records. This meant the provider had oversight of medicines people took and ensured they were administered in line with the prescriber's instructions.
- Staff who administered medicines had completed relevant training to administer medicines safely. One staff member said, "We all have to have training to give out medicines and we are checked regularly to make sure things are right."

- We observed medicines being administered at breakfast time. We saw good practice was followed to ensure people received the correct medicine at the right time and safely.

Preventing and controlling infection

- The provider continued to have safe and effective infection control procedures. Personal protective equipment such as aprons and gloves were available around the building. We saw staff make use of these to ensure correct practices were followed and reduce the risk of infection.
- Staff received training and regular audits were undertaken to ensure standards were maintained. Discussion with staff confirmed this and meant people were protected from the risks of poor infection control.

Learning lessons when things go wrong

- Systems were in place to record and review accidents and incidents. Accidents and incidents were investigated, and actions put in place to minimise future occurrences. Regular audits were completed, and lessons learned were shared with staff to improve the service and reduce the risk of similar incidents.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Assessments completed by the management team were comprehensive and detailed to ensure people's needs could be met and a plan of care developed from the information. Care records continued to contain details about people's care needs, and their ability to help themselves what support was required.
- We saw evidence the provider/registered manager was referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. This supported the service to ensure people received effective, safe and appropriate care which met their needs and protected their rights.
- Care plans continued to be regularly reviewed and updated when required. Records we looked at confirmed this.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and carried out their roles effectively. People told us they felt comfortable and confident staff had the skills and expertise to support them with their care needs. A relative said, "No problem with the knowledge these staff have, they know what they are about. I am extremely grateful for what they do. Also, one person who lived at the home said, "Yes, quite definitely staff have all the skills and experience I need. Staff are very effective and work well together from what I see."
- Staff confirmed they had received training that was relevant to their role and enhanced their skills. Staff told us they went through a thorough induction period when commencing their duties.
- Staff told us they continued to feel supported by the management team and received regular supervision and appraisal of their work.

Supporting people to eat and drink enough to maintain a balanced diet

- The service managed people's nutritional needs to ensure they received a balanced diet and sufficient fluids to keep them hydrated. Care plans confirmed people's dietary needs had been assessed and support and guidance was recorded as required. We received positive comments about the quality of food. They included, "Fantastic food we get a choice and good home baking by a top cook." Also, "I love my eggs in the morning and the cook always obliges."
- We arrived at breakfast time and observed a relaxed atmosphere with people eating their breakfast in their own rooms, lounges and dining area. Lunch was organised, managed well and provided a relaxed and social occasion for people to enjoy their meal.
- Where concerns had been identified regarding people's food and fluid intake appropriate action had been taken. This included implementing food and fluid charts to record the amount of food and fluid consumed

by people deemed to be at nutritional risk.

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked effectively with healthcare professionals to ensure people's healthcare needs were met. We saw the management team worked closely with health care services including GPs, and district nurses. A health professional only had positive comments about Brooklands House Rest Home. They told us how well they worked with them to ensure people received the right care and support.
- People confirmed they were supported to attend healthcare appointments when required.

Adapting service, design, decoration to meet people's needs

- Accommodation was accessible, safe, homely and suitable for people's needs. Bathrooms could accommodate people who required support with moving and transferring to the bath.
- The service had Wi-Fi (wireless connectivity) fitted allowing people with computers, smartphones, or other devices to connect to the internet or communicate with family and friends.

Supporting people to live healthier lives, access healthcare services and support

- People experienced effective, safe and appropriate healthcare support which met their needs. People spoke positively about the way the staff and management team had improved their quality of life and ensured all healthcare appointments were met.
- A visiting healthcare professional told us staff responded quickly and appropriately to any issues they encountered.
- Care records confirmed visits to and from GPs and other healthcare professionals had been recorded. The records were informative and had documented the reason for the visit and what the outcome was. This confirmed people's assessed needs were being met.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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.

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.

- People told us staff always asked for their consent before supporting them. Care records contained consent to care documentation that was signed by the person receiving care.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as Outstanding. At this inspection this key question has remained the same.

This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- People we spoke with told us they continued to experience exceptionally high standards of care and were treated 'like royalty' by everyone who worked at Brooklands House Rest Home. Comments included, "The way they treat everyone is fantastic. I did not want to come here and felt down. However, the way the staff support and care for me has made me feel so much better." Also, "They go out of their way to make sure everything is right for the residents, a fantastic place."
- People continued to be supported by exceptionally caring and respectful staff who treated them with dignity and respect. One person said, "Without exception staff are so caring and respectful, amazing home." An example of the impact the care had on people was highlighted when a person was unable, due to ill health visit a close relative in hospital. They had no visitors and the person was visibly distressed with the situation. The management team took it upon themselves and visited regularly in their own time and reported back to the person. A staff member said, "[Person who lived in the home] was so much better, relaxed and more joyful knowing that her loved one had regular visits and they could communicate with them." They continued to relay messages to one another and that comforted the person in the home.
- Staff had a good understanding of protecting and respecting people's human rights. They talked with us about the importance of supporting people's different and diverse needs. Care records seen had documented people's preferences and information about their backgrounds.
- The service had carefully considered people's human rights and support to maintain their individuality. Documents included information of protected characteristics as defined under the Equality Act 2010, such as their religion, disability, cultural background and sexual orientation. The registered manager told us they had systems to ensure people's human rights were upheld.
- Care records continued to detail important information in relation to people's dignity and privacy. It was evident the attitude of staff was to ensure support given to people was personalised and respected. A health professional told us the way staff show people respect and dignity was 'the best around'. They told us nothing but perfection was expected by the management team in terms of respect and dignity shown to people.

Supporting people to express their views and be involved in making decisions about their care

- People continued to be consulted about care and support and contributed to how their care would be provided. People told us they were encouraged to attend reviews. If there were any issues, the provider/registered manager would respond quickly. A relative said, "It is a marvellous place with

exceptional people who work here and yes we are involved with [relatives] care."

- The culture of the service was caring, compassionate and empowering. This reflected the attitude of all people who worked there and their values. There was a strong emphasis people were individuals. This was evidenced by our observations and discussions. A staff member said, "Everybody is different and involving people to make their own choices with our help is so important. This is how this place operates, it is the best place I have worked in care."
- People who required aids to express their views were supported to ensure they were consulted and contributed to any decisions made. For example, staff organised hearing and sight aids and went out of their way to ensure people received the best treatment. A relative told us, "They check [relatives] hearing equipment all the time. It has never not worked since they came here. It has improved [relative] quality of life."
- There was information available about access to advocacy services should people require their guidance and support. An advocate is an independent person, who will support people in making decisions, to ensure these are made in their best interests.

- Respecting and promoting people's privacy, dignity and independence
- People continued to be treated with respect and their dignity was upheld. There were examples of how staff supported people to improve their independence and confidence. For instance, one person arrived not wishing to mix with people and kept their own company. Following the assessment and continuous encouragement from staff, at times staying with the person past their working hours, the person gained more confidence. Eventually they went out in the local community on their own and continue to do so. We spoke with the person who said, "I was in a bad state but with their help I feel more confident and go out daily weather permitting. I feel so much better they have been so caring and patient."

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 good. At this inspection this key question has remained the same.

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

- The service continued to provide support that was focused on the needs and choices of people. We saw people's care records were personalised and detailed. They included information about their preferences and choices. They were updated on a regular basis and people told us they were involved in reviews of their care. One person said, "I know we go through everything about once a month or so to check things are ok."
- People told us staff gave them choices and they were able to make every day decisions about their care and how they wished to be helped. One person said, "I go out a lot on my own They know that it's my choice, I always tell them."

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.

- The management team assessed people's communication needs as part of the assessment process. They documented in people's care plans any support they needed with their communication needs and how that should be provided.

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

- People were encouraged to take part in events at the home and develop relationships. For example, on the day of our visit a trip to Blackpool Zoo had been arranged. People confirmed activities were available and said they could take part if they wished to do so. One person said, "Looking forward to going to the zoo today."
- The provider/registered manager had kept a record of activities people had undertaken and advertised on the notice board of up and coming events. There had been a variety of activities carried out which people we spoke with enjoyed the variety. One person said, "There is always lots going on. They put a lot of effort to keep us entertained, it's wonderful."
- Staff encouraged people to maintain relationships that were important to them. People told us they did not restrict visiting times and staff made visitors feel welcome. A relative spoken with confirmed this.

Improving care quality in response to complaints or concerns

- Complaints would be listened to, taken seriously and dealt with appropriately. People knew how to make complaints and felt confident that these would be acted upon. One person said, "I know how to make a complaint but never had to this place is so good."
- The manager told us if any complaints were received and upheld, any lessons learned would be shared with staff to avoid a similar issue arising in the future. No complaints had been received since the previous inspection.

End of life care and support

- People's end of life wishes had been recorded so staff were aware of these. No one at present was on end of life care. Staff had completed end of life care training and they confirmed this when spoken with.

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 has remained the same.

This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider/registered manager planned and delivered effective, safe and appropriate person-centred care. We saw all current and relevant legislation along with best practice guidelines had been followed. This was to ensure the diverse needs of everyone who used their service were met. People at the home and a health professional praised the attitude of staff and their commitment to the service.
- The service continued to have systems to make sure people received person-centred care which met their needs and reflected their preferences. The management team led by example, treating people as individuals and encouraging people, relatives and staff to be involved in the running of Brooklands House Rest home. People spoken with confirmed this.
- The structure of the service was organised, and a clear staffing system was evident. Staff spoke positively about how they were managed. One person said, "We have a fantastic owner and management team who are always involved in caring for people at ground level."

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 understood legal obligations, including conditions of CQC registration and those of other organisations. They had submitted statutory notifications to CQC about people using the service, in line with current regulations. A statutory notification is information about important events which the service is required to send us by law.
- We found they had clear lines of responsibility and accountability. People spoke positively about how Brooklands House Rest Home was managed. A visiting health professional told us the provider was aware of the needs of people and the service operated efficiently.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider/registered manager and their deputy were experienced, knowledgeable and familiar with the needs of the people they supported. A staff member said, "They are both so good and knowledgeable. The owner has been here over 30 years and the deputy about 13 years, so they are very experienced."
- Discussion with the staff confirmed they were clear about their role and between them and the management team provided a well run and consistent service. One person said, "We wanted to come here

because of the reputation and the fact they have been around for a long time."

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

- The provider created an open culture and encouraged people to provide their views about how the service was run. Satisfaction questionnaires to people and relatives were distributed regularly for feedback about the service. We reviewed the results of the questionnaires issued and found very positive results and a high level of satisfaction expressed about all aspects of Brooklands House Rest Home. They informed us any negative comments would be acted upon we saw evidence of this from previous surveys.
- Staff told us staff meetings were held regularly and they felt able to raise concerns and make suggestions. They told us the provider/registered manager was supportive and respected their views.

Continuous learning and improving care

- The service was regularly assessed and monitored. A wide range of audits such as medication, care plans and maintenance were regularly carried out. We saw evidence the provider had acted upon any findings from the audits. This demonstrated improvements were made to continue to develop the home for the benefit of people who lived and worked there.

Working in partnership with others

- The service worked in partnership with other organisations to make sure they followed current practice, providing a quality service and the people in their care were safe. These included healthcare professionals such as GPs, and district nurses. A health care professional told us the provider and staff worked with them and was 'one of the best homes around'. This ensured a multi-disciplinary approach had been taken to support care provision for people in their care.