

Liverpool City Council

Besford House

Inspection report

19-20 Besford Road
Belle Vale
Liverpool
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21 June 2016

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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?	Requires Improvement ●

Summary of findings

Overall summary

This inspection took place on 14 and 21 June 2016 and was unannounced.

Besford House is located in the Belle Vale area of Liverpool. There are three bungalows on the site which provide accommodation for up to six people in each bungalow. One bungalow provides permanent accommodation, care and support for people with learning disabilities and the other two provide emergency and respite care. There is an additional bungalow on the site which houses the office, staff rooms and storage facilities. The site is large and spacious and the buildings are situated around a central garden area. Besford House is within easy reach of supermarkets and shops, leisure and public transport facilities.

The home is registered to provide accommodation and care for up to 18 adults between the ages of 18 to 66. One bungalow was dedicated to providing planned respite, one was for emergency respite or placements and the third bungalow was a permanent home to five people, all who had been there for some years.

The home required a registered manager. 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.

At the time of our inspection, there was an interim manager in post as the previous registered manager had been absent from the service for several months. We were told by staff and senior managers that the home's future was uncertain and that several options were being considered both for the service users, the site and the staff. There was ongoing consultation with users of the service, their relatives and staff. Because the home's future was uncertain, there had been no appointment of a registered manager since the previous one had left.

Before our inspection, we looked at information the Care Quality Commission (CQC) had received about the service including notifications received from the manager. We checked that we had received these in a timely manner. We also looked at safeguarding referrals, complaints and any other information from members of the public. We had not received any information of concern about the home. We looked at the information contained on the Healthwatch Liverpool website. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We found that the home operated safely and that staff were able to tell us about safeguarding procedures. There were appropriate health and safety checks made in the home and staff were recruited with the relevant checks made prior to their employment.

The provider had complied with the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards and its associated codes of practice in the delivery of care. We found that the staff had followed the requirements

and principles of the Mental Capacity Act 2005 (MCA). Staff we spoke with had an understanding of what their role was and what their obligations were in order to maintain people's rights.

The care records were person centered and we saw that staff treated people as individuals and respected their privacy, dignity, choice and need for confidentiality.

There was no registered manager in post and the interim manager was dealing with a difficult situation as the home was in a period of great change for everyone associated with it, which involved moving people living there to other accommodation and re-locating staff to other jobs.

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.

There was appropriate recording of medication, which was stored safely.

Staff had been recruited safely. Recruitment, disciplinary and other employment policies were in place.

Safeguarding policies and procedures were in place. Staff had received training about safeguarding vulnerable people.

The home was clean, comfortable and well maintained.

Is the service effective?

Good ●

The service was effective.

All staff had received training and some training was updated

Staff received good support, with supervision and annual appraisals taking place.

Menus were flexible and alternatives were always available. People said they enjoyed their meals and had plenty to eat.

The home was designed, equipped and decorated to meet the needs of the people living there.

Is the service caring?

Good ●

The service was caring.

We saw that people's dignity and privacy were respected when staff supported them and were aware of how to protect people's confidentiality.

People and their relatives recorded that they were pleased with the staff. They said staff were respectful, very caring and helpful.

Is the service responsive?

Good ●

The service was responsive.

Care plans were up to date and informative. The information provided sufficient guidance to identify people's support needs.

The complaints procedure at the home was up to date and available.

People were able to attend a wide variety of activities.

Is the service well-led?

The service was not always well-led.

There was no registered manager in post.

There were systems in place to assess the quality of the service provided at the home. People who lived at the home, their relatives and staff were asked about the quality of the service provided.

Staff were supported by the manager and deputy manager.

The provider worked in partnership with other professionals to make sure people received appropriate support to meet their needs.

Requires Improvement 

Besford House

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 took place on 14 and 21 June 2016 and was unannounced. We visited the home on both days and we visited the central Liverpool Council office at Cunard Buildings in Liverpool on 21 June 2016 in order to see records relating to staff recruitment and training.

This inspection was conducted by one adult social care inspector.

We checked with the local authority and also looked at our own records to see if there was any information we should consider during this inspection and to see if other people had made comments to us, about the service.

We also looked at the local Healthwatch website to see if they had recorded any concerns about the home. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We also looked at our own records, to see if the service had submitted statutory notifications.

We toured the home and visited all three of the bungalows. We observed the interactions between staff and the people living there and spoke with three people. We spoke with five staff including the service manager by telephone and the manager of the home, viewed three staff files and saw other records relating to the running of the home.

Is the service safe?

Our findings

One person told us that us, "I feel very safe here".

Another person said, "I didn't feel safe at first because I didn't know it or anybody here, but now I feel really safe".

One person recorded in an exit survey, 'I feel protected'.

Staff demonstrated that they had an understanding of the arrangements for safeguarding vulnerable adults. There were able to tell us about abuse and how to report it. We saw that the safeguarding policy followed local safeguarding protocols. Staff told us that if they had any concerns about any allegations of abuse or neglect they would report this to the senior person available immediately and most staff also knew that they were able to report it to the local authority or to CQC. The staff were aware of the whistleblowing policy and told us they would have no hesitation to use it if required.

When we looked at staff recruitment files we saw that staff had been recruited using safe recruitment methods. There had been an appropriate application and interview process and before any staff member had started in employment there had been checks made on any criminal records and their previous employment history.

We saw that there were appropriate employment policies and procedures in place, such as grievance and disciplinary procedures.

Records showed that all staff had completed training about safeguarding adults. The provider had a policy on safeguarding and we were told that the policy was updated frequently to reflect any changes necessary. The staff we spoke with were aware of the need to report any concerns to a senior person and they had knowledge of their own responsibility to report any concerns about their workplace to an outside body if necessary.

We saw that risk assessments had been completed which had identified risks to people's safety and well-being. The risk assessments had been dated, updated and marked as reviewed. Risk assessments had been completed for such things as moving and handling, the environment, medication, using money and equipment and people's physical and mental health.

Medication was administered via a monitored dosage system supplied directly from a pharmacy. We inspected medication storage and administration procedures in the home. We found the medicine storage to be secure and tidy and that the medication administration sheets (MAR) were up-to-date and contained photographs of the people they related to. The MAR sheet and stored medication tallied. Some people self-medicated and used appropriate storage in their rooms for the medication and the MAR sheets were kept in the manager's office and frequently audited against what was in people's rooms. All staff had to complete the medication administration course before being able to administer medication to the people in the

home.

The cleanliness and hygiene of the premises was good; all of the areas were seen to be clean on the day of the inspection. There were sufficient soap dispensers within the corridors for staff and visitors to have the opportunity to disinfect their hands appropriately which ensured good infection control.

Each bungalow had its own kitchen which was large tidy and clean. The fridge and freezer temperature checks were completed twice a day and the food temperature checks as and when necessary. All were recorded as being within safe limits.

We visited all three bungalows and saw that they were well decorated and comfortably furnished for the people living there. Health and safety of the environment had been checked through various risk assessments and audits. We saw that all the checks on such things as legionella, water temperatures, gas and electrical installations had been done regularly and were up to date and within safe limits. There were smoke and fire detectors throughout the home, with the necessary firefighting equipment placed in the buildings. These were also checked and serviced regularly. There were appropriate fire alarm checks and fire drills and the home had evacuation plans, should there be an emergency. We saw that individual personal emergency evacuation plans (PEEPs) had been recorded for staff to use in an emergency.

We noted that the manager had accident records that were completed in full, showing what the incident was and how they had investigated and recorded they made referrals to other professionals and reported where required.

Is the service effective?

Our findings

One person replied when the asking them if staff were trained, "Yes, they know what to do".

The Care Quality Commission (CQC) is required by law to monitor the operation of Deprivation of Liberty Safeguards. 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 was 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 checked whether the service was working within the principles of the MCA and whether any authorisations or conditions to deprive a person of their liberty, were being met. We saw that Besford House and its staff were working within this framework and that the necessary applications had been made to the 'supervisory body', which was the local authority.

We saw that new staff were inducted and completed a probation period before being confirmed in post; however the staff team were stable and there had been little change to it in recent years.

We looked at staff training records and saw that staff had attended a range of training including food hygiene, first aid and safeguarding, but that some updates had not been completed.

We were told that this was in part to the change that the home was about to undergo and the staff's needs in respect of any new position or redeployment the provider might offer them. However, we noted that the staff we saw during the inspection appeared to be competent at their job and the people receiving support were confident in them. It was clear from the interactions we witnessed between staff, the manager and the people living in the home that staff were familiar with people's needs and supported them well.

Staff told us they were well supported and supervised. One staff member told us, "There's always help from the management". Another staff member confirmed that they received regular supervision and appraisals and we saw notes of these in the records.

The premises were purpose built some time ago on a flat site and there were three bungalows each housing up to six people, situated around a central garden area. The rooms in each bungalow were light and spacious and corridors and doorways were easy to access. Adaptations were available in the bathrooms and toilets for people who needed them. Each building had a large communal well-equipped kitchen which was used by people living or staying in Besford House, with the support of staff. There was a large lounge and dining area in each building. A fourth bungalow accommodated the manager's office, the administration office and meeting rooms and a kitchen. People who were permanently resident in one of the Besford House had furnished and decorated both their bedrooms and the communal areas to their choice.

Each bungalow kitchen was used to prepare meals for the people living in it and people were encouraged to decide on the menu and to help prepare the meal. The manager told us that staff tried to ensure that people had a healthy, home cooked diet which included fresh fruit and vegetables. There were bowls of fresh fruit in each building. The manager went on to tell us it was sometimes difficult to ensure people had a healthy diet, as people wanted chips and chicken nuggets and lot of the time. They said, "The fresh fruit ends up being chopped up into a fruit salad but at least people eat it that way".

People were able to help themselves to snacks from the kitchen and there were also crisps and other snacks available in the manager's offices.

Is the service caring?

Our findings

One person told us, "Staff are Great".

Another said, "Staff are lovely".

We noted that all staff on duty knew people who lived in the home well and were able to communicate with them and meet their needs in a way each person wanted. We saw staff joking and laughing with people and involving them in conversations. We also saw staff addressing people in the manner they preferred.

We observed staff interacting with people throughout the day and evening. From their interactions it was clear staff had a good knowledge of each person and how to meet their needs. Staff were very supportive and were heard throughout the inspection confirming comments made by people, supporting people to make decisions and being patient. The people who lived in the home were constantly encouraged by staff to be independent. People we spoke with and their relatives informed us that staff met people's individual care needs and preferences at all times.

We observed that staff were very patient and supportive to the people who were in the home at the time of our inspection. We saw that the entries that they have made in the daily records demonstrated a clear understanding of the needs of that person and that they reflected that the staff member cared about their welfare.

When people had completed the service's 'exit survey', a relative had recorded 'Keep up the good work' Other comments included, '[the staff] are very good and helpful', and 'Besford provides a very good service to people who need respite'.

We observed caring interactions between staff and the people living at the home. We observed the people who used the service were supported when necessary, to make choices and decisions about their care and treatment.

We saw that staff respected people's privacy and were aware of issues of confidentiality. We noted that when members of staff were talking with people who required care and support; they were respectful to the individuals and supported them appropriately with dignity and in a respectful manner.

We observed people being listened to and talked with in a respectful way by the manager and the staff members on duty. Staff were all seen and heard to support the people, communicating in a calm manner and also reassuring people if they became anxious. The relationship between the staff members and the managers, with the people living at Besford House was respectful, friendly and courteous.

There were regular meetings for people which gave them information and advice about living safely, comfortably and happily at Besford House.

The provider had an effective system in place to request the support of an advocate to represent people's views and wishes if required.

Is the service responsive?

Our findings

We looked at people's care plans. These contained personalised information about the person, such as their background and family history, health, emotional, cultural and spiritual needs.

People's needs had been assessed and care plans developed to inform staff what care to provide. The records informed staff about the person's emotional wellbeing and what activities they enjoyed. The plans were effective; staff were knowledgeable about all of the people living at the home and what they liked to do.

The care plans and associated documentation had been reviewed and updated as necessary. Care plans were available for the people on either planned or emergency respite and were informative and helpful to staff to enable them to better support the person.

Activity plans were available at other of the provider's services, such as local day centres and colleges. People told us they went to these sometimes daily or weekly. Staff took people out to other outings, such as shopping, to see their relatives, to go to the theatre and to training sessions.

We saw staff talking with people and supporting them to go out into the community to purchase personal things for themselves, such as DVD's. People and staff were engaged with each other and we heard that they often went out to the theatre and to other events. One person confirmed they often went out for the evening and said, "I love going to the theatre".

The home had a complaints policy and this was displayed on the notice board. It was also contained in 'easy read' format in the service user guide, entitled, 'This is Besford. Welcome'. Easy read refers to the presentation of text in an accessible, easy to understand format. It is often useful for people with learning disabilities, and may also be beneficial for people with other conditions affecting how they process information. We saw that the complaints form was also available in 'easy read' format and that people were encouraged to complete similar 'Have Your Say' forms.

There had been two complaints raised at the home in the last 12 months. We looked at the records that showed how the complaints had been dealt with. All of the information was in place to record what the manager had done to investigate the complaints raised and the outcomes of them. The complaints had been closed. We were provided with the complaints policy and procedure. People we spoke with told us that if they were not happy they would talk to the manager, deputy manager or staff. The complaints procedure was displayed on the notice board by the front door and was given to all of the people living at the home and their relatives.

We also looked at many compliments from relatives, friends and other visitors who were all complimentary about Besford House and the staff.

Staff told us that they had residents and relatives meetings but these had tailed off recently due to the

uncertain future of the home and the people living there. The manager said that there was an open house day every other month, for people and relatives to share any issues with the manager. We were told relatives and any other people visiting people at the home could also discuss there and then with the managers regarding any issues.

Is the service well-led?

Our findings

One staff member told us, "We just carry on and try to be as normal as possible and support the clients".

The service required a registered manager. The previous registered manager had been absent from the service for a long period of time and was not able to return to it. An interim manager had been appointed to oversee the service and to assist in managing its future until other options were found for it.

We spoke with the service manager by telephone and found that they and the manager were open, honest and transparent about the management of the home and the uncertain future of it. The home was about to close but at the time of the inspection there was no definite date or suitable options for it.

It was a time of great uncertainty for the people who lived in the home permanently and for those who used it as a respite placement as well as everyone associated with the home. There were plans to find alternative accommodation for the permanent residents of the home and the service planned to finish taking bookings for respite periods which were for periods after Christmas 2016.

Staff told us they had been formally notified of their employment rights and options and this was confirmed by the provider.

The manager and the staff had a clear understanding of the culture of the home and were able to show us how they worked in partnership with other professionals and family members to make sure people received the support they needed. We spent time talking to the manager and they told us how committed they were to providing a quality service.

There were effective systems in place to assess the quality of the service provided in the home. These included weekly medication audits, staff training audits, health and safety audits, incident and accident audits.

We saw recent audits which demonstrated that generally, the quality checks and audits were still being completed as required, although one staff member told us it was difficult to do anything other than support people with the impending move.

The manager was frank about the fluidity of the staffing arrangements, for example telling us that some staff needed updated training but that this would be looked at when they were in their new posts. The manager told us that once staff had left, their place would be taken by agency staff, but that fortunately, most of the agency staff had been used by Besford House for several years, so they were familiar with people and the home.

We saw that regular meetings were held with staff and that they had been involved as much as possible; the last had been a team organisers meeting on 06 June 2016 and a further one was planned for the 30 June 2016. Staff had all been written to and provided with information and choices about how they wished to

continue in the provider's employment and told us they appreciated this openness.

The service had completed the required statutory notifications and forwarded them to CQC, as required and in a timely manner.