

# Lifeways Community Care Limited

# Prudhoe House

## Inspection report

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Prudhoe  
Northumberland  
NE42 5JS

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03 February 2017

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### Ratings

Overall rating for this service

Good ●

Is the service effective?

Good ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 21 and 24 December 2015 at which a breach of legal requirements was found. This breach related to Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, entitled Need for consent. After the comprehensive inspection, the provider created an action plan about what steps they would take to meet the legal requirements in respect of this breach.

We undertook this focused inspection to confirm that they have now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Prudhoe House on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Prudhoe House is a small residential care home based in Prudhoe, Northumberland. The people accommodated at the service are living with a range of autism spectrum disorders, and/or learning and physical disabilities. People receive 24 hour personal care and support from a team of care staff.

This focused inspection took place on 3 February 2017 and was unannounced. This meant the provider, registered manager and care staff did not know we would be visiting.

At the time of our visit a registered manager was in post who had been registered with the Commission to manage the carrying on of the regulated activity since July 2016. 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.

We did not review all of the key lines of enquiry in the effective and well led domains. This was because at our last comprehensive inspection, legal requirements in relation to the other regulations that fall within these domains, had already been met and incorporated into the overall rating.

CQC is responsible for monitoring the application of the Mental Capacity Act (2005) and deprivation of liberty safeguards (DoLS). In line with the requirements of the Mental Capacity Act 2005 (MCA), we checked to see if the provider had now made applications to lawfully deprive people of their liberty, as these had not been completed at our last inspection. We found that applications had been made to supervisory bodies within the relevant local authorities, and in all but one case, the decisions about these applications were still in progress. A deprivation of liberty order had been authorised for one person in February 2016.

This meant the provider was now meeting the legal requirements of Regulation 11 of the Health and Social Care Act (Regulated Activities) Regulations 2014. As a result, we have changed the rating in the effective domain from 'Requires Improvement' to 'Good', because the failure to progress DoLS applications, was the only area which fell short of legal requirements at our last visit.

When we visited the home we identified the provider and registered manager had not ensured that the performance rating issued as a result of our comprehensive inspection in December 2015, was displayed for visitors to see. In addition, we established that the provider had not arranged for the last inspection report and performance rating to be accessible on their website. Following this inspection the registered manager has confirmed that the last performance rating issued by the Commission had been displayed within the location and on the provider's website. We have recommended that the provider re-familiarises themselves with the requirements of this regulation.

We also noted at this inspection that in respect of the granted deprivation of liberty order, a statutory notification about this had not been submitted to the Commission in line with the legal requirements of Regulation 18 of the Care Quality Commission (Registration) Requirements 2009. The registered manager apologised for this oversight and has subsequently submitted the required notification retrospectively. We have recommended that the provider re-familiarises themselves with the requirements of this regulation.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service effective?

**Good** ●

The service was effective.

We did not look at all key lines of enquiries in this domain.

We checked that the provider had submitted applications to deprive people of their liberty lawfully since our last inspection, and found that they had.

All other areas of this domain were rated good at our last inspection.

### Is the service well-led?

**Requires Improvement** ●

The service was not always well led.

We did not review all key lines of enquiry under this well-led domain.

The provider did not notify us of one granted DoLS application in line with legal requirements. This has been submitted retrospectively.

The provider had not displayed the last performance rating in line with legal requirements, either within the location, or on their website. This was rectified before the completion of this inspection.

# Prudhoe 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. At our last inspection of this service in December 2015 the provider was found to be in breach of Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This inspection was undertaken to check that improvements to meet the legal requirements of this regulation, had been made. We inspected the service against two of the five questions we ask about services: is the service effective and is the service well led.

This focused inspection took place on 3 February 2017 and was unannounced. It was carried out by one inspector.

Prior to our inspection we reviewed all of the information that we held about the service within the Commission. We obtained feedback about the service from Northumberland contracts and commissioning team, and Northumberland safeguarding adults team. We used the information that we had gathered and reviewed, to inform the planning of this inspection.

During our inspection we spoke with the registered manager, team leader, one member of the care staff team and one person who used the service. We carried out observations around the premises and reviewed records related to people's care, staff training and deprivation of liberty safeguards (DoLS).

## Is the service effective?

### Our findings

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 so that they can 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).

At our last inspection we found the provider was in breach of Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations, as they had not appropriately applied the MCA. This was because they had not made applications to the relevant local authorities to deprive people of their liberty lawfully, in line with legal requirements.

At this inspection we found improvements had been made and the provider was meeting the requirements of the Act. Applications for deprivation of liberty safeguards (DoLS) had been made to the relevant local authority safeguarding teams and the service was awaiting the outcome of these applications in three cases. One person had been assessed and an authorised deprivation of liberty safeguard was in place to ensure any restrictions on their freedom of movement and liberty, were lawful.

We did not review the other key lines of enquiry under this effective domain at this focussed inspection visit. However, we spoke with staff and were satisfied that since our last inspection in December 2015, the provider had continued to follow good care practices and provide staff with appropriate training, supervision and appraisal. As the provider is now meeting the requirements of Regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, we have changed the rating of this domain from 'Requires Improvement' to 'Good'.

## Is the service well-led?

### Our findings

Whilst we did not review all key lines of enquiry under this well-led domain, we identified some minor shortfalls during this focused inspection.

We identified that although applications to deprive people of their liberty lawfully had been made to the relevant local authorities since our last visit to the service in December 2015, one of these DoLS applications had been granted but a statutory notification about this granted application had not been submitted to the Commission. This was contrary to the legal requirements of Regulation 18 of the Care Quality Commission (Registration) Regulations 2009. We discussed this with the registered manager. They told us that DoLS applications had been submitted to the relevant local authorities in February 2016 by the previous manager, but they did not realise the previous manager had not notified the Commission of the results of this one granted application, before leaving their employment with the provider.

Following our inspection the registered manager has submitted this required notification retrospectively.

When we visited the service location we noted that the performance rating from our last inspection issued in March 2016, was not clearly displayed within the home. This was contrary to the legal requirements of Regulation 20A of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We discussed this with the registered manager. They told us this had been an oversight on their part and the next working day following our inspection, they confirmed in writing that their up to date rating was now displayed within the home. In addition, the provider had not added the performance rating and last inspection report to their website, which is also contrary to the above named Regulation.

Following our inspection the registered manager confirmed that the provider has added our last inspection report including the performance rating to their website. We have checked and confirmed that this has been done.

We recommend the provider re-familiarises themselves with the legal requirements of Regulation 18 of the Care Quality Commission (Registration) Regulations 2009 and Regulation 20A of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.