

Pro-Care Disperse Housing Ltd Pro-Care Dispersed Housing Ltd Clifford Lodge

Inspection report

12 Clifford Road Blackpool Lancashire FY1 2PU Date of inspection visit: 24 April 2017

Good

Date of publication: 14 June 2017

Tel: 01253628793

Ratings

Overall rating for this service

Is the service safe?GoodIs the service effective?GoodIs the service caring?GoodIs the service responsive?GoodIs the service well-led?Good

Summary of findings

Overall summary

This inspection visit took place on 24 April 2017 and was unannounced.

Clifford Lodge is a care home for six adults with enduring mental health needs. The home is situated in the north shore area of Blackpool close to the town centre. The accommodation provides six single rooms. Toilet and bathing facilities are located on the first floor. There is no lift for this service. Street parking is available at the front of the home.

At the last comprehensive inspection on 28 October 2014 the service was rated overall as good.

At this inspection we found the service remained good.

People spoken with were satisfied with the care they received and told us the staff were kind and respectful.

There were procedures in place to protect people from abuse and unsafe care. We saw risk assessments were in place which provided guidance for staff. This minimised risks to people.

Care plans detailed how people wished to be supported. People who received support were involved in making decisions about their care. Their consent and agreement were sought before providing care.

Staff supported people with medicines safely. Medicines were stored securely, administered as prescribed and disposed of appropriately.

There were sufficient staff available to provide people with the support they needed. Staff received training to carry out their role and knew how to support and care for people. They had the skills, knowledge and experience to provide safe and effective support.

Infection control practice was good and staff had received training in this area.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

People told us they were satisfied with the variety and choice of meals available to them. Staff knew people's food likes, dislikes and any allergies people had.

People knew how to raise a concern or to make a complaint. The complaints procedure was available and people said they were able to raise any concerns.

People were frequently encouraged to complete short surveys about the quality of their care and actions were taken in response to these. Senior staff monitored the support provided to people. Audits of care records and risk assessments were carried out regularly.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe? The service remains good.	Good ●
Is the service effective? The service remains good.	Good ●
Is the service caring? The service remains good.	Good ●
Is the service responsive? The service remains good.	Good ●
Is the service well-led? The service remains good.	Good •



Pro-Care Dispersed Housing Ltd Clifford Lodge

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 checked 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 visit took place on 24 April 2017 and was unannounced.

The inspection team consisted of an adult social care inspector.

Before our inspection on 24 April 2017 we reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people the service supported. We checked to see if any information concerning the care and welfare of people who were supported had been received.

We spoke with two people who lived at Clifford Lodge. Three people were on holiday with staff support when we inspected so we were unable to speak with them. We observed staff interactions with people who lived at the home. We spoke with, two health and social care professionals, the registered manager, and a member of staff.

Prior to our inspection visit we contacted the commissioning department at the local authority and Healthwatch Lancashire. This helped us to gain a balanced overview of what people experienced accessing the service.

We looked around the building to ensure it was clean, hygienic and a safe place for people to live. We looked at care and medicine records of two people and arrangements for meals. We looked at staff rotas to check staffing levels, looked at staff recruitment, and training records and records relating to the management of

the home. We also spoke with two care professionals. This helped us to gain a balanced overview of what people experienced whilst living at the home.

Is the service safe?

Our findings

People who spoke with us told they felt safe with the staff who supported them and were satisfied with the support they received. One person said, "Yes I feel safe here and the staff are good."

Staff knew the actions they needed to take in regard to suspicion of abuse. There were procedures to minimise the risk of unsafe care or abuse. They explained the process to follow to report any concerns about people's safety. Staff had received training on safeguarding vulnerable people to assist them.

A member of staff told us about the risk assessments in place for people they supported and how these helped them to reduce dangers in specific situations. We looked at risk assessments and saw these assisted people to remain as independent as possible while encouraging safe behaviour. This guidance assisted staff to provide safe care. We saw the risk assessments covered ways to reduce risks related to activities and behaviours.

We saw there were procedures for dealing with emergencies and unexpected events. The registered manager showed us how emergencies, accidents or incidents were reviewed for any lessons learnt and shared with the staff team.

People said staff supported them with their medicines safely and stored them securely. Their care and support records included information about what their medicines were for, how and when given and any possible side effects. Staff told us they had received medicines training to ensure they were competent to administer medicines. Training records confirmed this.

People told us there were enough staff to provide support. Staff told us and rota's demonstrated there were sufficient staff to provide supervision and oversight of people. Staff mostly worked alone but had access to support as needed. We saw staff supported people on appointments, if people wanted them to, and to join in activities and holidays.

We saw the home was clean and staff took infection control measures to reduce the risk of cross infection. The building and equipment was maintained with the exception of some recommendations from a recent electrical installation certificate. However we saw evidence that these had been completed soon after the inspection visit.

Is the service effective?

Our findings

People told us they were satisfied with the meals in the home. One person said, "Staff cook the meals. They are ok. They make food I like." People were able to make their own meals/snacks and drinks. Staff knew people's likes and dislikes and were aware of any cultural and health needs in relation to their diet. We saw care plans described people's food preferences and dislikes and any allergies. This helped them to provide meals suitable for people. They told us and training records evidenced they had received training in food safety.

We saw staff monitored people's health and changes in people's health were recognised quickly by staff. People told us staff made prompt referrals for health problems and provided support to attend healthcare appointments where the individual wanted this.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Staff demonstrated an understanding of the legislation as laid down by the MCA. Records were in place to indicate that people consented to their care. Care plans included information in relation to the level of the person's capacity and staff had followed the correct processes to ensure people's legal rights were protected.

We looked at training records and certificates and spoke with staff. We saw staff were trained and knew how to support people. The training provided was designed to equip them with the skills needed to support people safely and effectively. They were also encouraged to develop their knowledge further by obtaining national qualifications in care. Records seen and staff spoken with confirmed they received regular supervision and appraisal of their performance.

People who lived at Clifford Lodge needed to be able to walk independently as the home was not wheelchair accessible. Admission criteria required people to be quite independent and not need staff to provide much personal care. The design of the building met the needs of people who lived there.

Is the service caring?

Our findings

People we spoke with told us staff were polite, respectful and considerate. We saw people were treated with compassion and respect. One person said, "The staff are 'sound'. Everything is OK here."

Staff had a good understanding of protecting and respecting people's human rights. They knew and responded to people's diverse cultural and spiritual needs and treated people with respect and care. We saw staff respected people's family and personal relationships and encouraged these. People said staff listened to them and they were involved in their own care.

We saw staff treated people in a respectful way and were aware of people's individual needs around privacy and dignity. People told us staff were sensitive and gave them support and advice. Staff respected people's right to make choices and decisions. Where people had mental capacity, although staff encouraged them to make safe choices, they accepted people could choose to make ill-advised decisions.

People said they were encouraged to maintain their independence as much as they were able to. Staff told us they supported people to maintain or develop daily living skills to enable them to be more independent.

We looked at two people's care records. We saw their personal information was easily accessible to them. It was personalised and people had been involved in developing and updating their care plans. People's end of life wishes were recorded where possible so staff were aware of these.

Before our inspection visit we contacted external agencies about the service. They included the health and social care professionals and Healthwatch Lancashire. They had no concerns about the service.

Is the service responsive?

Our findings

People said they received good care that met their needs and wishes and helped them to remain as independent as possible. They told us they had identified future plans and goals with staff who supported them with daily living skills and to become more independent. We saw people were supported to remain as independent as possible and develop skills so they were able to move onto more independent living if they chose.

People said they chose when to get up and go to bed, what to do with their time and whether to get involved in daily living, social and leisure activities. People told us staff responded promptly to requests for support and assisted them in the way agreed in their care and support plans. We only spoke with two people as the other three people had set off earlier that morning on holiday with staff support. People told us staff encouraged them to remain active and occupied with daily living, social and leisure activities.

We looked at two people's care and support records. These were, personalised and provided guidance to staff on how to support people with their daily routines and personal care. They were regularly reviewed and amended as people's needs changed. We spoke with staff who demonstrated they had a good understanding of people's individual needs. We saw from the care records and talking with people they were involved in developing and reviewing care plans unless they refused to do so. If an individual refused to engage in reviewing care despite encouragement, this was recorded in their care records.

People told us knew how to make a complaint if they were unhappy with their care or had concerns. They added if they felt the need to complain, then they would feel confident enough to discuss a complaint or to raise an issue that was worrying them with the registered manager or staff. One person said, "It is alright here I have no complaints." We looked at the complaints policy which informed people how their concerns would be dealt with. The service had not received any formal complaints since our last inspection. However they frequently checked with people that they were satisfied with the support given to them, which the registered manager felt stopped minor grumbles becoming bigger issues.

Is the service well-led?

Our findings

There was a registered manager in place. 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.

People told us the registered manager and staff team were approachable. They said the Registered manager routinely had informal 'chats' with them and the home was run well. We saw people approached the registered manager and staff team in a relaxed, friendly manner. We found the registered manager had sought the views of people about their care and the service provided by a variety of methods. These included short surveys, meetings and informal chats. This helped staff to support people in the way agreed with each person.

The home had a clear management structure in place. We saw the management team supervised, supported and encouraged staff to develop their skills and knowledge and provide good care. The management team demonstrated they understood their roles and responsibilities and legal obligations, including conditions of registration from CQC, and those placed on them by other external organisations. They showed good leadership and encouraged staff to develop skills and knowledge. We spoke with a member of staff. They gave positive feedback about the management of the service. They told us they enjoyed working at Clifford Lodge and received good support from the registered manager and house manager.

We saw staff meetings and supervisions were held to involve and consult staff. Staff told us they were able to contribute towards care practice and development of the service through team meetings, and supervisions.

The registered manager monitored whether the home was maintaining an effective service and acted on any issues identified. They had systems in place to effectively govern the quality of their service and the staff. The audits and checks had been documented and any issues found on audits were acted upon promptly.