

ADL Plc

# Crompton Court

## Inspection report

Crompton Street  
Liverpool  
Merseyside  
L5 2QS

Tel: 01512981959

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30 January 2024

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

Crompton Court is a residential care service that provides accommodation and personal care for up to 33 people. It accommodates people across 2 floors, each of which has separate facilities. At the time of our inspection, there were 27 people living at the home.

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

Everyone we spoke with said they felt safe living at the home. Feedback included "Absolutely wonderful". There were enough staff to ensure people were kept safe, and call bells were answered in a timely manner. Staff were recruited and selected safely, and medicines were appropriately managed. Incidents and accidents were recorded and analysed for patterns and trends. Risks to people's health and well-being were assessed and reviewed. Staff could clearly describe the course of action they would take if they felt someone was being harmed or abused. Safety checks on the environment were in place and robust.

The registered manager welcomed feedback and was responsive. All notifications had been sent to CQC, and the registered manager understood what was expected of them. Staff told us they enjoyed working at the home, and they felt they could approach the registered manager to help them develop further in their roles or if they had any concerns. The registered manager was well known. Staff told us the registered manager led by example and was always on hand to offer support.

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 last rating for the service was good (Published 18 December 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

This inspection was a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Crompton Court on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next

inspect.

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

We always ask the following five questions of services.

<p><b>Is the service safe?</b></p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p><b>Good</b> ●</p>
<p><b>Is the service well-led?</b></p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p><b>Good</b> ●</p>

# Crompton Court

## Detailed findings

### Background to this inspection

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# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- There was a policy in place for staff to follow, and all staff had been trained in safeguarding.
- The staff we spoke with described the course of action they would take if they felt anyone was being harmed or abused. One staff member said "I would report it right away."

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- Risk assessments were detailed and were reviewed every month or when someone's needs changed.
- There was an incident and accident log in place and this was being reviewed regularly for patterns and trends.
- Everyone we spoke with said they felt safe at the home. Comments included, "I feel safe here. At home I fell a lot." A relative told us "Wonderful- can not praise the staff enough here." Also "Exceptional- home from home." A person living at the home told us "The staff are just lovely- they always knock to make sure I am safe."

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff.
- Rotas showed there was enough staff on shift. People we spoke with also confirmed there was enough staff. One person said "I just press my buzzer and they are there to help."
- The provider operated safe recruitment processes.

Using medicines safely

- People were supported to receive their medicines safely.
- Medication was stored safely, and only administered by staff who had undergone additional training and had their competencies assessed.
- Where people required medication as and when required, often referred to as PRN, there was a separate protocol in place for this.
- Temperatures were taken in in the medicine room and the dedicated medicine fridge to ensure they were within the correct ranges.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.

- All of areas of the home were clean and well maintained.
- There was a good stock of PPE available at the home for staff to use if required.

#### Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.

#### Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- There was an incident and accident log and analysis in place which demonstrated incidents and accidents had been scrutinised for patterns and trends.

#### Is consent to care and treatment always sought in line with legislation and guidance?

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 MCA 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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

- The provider was working in line with the Mental Capacity Act.
- There was a system for tracking, monitoring and reapplying for DoLS in place to ensure people were not being deprived of their liberty unlawfully.



# 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 our last inspection this key question was rated good. At this inspection this has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred 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; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager was transparent in their role. They were well supported by the deputy.
- The registered manager had informed CQC of notifiable events and understood their role with regards to this.
- The registered manager attended events and meetings to ensure they were up to date with any regulatory changes which could impact their service.

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

- People who used the service were continuously involved and had a say in the vision of the organisation.
- Everyone knew who the registered manager was, spoke positively about them, and understood the support structure within the home.
- Survey results from last year were shared with people in different formats and any opportunity for improvement was discussed.
- Staff told us they felt happy and empowered to come forward with ideas because the registered manager had been there a long time and was passionate about the care people were getting.

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

- We continuously saw how the registered manager led by example. They told us they were 'proud' of the home.
- Outcomes were well planned for people, and there was a strong emphasis on working collaboratively with others to ensure people got the best possible support.
- Staff shared examples with us of how the registered manager had supported them in their roles and in their personal life.

Continuous learning and improving care; Working in partnership with others

- The registered manager had a positive attitude regarding feedback and improvement and how they welcomed opportunity to improve.
- The home was subject to in depth checks and evaluation using a quality assurance framework.

- Professionals were consulted when needed and their expertise was well received by the registered manager.