

# Strathmore Care Services Limited

## Blurton Road

### Inspection report

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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?

Good 

### Overall summary

We inspected this service on 10 August 2015. This was an unannounced inspection. Our last inspection took place in June 2013 and at that time we found the home was meeting the regulations that we checked them against.

Blurton Road is registered to provide accommodation and personal care for up to three people. People who use the service have a learning disability. At the time of our inspection three people were using the service.

The service had 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 and associated Regulations about how the service is run.

People's safety was maintained because risks were assessed and planned for and the staff understood how to keep people safe. An educative approach was used to help people learn how to stay safe and healthy.

# Summary of findings

People's medicines were managed safely, which meant people received the medicines they needed when they needed them. People were enabled to administer their own medicines when this was appropriate.

There were sufficient numbers of suitable staff to meet people's needs and promote people's safety. Staff received regular training that provided them with the knowledge and skills to meet people's needs.

People's health and wellbeing needs were met and people were supported to attend health appointments as required. People could access suitable amounts of food and drink that met their individual preferences.

People's consent was sought before staff provided care and support. Staff understood how to ensure people's rights were protected under the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards (DoLS) were being followed.

People were treated with kindness, compassion and respect and staff promoted people's independence and right to privacy.

People were involved in the assessment and review of their care and staff supported and encouraged people to access the community and participate in activities that were important to them.

People's feedback was sought and used to improve the care. People knew how to make a complaint and complaints were managed in accordance with the provider's complaints policy.

There was a positive atmosphere at the home and people and staff enjoyed living and working with each other.

The registered manager and provider regularly assessed and monitored the quality of care to ensure standards were met and maintained. The registered manager understood the requirements of their registration with us.

# Summary of findings

## 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 was safe. Risks to people were assessed and reviewed and staff understood how to keep people safe. The staff educated people to help them learn how to stay safe.

Sufficient numbers of staff were available to keep people safe and people were protected from abuse and avoidable harm. Medicines were managed safely.

Good



### Is the service effective?

The service was effective. Staff had the knowledge and skills required to meet people's needs and promote people's health and wellbeing. People were supported to maintain a healthy diet.

People consented to their care and support and staff knew how to support people to make decisions in their best interests if this was required.

Good



### Is the service caring?

The service was caring. People were treated with kindness, compassion and respect and their right to privacy was supported and promoted.

People were encouraged to be independent and staff respected the choices people made about their care.

Good



### Is the service responsive?

The service was responsive. People were involved in the assessment and review of their care to ensure their care met their preferences and needs.

Staff responded to people's comments and complaints about their care to improve people's care experiences.

Good



### Is the service well-led?

The service was well-led. Effective systems were in place to regularly assess and monitor and improve the quality of care and people who used the service were involved in changes to the home.

Good



# Blurton Road

## 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 was 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 10 August 2015 and was unannounced. Our inspection team consisted of two inspectors.

Before the inspection we checked the information we held about the service and provider. This included the

notifications that the provider had sent to us about incidents at the service and information we had received from the public. We used this information to formulate our inspection plan.

We spoke with three people who used the service, three members of care staff and the registered manager. We did this to gain people's views about the care and to check that standards of care were being met.

We spent time observing care in communal areas and we observed how the staff interacted with people who used the service.

We looked at one person's care record to see if their records were accurate and up to date. We also looked at records relating to the management of the service. These included quality checks, staff rotas and training records.

# Is the service safe?

## Our findings

Without exception people told us that they felt safe. One person said, “I do feel safe here. I don’t really know why, I just do”. People told us and we saw that the staff taught people how to stay safe during regular house meetings. For example, we saw that people were informed about how to stay safe during hot weather.

People told us and care records confirmed that they were regularly involved in the assessment and review of their risks. Staff showed that they understood people’s risks and people told us they were supported in accordance with their risk management plans.

People were helped to understand what potential abuse was and how to report it. People told us and we saw that the topic of abuse was discussed on a regular basis. One person said, “[The registered manager] talks to us about abuse and bullying in our meetings. I would tell staff if anyone bullied me”. Staff explained how they would recognise and report abuse. Procedures were in place that ensured concerns about people’s safety were appropriately reported to the registered manager and the local safeguarding team. We saw that these procedures were followed when required.

People told us that staff were always available to provide them with care and support. One person said, “The staff are always there for us. They are even here at night too”.

The registered manager told us that they regularly reviewed staffing levels and staff told us these were adjusted to meet people’s individual needs. For example, if people needed to be supported to attend an appointment extra staff were made available to do this. People confirmed and we saw that staffing levels were flexible to meet their changing needs.

Staff told us and we saw that recruitment checks were in place to ensure staff were suitable to work at the service. These checks included requesting and checking references of the staffs’ characters and their suitability to work with the people who used the service.

People told us and we saw that systems were in place to ensure medicines were managed safely. One person said, “If I get a headache, the staff can give me some Paracetamol”. Records showed that effective systems were in place to ensure medicines were ordered, stored, administered and recorded to protect people from the risks associated with them. Effective systems were also in place to enable people to self-administer their medicines if they wished to do so.

# Is the service effective?

## Our findings

People told us that the staff were suitably skilled to meet their needs. One person said, “The staff know how to help me, they always do it right”. Staff told us and records showed that regular training was provided. One staff member said, “We do lots of training every year. We cover health and safety, fire, safeguarding and lots more”. We saw that all staff had completed training in learning disabilities and autism to enable them to support the people who used the service.

People confirmed that staff sought their consent before they provided care and support. Staff told us that people had the ability to make everyday decisions about their care and treatment. Systems were in place to protect people’s rights if their ability to make important decisions about their health and wellbeing changed. Staff understood the legal requirements they had to work within to do this. The Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards (DoLS) set out requirements that ensure where appropriate, decisions are made in people’s best interests when they are unable to do this for themselves. The staff

demonstrated they understood the principles of the Act and they gave examples of how they would work with people to make decisions in their best interests if required. At the time of our inspection no one was being restricted under the DoLS, but staff gave examples of how they would protect people by using the DoLS if this was required.

People told us they could eat foods that met their individual preferences and choices. One person said, “We plan our menu together, then make a list of shopping and the staff check it for us”. People also confirmed that they could access suitable amounts of food and drink. One person said, “If I was hungry, I could go to the kitchen and get something to eat”.

People told us they were supported to stay healthy and health issues were regularly discussed during house meetings. Records of these meetings showed that topics such as sugar and drugs were discussed during these meetings to educate people about the importance of staying healthy. People also told us that the staff enabled them to attend health appointments to maintain their wellbeing. One person said, “If I need to see the doctor, the staff make me an appointment. My doctor is good”.

# Is the service caring?

## Our findings

People told us they were happy living at Blurton Road because the staff were kind and caring. One person said, "The staff are very friendly and helpful". Another person said, "All the staff are kind to me". We observed friendly and caring interactions between staff and people who used the service. For example, we saw a staff member greet one person who used the service with a smile and hug which the person responded positively to.

People told us they could make choices and decisions about their care. For example, people could choose how their bedrooms were decorated. One person said, "I chose flowers on my wallpaper". Another person told us they had chosen where this year's holiday destination as a group. They said, "We all chose to go on holiday together and we chose where we were going together".

People told us their right to privacy was promoted and respected. One person told us how they could spend time in their room undisturbed. They said, "I like spending time alone in my room listening to music". Another person told us how the staff respected them and their choices. They said, "The staff respect us and we respect them back".

We saw that people's right to independence was promoted and staff supported people to maintain their independent living skills. This made people feel good about themselves. One person said, "We are all independent. We do our own shopping, cooking and cleaning. It feels good to be independent".

People told us they were supported to keep in contact and maintain relationships with their family and friends. One person said, "I can visit my friends across the road anytime". Another person said, "I see my family every weekend".

# Is the service responsive?

## Our findings

People told us they were involved in the assessment and review of their care. One person said, “I have a care plan that I’ve written in”. Another person said, “The care plans are in the office. They have personal things in them that are personal to us. I know what’s in mine because me and my keyworker go through it in our meetings”.

Care records contained a record of people’s assessments, needs, care preferences and reviews. Staff understood people’s needs and people confirmed that they received their care in accordance with their plans and preferences. For example, one person told us that staff supported them to make sure that domestic tasks had been completed as planned. They showed us their agreed cleaning rota and said, “We keep the house clean ourselves by sharing the cleaning. The staff come and check it’s been done”. This matched the information that was contained in their agreed care plan.

We saw that people’s care records were updated to reflect any changes in their needs. For example, staff had noticed that people had not been working effectively as a team to manage the stock of food at the home. Changes were

made to people’s care plans with their consultation and agreement to ensure they received extra support to improve how they purchased and used their food stock. The staff we spoke with showed they were aware of this change and they told us the changes had resulted in the group working more efficiently.

People told us and we saw that they were supported to pursue their interests and participate in activities that were important to them. One person said, “I enjoy running, basketball, aerobics and bingo. I can go to these places on the public bus, but we also have a minibus here so staff can take me too if I wanted them to”.

People told us that it was important for them to participate in voluntary work. Everyone who used the service had been supported to gain voluntary employment which they enjoyed. One person said, “I love my job”, “The staff took me to my interview, which helped make it easier for me”.

People told us they knew how to complain about the care. One person said, “I would tell [the registered manager]. I can tell her anything”. There was an accessible easy to read complaints procedure in place and staff demonstrated that they understood the provider’s complaints procedure. No complaints had been recently received.



# Is the service well-led?

## Our findings

People and staff told us, and we saw that there was a positive and homely atmosphere at the service. One person said, “We all get along”. Another person said, “I like everything about living here. I like the staff and my friends”. Staff told us they enjoyed working at the home because of the people they cared for and the staff. One staff member said, “The residents are great”. Another staff member said, “We’ve got a stable, mature team and [the registered manager] is great”.

People told us they were involved in making decisions about changes to the home. One person said, “We chose the wallpaper for the living room”. Another person told us how they had been involved in devising a chores rota for people who used the service to follow.

People told us that their feedback was sought about their care. One person said, “We are always asked if we are okay and happy living here”. People confirmed and we saw that a satisfaction survey was completed with people and their relatives every year to gain feedback about the quality of care. The results of this survey were discussed with people. People were also asked for their feedback during house meetings. We saw that people’s feedback was acted upon. For example, we saw that areas of the home had been modernised and decorated at people’s requests.

Frequent quality checks were completed by the registered manager and provider. These included checks of medicines

management, infection control, health and safety and incident management. Where concerns were identified, action was taken to improve quality. For example, an infection control audit had identified alcohol gel was required to enable staff to sanitise their hands and we saw that this had been provided.

The registered manager delegated tasks to the care staff to improve people’s care and increase efficiency. For example staff were given key worker roles which meant everybody who used the service had an allocated staff member who was responsible for coordinating their care. One staff member also told us how they were responsible for checking people’s money to ensure people’s financial accounts were accurate. The records this staff member maintained were then checked by the registered manager to ensure they were accurate and up to date.

The registered manager assessed and monitored the staffs learning and development needs through regular meetings with the staff. Spot checks were also completed to ensure staff were providing care and support effectively and safely. We saw that these checks had identified no concerns about the staffs’ abilities. However, the registered manager told us that they would discuss any concerns with the staff if this was required.

The registered manager understood the responsibilities of their registration with us. They reported significant events to us, such as safety incidents, in accordance with the requirements of their registration.