

Mrs Jane Gilmour

Oakley Care Home

Inspection report

21 Norton Road
Heysham
Morecambe
Lancashire
LA3 1HA

Tel: 01524831554

Date of inspection visit:
05 January 2018

Date of publication:
29 January 2018

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 ●

Summary of findings

Overall summary

Oakley Care Home in Heysham supports up to three people with mental health needs. It is a mid terraced house with comfortable communal areas and single bedroom accommodation. The home is located close to transport, local facilities and the beach. At the time of our inspection visit there were two people who lived at the home.

There was a registered manager in place who was also the owner. 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 last inspection in October 2015 the service was rated Good. At this inspection we found the service remained Good.

Oakley Care Home operated as a family home and the two people who lived there at the time of the inspection visit had done so for a number of years as part of the family unit. One person who lived at the home said, "[Owner] is like a mum to us, especially to me. I feel so much better since coming here."

Suitable arrangements were in place to protect people from abuse and unsafe care. People at Oakley Care Home and a relative we spoke with told us they felt safe and people were cared for.

The registered provider/owner with part time support from a family member, provided care and guidance for the people who lived at Oakley. No staff had been recruited since the last inspection

We looked around the premises and found it had been maintained, was clean and hygienic and a safe place for people to live. We found equipment had been serviced and maintained as required.

Medicines were managed in line with people's needs. People had signed to say they would self-medicate with support when required from the provider/owner.

We observed during the inspection visit friendly interactions between the owner and people who lived at the home. We saw the owner was able to communicate well with people they supported and cared for.

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 who lived at Oakley Care Home said meals were of a good standard. They said alternatives were available if they did not like what was being made by the owner. One person commented, "[Owner] is a very good cook."

We found people had access to healthcare professionals and records were kept of outcomes of visits and what action was taken to meet their healthcare needs.

The service had information with regards to support from an external advocate should this be required by them.

The service had a complaints procedure which was made available to people on their admission to the home and their relatives. The people we spoke with told us they were happy with the service and had no complaints.

The owner was familiar with what support and care people who lived at the home required. People were supported to lead full and varied lives and were supported to form relationships within the local community. One person who lived at the home said, "I enjoy going out to visit [friend]. [Owner] does worry but I am alright and tell her as to where I am going."

There was no formal internal quality assurance in place but informal checks were made routinely. Everyone talked together daily to discuss any plans or changes and events they wished to attend. Decisions were made as a family unit. One of the people who lived at the home said, "We choose what we want to do. I like the gym and keeping fit so [owner] encourages me."

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 remains good.

Is the service effective?

Good ●

The service remains good.

Is the service caring?

Good ●

The service remains good.

Is the service responsive?

Good ●

The service remains good.

Is the service well-led?

Good ●

The service remains good.

Oakley Care Home

Detailed findings

Background to this inspection

We carried out this comprehensive 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.

Oakley Care Home is a 'care home.' People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

Oakley Care Home in Heysham supports up to three people with mental health needs. It is a mid terraced house with comfortable communal areas and single bedroom accommodation.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities using the service can live as ordinary a life as any citizen.

Prior to our inspection visit we contacted the commissioning department at Lancashire County Council and this helped us to gain a balanced overview of what people experienced accessing the service.

As part of the inspection we used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

This inspection visit took place on 05 January 2018 and was announced. We gave the service 24 hours' notice of the inspection visit because the service was a small care home for adults who were often out during the day, we needed to be sure someone would be in.

The inspection team consisted of an adult social care inspector.

During the visit we spoke with a range of people about the service. They included two people who lived at

the home, one relative and the registered manager/provider. In addition we spoke with a social worker who regularly visited the home and was actively involved with people who lived there. We also observed care practices and how the registered provider interacted with people in their care. This helped us understand the experience of people who lived at Oakley.

We looked at care records of two people and arrangements for meal provision. We also looked at records relating to the management of the home and medication records. No staff had been employed for a number of years and one part time family member provided support for the registered provider/owner. We also checked the building to ensure it was clean, hygienic and a safe place for people to live.

Is the service safe?

Our findings

We spoke with two people who lived at the home. They told us they felt safe and enjoyed living at Oakley Care Home. One person said, "I love it here and feel very safe now." Another said, "Yes I do feel safe [owner] makes it a lovely family home and that is what I feel part of." A relative we spoke with said, "We feel happier [relative] is there being looked after and safe and sound."

There had been no safeguarding alerts made to the local authority or referred to the Care Quality Commission (CQC) about poor care or abusive practices when we undertook this inspection. Discussion with the owner confirmed she was aware of the local authorities safeguarding procedures and these would be followed if required.

The provider supported people to take day to day risks while keeping them safe. We saw care plans contained risk assessments which were specific to the needs of each person who lived at Oakley Care Home. For example risk assessments had been devised with social workers regarding their safety in the community. Also what steps were required should people who lived at the home need help, such as telephone numbers and address where they lived when they are out. One person was going out for the day independently. The person who lived at the home had contact details of their address and the owner of Oakley should they be required. The owner would discuss the day and any challenges that may be presented. This demonstrated the provider monitored and managed people's safety.

There were no full time staff employed in the service. However the provider was available at all times to support people. During times when the provider required support their relative who was a family member and nurse worked part time and had done for a number of years.

No staff had been recruited for a number of years. However the owner was aware of the procedures and checks required should they require staff. The part time staff member had been recruited safely and had required checks in place to support vulnerable people.

We looked around the building and found it was clean, tidy and well-maintained. We found equipment in use had been serviced and maintained as required. Records were available confirming gas appliances and electrical facilities complied with statutory requirements and were safe for use.

The service had procedures in place to record accidents and incidents. When we undertook this inspection visit there had been no accidents or incidents recorded. The owner told us any accidents would be looked into and appropriate action taken so lessons would be learnt.

We looked at medication provided for the people who lived at Oakley Care Home. People who lived at the home self-medicated. Records we looked at showed they had signed to agree to administer their own medication. The local pharmacist delivered any medicines required for the people who lived at the home. The registered provider told us she only prompted people with their medication if required. One person we spoke with who lived at the home said, "I do my own medicines every day and [owner] checks with me when

I am taking it."

A locked facility was provided for the safe keeping of medicines. Records we looked at for one person were accurate with correct dosage remaining for the week and month ahead. We found medicines had been ordered appropriately and checked by the owner. The owner told us both herself and part time staff member had received medication training however they were in the process of resourcing further training to update their knowledge.

Is the service effective?

Our findings

It was clear people who lived at the home received effective care because they were supported by the owner and part time staff (family member) who had a good understanding of their needs. This was because people who lived at Oakley Care Home had done so for a long period of time. We found through our observations and discussions they received effective and appropriate support that was meeting their needs. A relative said, "They know [relative] so well and when they are feeling well and when not. [Owner] is very good at monitoring [relative] and doing what is best for them."

We spoke with the owner about training. We were shown evidence of training courses she had attended and for the part time staff member. They included food and hygiene and medication. The owner told us they were in the process of updating some training such as safeguarding and medication. The owner said, "We are trying to look for resources for further training to be completed."

People who lived at Oakley Care Home had an assessment of their needs and produced a plan of care to ensure those needs were met. A relative we spoke with said, "They involve me in any changes or events that go on in [relative's] life."

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). We did not see any restrictive practices during our inspection visit. The owner made sure that people had choice and control of their lives and support them in the least restrictive way possible; the policies and systems in the service support this practice.

Both people we spoke with confirmed they had consented to support they received. One person who lived at the home said, "I agreed to the help I need and signed a form."

People who lived at Oakley Care Home had unrestricted access to the kitchen where drinks were prepared for them or they made themselves a drink or snack. The registered provider/owner and people who lived at the home discussed meal options daily and choose between themselves what they would like to eat. This was confirmed when we spoke with people who lived at the home.

Mealtime was a family affair between the owner and people who lived at Oakley. One person who lived the home told us they chose what they would sometimes go shopping together. One person said, "[Owner] is a very good cook." People also told us they went out for meals in the local community.

Although this was a family home they had been inspected by the 'Food Standards Agency' who gave them a five-star rating. This graded the service as 'very good' in relation to meeting food safety standards about cleanliness, food preparation and associated recordkeeping.

People's healthcare needs were monitored and discussed with the person or family members as part of the

care process. Records seen confirmed visits to and from General Practitioners (GP's) and other health and social care professionals had been recorded. The records were informative and had documented the reason for the visit and what the outcome had been. This demonstrated the service was working together with healthcare services so people who lived at the home received ongoing healthcare support.

Accommodation was on three floors and was a large family home There were two lounges and a kitchen dining area. The furnishings were of a domestic character. This was confirmed by discussions with people at the home and relatives. Both people who lived at the home we spoke with told us they liked the surroundings and one said, "It is a nice big house and I love my room. "One relative said, "It is a beautiful home and kept to a very high standard. It is a family home and could not be better for [relative]." There was stair access to other floors and people who lived at the home were able to access all areas of the home.

Is the service caring?

Our findings

During the day we observed interactions between the provider and people who lived at the home. We saw the provider was caring, attentive and respectful. For example one person was getting ready for spending the day at a local gym. The registered manager/owner/ talked with the person ensuring they were ready for the day ahead and had everything they needed that included a packed lunch. We spoke with the person who lived at the home who said, "[Owner] is great she makes sure things are ok and I have my bus pass and details of the home. A relative we spoke with said, "[Owner] is special and really cares for our [relative]. A social worker told us they were happy with the placement for people they supported and told us the owner was caring and kind knew how to look after people who had mental health issues.

During the inspection visit we saw one person who was at home had freedom of movement around the home and was able to make decisions for themselves. For example they were getting ready to go out. The owner was preparing a packed lunch and discussed timings and what time they would be expected back. We spoke with the person who said, "I always say where I am going and what time to expect me back."

We looked at care records of two people who lived at Oakley Care Home. They had been involved with developing their care records and were encouraged to express their views about how their care and support was provided. A relative told us they were constantly consulted about what care and support was required for their relative. They had input in their relatives care needs to ensure the service had as much information as possible.

We spent some time observing interactions between the provider and people who lived at the home. The provider respected people's privacy and treated them with dignity. The people who lived at the home told us how kind, respectful and considerate the owner was. We witnessed the owner always knocked on the doors before entering people's private room. The owner told us it was their home and she respected that and always treated people as individuals. This was confirmed by discussions with people who lived at the home and relatives.

The provider had information available of local advocacy. The owner also told us the social workers who visit had advised people about advocacy services and what support could be available if they chose to use them.

Is the service responsive?

Our findings

We spoke with two people who lived at the home. They told us they felt both the owner and family member who supported them were responsive to their needs. For example one person told us how they liked to go out a lot to shops and visit friends. They told us how the owner encouraged and supported them to maintain independence and develop relationships in the community. One person said, "I enjoy going out to visit [friend]. [Owner] does worry but I am alright and tell her as to where I am going."

The service focussed on the importance of supporting people to develop and maintain their independence. We confirmed this by our observations and talking with people who lived at the home and relatives. One person told us they were encouraged to pursue personal interests and had no restrictions placed upon them with their daily routines.

We found people at Oakley Care Home were encouraged to live independent lives as much as possible. Social events and activities were centred on each person. For example one person went on holiday independently near to the home previously, such as the lake district or Blackpool. The owner told us they encouraged people to be independent and encouraged one person to have holidays close by and said, "As long as I am in contact and easy reach in case any issues crop up it is essential for people to be independent as possible."

Care plans we looked at contained assessment information about how the person communicated their needs and wishes. These included whether the person required any form of assistance. However people who lived at the home were able to verbally understand and communicate their needs and wishes. This was so people were able to understand each other and express their views, wishes and needs.

There had been no complaints received. However a system was in place should the registered owner need to investigate any concerns or issues people may have. They would be acted upon straight away before they became a complaint. People who lived at the home told us they had absolutely nothing to complain about.

We spoke with a relative about complaints. They told us they knew the process to follow should they wish to complain. One relative said, "Never had to but I would talk with [owner] we speak together all the time."

People's end of life wishes had been recorded so the owner was aware of these. People would be supported to remain in the home where possible as they headed towards end of life care. This allowed people to remain comfortable in their familiar, homely surroundings, supported by people who knew them.

Is the service well-led?

Our findings

The registered provider who was also the registered manager had cared for the people who lived in her home for approximately 11 years. They were supported as part of the family unit. One of the people who lived at Oakley Care Home said, "I would not want to be anywhere else this is my family home." A social work professional we spoke with told us they had a lot of contact with the home and it was run well and people received good care and support. The registered provider/owner told us their aim was to give people an independent lifestyle as possible with support when required.

It was clear by talking with people who lived at the home and interactions between the owner and people they felt comfortable and relaxed. One person who lived at Oakley Care Home said, "[Owner] really looks after me. I just say, 'right mum yes I have got everything' when I am going out and she fusses over me." A relative said, "[Owner] is wonderful, we could not manage [relative] at home. [Owner] has been so good and now [relative] is so independent and goes out a lot."

We found the service had lines of responsibility and accountability which was between the registered owner and one part time staff member. The owner told us they were clear about how the people were to be cared for. The owner was experienced and treated people who lived at Oakley as family members. This was confirmed by talking with people who lived at the home and our observations on the day of the inspection visit.

The registered provider/owner worked in partnership with other organisations to make sure they were following current practice, providing a quality service and the people in their care were safe. These included social services, healthcare professionals including General Practitioners and district nurses. A social worker told us they were in constant contact with the owner to ensure the welfare of people was maintained. They told us they were satisfied the care people received was of a high quality.

Monitoring of the quality of the service provided was done on an informal basis. For instance informal discussions with people who lived at Oakley Care home and relatives. One person who lived at the home said, "We talk about things daily and over mealtimes." In addition the registered owner kept written diary records of some discussion meetings with the three people at the home. We saw how one person was supported to go to the gym and used a bus pass. The person who lived at the home said, "I like going out jogging and to the gym. [Owner] sometimes comes swimming." This showed the owner listened to and acted upon suggestions and wishes of people who lived at the home.

Oakley Care Home was a small family run home, therefore the views of the people who lived there were discussed daily and with relatives. A relative we spoke with said, "[Owner] calls us all the time and sometimes pops round to keep us informed of all that is going on."

Oakley Care Home had on display in the reception area of their premises and their website their last CQC rating, where people could see it. This has been a legal requirement since 01 April 2015.

