

Olcote

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## 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 ●

# Summary of findings

## Overall summary

This inspection took place on 12 March 2018 and was unannounced. At the last inspection completed on 10 July 2015 we found the service was rated Good. At this inspection we found the service remained Good.

Olcote is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Olcote accommodates one person in a residential setting. At the time of our inspection there were one person living at the home.

There was a registered manager in post at the time of the inspection. 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 a legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The registered manager continued to keep the person safe, the person's risks were understood and plans were in place to keep them safe. The registered manager provided all the support the person needed and ensured they had their medicines as required. Risks from infection were minimised and the registered manager had a system in place for if things went wrong.

The person's needs were assessed and care plans were put in place. The registered manager had undertaken training and demonstrated they used this to provide effective support. The person was supported to maintain a healthy diet and had a choice of meals. The environment was suitable for the person's needs and they were supported to access health professionals when required. The person was supported to have maximum choice and control of their lives and the registered manager supported them in the least restrictive way possible and the policies and systems in the service supported this practice.

The person was supported in a caring way as the registered manager treated them as part of the family. The person was able to make choices and was supported to maintain their independence. The person was treated with dignity and respect and their privacy was protected.

The person's preferences were understood and the registered manager provided care in the way the person wanted. There were opportunities for the person to follow their interest and they understood how to make a complaint. The registered manager was able to describe how they would support the person at the end of their life.

The registered manager was approachable and had a good relationship with the person using the service. The registered manager had systems in place which involved the person in checking the quality of the

service they received and checks on the environment were also completed to ensure safety was maintained.

## 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 in safety.

### Is the service effective?

Good ●

The service remains good in effective.

### Is the service caring?

Good ●

The service remains good in caring.

### Is the service responsive?

Good ●

The service remains good in responsive.

### Is the service well-led?

Good ●

The service remains good in well-led.

# Olcote

## 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 took place on 12 March 2018, and was unannounced. The inspection team consisted of one inspector.

As part of the inspection, we reviewed the information we held about the service, including notifications. A notification is information about events that by law the registered persons should tell us about.

During the inspection, we spoke with one person who used the service and the registered manager.

We observed the delivery of care and support provided to people living at the location and their interactions with the registered manager. We reviewed the care records of the person living at the home and looked at other records relating to the management of the service including registered managers training records, complaints policy, accident reports, audits, and medicine administration records.

# Is the service safe?

## Our findings

At this inspection we found the same level of protection from abuse, harm and risks as at the previous inspection and the rating continues to be good.

The person that used the service told us they felt safe. They said they were happy and content living at the service and there was always someone there for them. The person told us if they were concerned about anything they would speak to the registered manager about it or with staff at another service they attended. The registered manager understood their responsibilities for safeguarding people and had attended safeguarding training. This meant the person was protected from the risk of avoidable harm.

The person told us they were supported by the registered manager to maintain their safety. The registered manager told us they had assessed risks to the person's safety and could describe the plans in place to keep the person safe. We saw these were documented in the person's care plan. For example, the person used an electric bicycle to go out in the community. An assessment and plan was in place to ensure this was used safely and the plans had been reviewed on a regular basis. In another example, the person sometimes became anxious and displayed behaviours. The risks had been assessed and plans were in place which showed what actions should be taken to reassure the person. This showed risk assessments were carried out and plans were in place to keep the person safe.

The person told us the registered manager was always there to provide the support they needed. The registered manager told us they were the sole employee of the service. They explained there were no requirements for additional staff as the person was very independent. They described their contingency arrangements for support if a situation arose that meant they were unavailable; however they had not had any situations which meant these had been used. The registered manager was confident these arrangements would work and the person confirmed they were happy with the plans in place.

The person told us they received their medicines as prescribed and had never had any issues. We observed the registered manager administer the person's medicines as prescribed. We saw records were completed of medicine administration. Medicines were stored safely and stocks were checked regularly with prescriptions requested when required. The pharmacy signed the records of medicines and the doctor reviewed medicines regularly. The registered manager told us they had received training in the safe handling of medicines and this was regularly updated. We saw records which supported this. This meant the person was supported to receive their medicines safely.

The person told us the home was kept clean and comfortable. They said their room and the house were cleaned on a regular basis. We could see the home was well presented and clean. The registered manager had undertaken training in infection control and was able to describe the importance of minimising the risk of infections spreading. We could be confident the practices in place kept the person safe from the risk of infection.

The registered manager had systems in place to learn when things went wrong. We saw they had regular

discussions with the person about their care and where incidents occurred they reviewed the care plans as required. We found the registered manager also spoke with relatives of the person regularly and other people involved in their care to discuss any concerns. There had not been any incidents since our last inspection, however we could see the systems in place would ensure learning from any incidents should they occur.

# Is the service effective?

## Our findings

At our last inspection the service was rated as good. At this inspection we found the service continued to be effective and is rated as good.

The person had their needs assessed and a plan was in place to meet their needs. The person told us they received the support they needed from the registered manager and were happy that their individual needs were being met. The registered manager told us they undertaken annual reviews of the person's needs and updated their care plan. We saw records which supported this. We found specific plans were in place for some aspects of the person's care. For example, the person was living with a health condition and there were clear plans in place to support them to manage their condition effectively. This showed the person's individual needs were assessed and plans were in place to meet them.

The registered manager told us they had received training through a local training provider. We saw the registered manager had been trained in areas such as food hygiene, medicines administration, fire safety and first aid. We saw they used the skills they had received to develop policies and procedures and deliver effective care.

The person told us they enjoyed their meals and had plenty of choice. The person said the registered manager provided them with their favourite meals. The registered manager told us they understood the person's needs and preferences for food and drinks. They could describe these and they were documented in the person's care plan. We saw records were kept in the daily log of what meals had been prepared. The person was living with a health condition and the plans in place supported the person to maintain an appropriate diet. The person was observed having a packed lunch made for the day as they were going out to another local service. The registered manager told us this was always done when the person was out at lunchtime. The person confirmed this and said there were never any problems with their meals. This showed the person received support to maintain a healthy diet.

The person received consistent care and support. The registered manager told us they ensured they liaised with other professionals involved in the person's care. We saw records which showed the person had regular input from other health professionals and where changes were required their care plan was updated.

The person told us they had support from the registered manager to maintain their health and wellbeing. We saw there was guidance in place which detailed what to look for if the person became unwell as a result of their diabetes. There were regular records of monitoring of the person's blood sugars. The registered manager was able to describe how the person was supported to maintain their health with input from other professionals being sought when required. We saw there were records which supported what we were told. This meant the person was supported to maintain their health and wellbeing.

The person told us they were very independent and able to do most things for themselves. The person had access to a level access shower and there were adaptations in place for the toilet. The registered manager told us they kept the person's needs under review and at the present time no further adaptations were



required. If there were any changes they described how they would seek the support of relevant professionals to assess this. This meant the person was supported to live independently in a suitable environment.

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.

The person told us the registered manager always sought consent. We saw the registered manager asked for consent before offering support. For example, asking the person if they were ready for their breakfast and if they were ok to take their medicines. We saw consent forms were in place and signed by the person for example for the registered manager to manage the person's medicines. The registered manager was able to describe the application of the MCA and confirmed that the person had capacity to make decisions. They understood the requirements to assess capacity and take decisions in the person's best interests if required.

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). The person confirmed they were free to come and go as they pleased from the home and were not subject to any restrictions. This meant the registered manager understood the MCA and the person was supported in line with the principles of the act.

## Is the service caring?

### Our findings

At our last inspection we found the service was caring. At this inspection the service remained caring.

The person told us they felt cared for and were happy at the home. They explained they had moved around quite a lot in their younger life but were now happy and content. The person expressed this was their home and they felt safe and content. The registered manager told us the person had lived with them for some time and they were treated as a part of the family. They had a detailed knowledge of the person's background and understood their needs well. We observed the person was comfortable in the home; they moved around freely into all areas and went out for a walk to the shop during the inspection. They appeared happy and content and engaged in conversations with the registered manager. We saw the person had pictures from various occasions over the years in their room and they told us they were supported to maintain contact with their relatives, which was important to them. The person's routines were also important to them; they liked to do things in a certain way. This was well understood by the registered manager and documented in the person's care plan. This demonstrated the person was supported in a caring way.

The person told us they were able to make decisions for themselves and could choose how their care and support was delivered. The registered manager told us they involved the person in developing their care plan and they had their own copy. We saw the person was encouraged and supported to maintain their independence. For example, the person went out most days to a local shop, attended another service and walked the family dog in a local park. The person told us they were able to decide what they did and when they did it. The registered manager was able to describe changes with the person's ability to communicate when they became anxious, and how they observed for body language. We saw the philosophy of the home was to provide information in a way that was appropriate for the person. We saw records which supported what we were told. This showed the registered manager understood how to communicate with the person and enabled the person to direct their own care and retain their independence.

The person told us they felt as though they were treated with respect. They told us they had their own room and the registered manager always knocked the door before they came in. They were able to come and go as they wanted and were able to stay in touch with their friends and family which was important to them. We saw the registered manager was respectful when they spoke to the person. The registered manager showed us the philosophy of the home and this documented the person should be treated with respect and dignity and feel safe secure and loved. Our observations and conversations with the person living at the home showed this was observed by the registered manager. This shows the person was treated with dignity and respect.

## Is the service responsive?

### Our findings

At our last inspection we found the service was responsive. At this inspection we found the service continued to be responsive.

The person told us the registered manager knew them well and understood how they liked things done. They said they felt very lucky to be living here as they get on well with the registered manager and have a very good life. The registered manager was able to describe the person's preferences. For example, they told us about when they person liked to get up, what they preferred for their meals and how they spent their day. The person confirmed for us this was correct. We saw the persons care plan and daily records supported what we were told. The person told us about the things they liked to do during the week. They described going out to a local centre, walking the dog and going to attend football matches with the a friend, which they enjoyed very much. The registered manager told us the about the person's past employment and how they had encouraged them to use their writing skills to document their own version of daily news events. The person told us they were able to write short hand and sometimes practiced this. The person told us they enjoyed playing their music and showed us some of their belongings in their room. The registered manager told us the person had been involved in redecorating the room and the person confirmed this. We found the person's care plan showed detail about their preferences and their daily records included information about how they had spent each day. We saw that consideration was given to cultural and spiritual needs and preferences of the person and to support the person to express their sexual preferences, ensuring privacy and advice was available for safe sexual relationships. This showed the person received personalised care and support.

The person told us they understood how to make a complaint. We saw there was a complaints procedure in the person's bedroom which they understood. They told us they had never needed to complain about anything, but felt confident that the registered manager would address any concerns they had. The registered manager had a policy in place which detailed how complaints would be investigated and responded to. This showed the registered manager had a system in place to investigate and respond to complaints.

The person had not had any discussions with the registered manager about their preferences for when they came to the end of their life. However the registered manager said they were aware the person had discussed this recently with their relatives. They said they would discuss preferences at the appropriate time and would involve the appropriate people; the registered manager said their philosophy was this was a home for life. This showed consideration had been given to supporting the person at the end of their life.

## Is the service well-led?

### Our findings

At the last inspection we found the service well led. At this inspection we found the service continued to be well led.

The registered manager understood their responsibilities. They could describe the information they would need to share with us if incidents occurred. We saw the rating from the last inspection was on display at the home.

The person told us the registered manager was approachable and they felt able to talk about anything with them. We could see from the interactions between the person and the registered manager that they had a good relationship and the person was comfortable to talk with them. The person told us the registered manager spoke to them often about the service they received and they completed a questionnaire about the service. We saw the registered manager used a quality questionnaire to discuss the person's experiences of the care they received. The registered manager told us it was important to obtain the feedback on the service and they used this to make any changes that were needed for the person.

We found regular checks were in place on the property and maintenance records showed repairs and checks were carried out when required. For example, electrical appliances were checked annually and gas checks were carried out. The registered manager made sure they were kept up to date with their training and skills; they used a local training provider and had regular contact with a provider group to share learning with other local providers. There were plans in place for emergencies which the person had been involved in. They had regular discussions about what would happen in the event of a fire for example. We saw plans were in place for experienced care staff to provide cover for the registered manager if required and the staff knew the person well and were familiar with their care. The registered manager had systems in place to ensure the quality and safety of the service was maintained.

There had not been any incidents or accidents, however the registered manager told us they would review anything that happened and involve others in the discussions to ensure any learning was implemented. We found the registered manager engaged with other professionals in the care of the person. Regular reviews were in place and relevant professionals were involved in these. The registered manager told us they and their partner sculpted their lives around the person to ensure their needs were met. This showed the registered manager worked collaboratively to provide effective support to the person using the service.