

# Miss Dawn Charlesworth and Mrs Cheryl Ince

## The Elms

### 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

About the service: The Elms is a residential care home set within a local community. The home is registered to provide support for up to six people with a learning disability and associated mental health needs.

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 and autism using the service can live as ordinary a life as any citizen.

People's experience of using this service:

- ☐ Improvements had been made to the service since our last inspection. Issues relating to staffing training and quality assurance had been addressed.
- ☐ People told us they were happy living at the home and people got on well together. People told us they felt safe and well looked after.
- ☐ We saw that the property was clean, comfortable and homely. We saw that new carpets and curtains had been purchased since our last inspection. However, the home was tired in parts.
- ☐ People who used the service had the capacity to make decisions about their day to day lives and what they did with their time. The registered providers were aware of their responsibilities in relation to the Mental Capacity Act 2005.
- ☐ People told us that they enjoyed the food provided.
- ☐ People said they were treated with respect and felt well cared for. They spoke positively about the staff who supported them, who knew them and their support needs well.
- ☐ The atmosphere was relaxed and friendly and people who lived at The Elms told us they got on well together as a group.
- ☐ People had active lifestyles. They accessed a range of community facilities, used public transport and their independence was promoted wherever possible.
- ☐ We found there were adequate systems in place to monitor the quality of the service provided to people.
- ☐ The service met the characteristics for a rating of "good" in all the key questions we inspected. Therefore, our overall rating for the service after this inspection was "good".

Rating at last inspection: The rating at our last inspection was 'requires improvement' as we made two recommendations. The registered providers had fallen behind with providing staff training and some aspects of quality assurance, which they openly told us about. This was due to the closure of one of their homes and resettling people into the Elms or finding alternative care homes had been their priority. We recommended that any outstanding staff training and quality assurance shortfalls were addressed as soon as possible.

Why we inspected: This was a planned inspection based on the rating of the service at the last inspection.

Follow up: We will continue to monitor the service through information we receive and future inspections.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

## 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 was safe

Details are in our Safe findings below.

### Is the service effective?

Good ●

The service was effective

Details are in our Effective findings below.

### Is the service caring?

Good ●

The service was caring

Details are in our Caring findings below.

### Is the service responsive?

Good ●

The service was responsive

Details are in our Responsive findings below.

### Is the service well-led?

Good ●

The service was well-led

Details are in our Well-Led findings below.

# The Elms

## Detailed findings

### Background to this inspection

The inspection:

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) 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 Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: The inspection team consisted of one adult social care inspector.

Service and service type: The Elms is registered as a care home. People in care homes receive accommodation and nursing or personal care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. There were two registered managers for the home who shared the role, one of whom was the provider.

Notice of inspection: This inspection was unannounced. The Inspection site visit activity started on 28 February 2019 and ended on the same day.

What we did:

Before the inspection we reviewed information, we held about the service including notifications the service was required to send us about things happening in the home. In addition, the provider completed a Provider Information Return (PIR). Providers are required to send us key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We also contacted the local authority commissioning and safeguarding teams. They raised no concerns with us about the service.

During the inspection we spoke with four people living in the home as well as both registered providers and the registered manager. We observed interactions between staff and people living in the home and looked around the building. In addition, we looked at a range of records relating to how the service was managed;

these included, care and medication records of two people, maintenance documents for the building and audit systems.

# Is the service safe?

## Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- ☐ People said, "I am alright. I am still happy here" and "I feel safe here and staying out too."
- ☐ Managers understood their responsibilities to keep people safe and to protect them from harm. When safeguarding concerns were identified, the provider informed the relevant agencies.
- ☐ No concerns were raised with us by the local authority safeguarding team.

Staffing and recruitment

- ☐ We were told that there had been no new staff recruited since our last inspection. At that inspection we found staff had been safely recruited. Checks with the Disclosure and Barring Service (DBS) were undertaken. The DBS helps employers make safer recruitment decisions and prevent unsuitable people from working with vulnerable people.
- ☐ People were supported by a small staff team who knew them and their support needs.
- ☐ Agency staff were not used by the service. Staff from the providers sister home 'The Ferns' would provide support if needed.
- ☐ There was always a member of staff at the home. If people required support to attend appointments or activities in the community additional staff would be assist them.

Assessing risk, safety monitoring and management

- ☐ Risk assessments had been developed with people and contained measures to guide staff on how to safely manage risks to keep people safe.
- ☐ Fire records and premises checks and servicing were seen to be up-to-date.

Using medicines safely

- ☐ Staff had undertaken medication training.
- ☐ No concerns were found with medicines at our inspection.

Preventing and controlling infection

- ☐ We saw that the home was clean and tidy throughout.
- ☐ Paper towels and hand wash were available in communal areas.
- ☐ The kitchen received a food hygiene rating of 5 the highest that can be achieved. This meant the service followed safe food storage and preparation practices.

# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

People's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience spacing consistency.

- ☐ At our last inspection we recommended that the provider ensured that staff received outstanding basic training. This had been addressed.
- ☐ Support workers have completed a nationally recognised qualification in the principles of working with individuals with learning disabilities and two have undertaken a certificate in the principles of dementia care.
- ☐ All staff held nationally recognised health and social care qualifications.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Ensuring consent to care and treatment in line with law 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 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".
- ☐ 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 Safeguards (DoLS).
- ☐ We checked whether the service was working within the principles of the MCA. We talked with the registered providers about one person who was at risk of dementia. We saw that this person was still able to communicate through gesture and the use of some Makaton signs. The registered providers felt that the person was still able to indicate their personal preferences and never left the home without support. It was agreed that this situation would be closely monitored going forward. The registered providers told us they would seek further advice on this matter.
- ☐ People were asked for their consent before personal care was provided. One person said, "I get the support that I need and can come and go as I please." We saw people coming and going from the home as they wanted to.

Adapting service, design, decoration to meet people's needs

- ☐ People live in an ordinary house which is on a main road with regular access to public transport, the town centre and community based facilities.
- ☐ People told us or indicated that they were happy with their rooms. They said, "I like my room" or gave us the thumbs up sign meaning they approved.
- ☐ Another person told us they had changed their bedroom. The new bedroom had plenty of storage space and this had helped to keep their belongings tidy.



Supporting people to eat and drink enough to maintain a balanced diet

- ☐ People told us that they were happy with the food provided
- ☐ We saw that people had access to food and drink in the kitchen.
- ☐ We saw on one person's record that nurses from the local Community Learning Disability Team (CLTD) had been involved in carrying out a dysphagia assessment and guidelines for staff to follow to help prevent the person from choking.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care.

- ☐ People had detailed health action plan, which gave staff information about what healthcare support people needed. 'Traffic Light Passports' were used to give information to hospital staff should the person be admitted to hospital.
- ☐ One person told us about recent improvements to their health that they had made due to changing their daily routine. They said, "I feel fit now."
- ☐ People told us they had access to healthcare professionals such as doctors, psychiatrists, opticians and dentists. One person told us that the chiropodist had visited them the day before our visit.
- ☐ Where specialist support was needed for one person, managers said that they had a good relationship with the consultant and this had led to the person being able to maintain good health.
- ☐ One person told us that they needed to lose weight and they had been referred by their doctor to 'BEATS' an exercise group held at the local leisure centre to help them.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People told us that they had lived at the home or in one of the providers' sister homes for many years. They told us that they got on well as a group.
- The atmosphere at the home was relaxed and friendly. People were respected as individuals with different strengths and interests.
- People said, "[Staff] are alright. Nice and talk to you. You can have a laugh. I get on with them all."

Supporting people to express their views and be involved in making decisions about their care

- We saw people openly expressing their views throughout our inspection.
- One person was a committee member for 'Bury People First' a local organisation that supports people with learning disabilities.
- We saw people were freely coming and going from the home to take part in activities that they had chosen to do, such as meeting friends, going shopping, out on a bus ride and attending a sporting activity at the leisure centre.

Respecting and promoting people's privacy, dignity and independence. spacing

- Most people had their own bedrooms, which was respected as their personal space.
- We saw that personal information about people who lived at The Elms was stored securely which meant that they could be sure that information about them was kept confidential.
- People told us that their independence was promoted. People said, "I like to get out and about every day. I am independent. I can use the bus." Another person who enjoyed getting out and about on the bus was heading out for the day.
- We saw people washing up and making drinks.
- People showed us their rooms and told us they took some responsibility for keeping them clean and tidy.

## Is the service responsive?

### Our findings

Responsive – this means we looked for evidence that the service met people's needs

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- ☐ At our last inspection we saw that significant improvements had been made to care plans and people told us that they had been involved in the process. This remained the case at our inspection.
- ☐ People told us and we saw that they had busy lifestyles. They said, "I am too busy. I am off to bowling at Castle Knights this afternoon. I am very good at it and have lots of friends. I see my family too."
- ☐ Arrangements were in place for people to go as a group to see the X Factor Live, Mrs Brown's Boys and a trip to Blackpool if they wanted too.
- ☐ Some people regularly visited their friends and family and this was supported by the home. One person was on holiday with a relative at the time of our inspection.
- ☐ The Accessible Information Standard (AIS) was introduced by the government in 2016 to make sure that people with a disability or sensory loss are given information in a way they can understand. We found the provider was meeting this requirement by identifying, recording and sharing the information and communication needs of people who used the service with staff and relatives, where those needs related to a disability, impairment or sensory loss.
- ☐ We saw that one person used facial expression, gesture and some Makaton (sign language) to communicate with other people and staff.

Improving care quality in response to complaints or concerns

- ☐ One person said, "If I had any concerns. I could talk to a manager." They were confident action would be taken to address any problems or concerns they had.
- ☐ The provider continued to have a procedure in place for managing complaints. We were told that there had been no complaints received by the service.

End of life care and support

- ☐ The service did not routinely provide support for people at the end of their lives. However, they would support a person to remain at the home as they neared the end of their life if it was safe to do so.

# 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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- ☐ At our last inspection we recommended that provider ensures that any outstanding aspects of quality assurance are addressed as soon as possible. The service has improved its overall rating to good.
- ☐ People told us that they could approach the managers and staff if they had any concerns and were confident action would be taken to address the problem.
- ☐ One of the registered provider/managers held a post graduate 'Applied Psychology of Intellectual Disabilities' degree.
- ☐ The providers have supported a senior carer to undertake a nationally recognised qualification in leadership and management.
- ☐ A system was in place to help ensure that tasks were completed by staff at the home.
- ☐ There was an on call system in place in case of emergencies outside of office hours and at weekends. This meant that any issues that arose could be dealt with appropriately, with the support of managers.
- ☐ The Elms quality rating was on display.

Planning and promoting person-centred, high-quality care and support with openness; Working in partnership with others

- ☐ One of the registered providers attended local partnership meetings and was a member of the local learning disability strategy group. This helps them to keep up to date with changing legislation and guidance as well as share ideas about best practice.
- ☐ The service worked with local healthcare professionals, including CDLT to ensure people receive the support they need.
- ☐ At our last inspection we received very positive responses from community based professionals about the service. We had received no information to tell us this view had changed.
- ☐ Services which are registered are required to notify the Care Quality Commission incidents that happen, for example, safeguarding and serious injury. We checked our records and saw that the registered managers for this service had done this appropriately when required.