

# Mrs Oriel Graham

# Clifford House

## 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

This announced inspection took place on 31 October 2015. During our previous inspection visit on 8 September 2014 we found that the service met all the standards we inspected during that visit. We gave the provider 24 hours' notice of this inspection because the visit took place outside of normal working hours and we needed to ensure people who lived in the home were available to speak to us.

The provider is also the registered manager. 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.

Clifford House is a modern detached property, approximately 3 miles north of Carlisle in the village of Westlinton. The service provides care and accommodation for up to five people with a learning disability.

There is a large lounge with a conservatory and a dining kitchen on the ground floor. Bedrooms are all single and situated on the ground and upper floor together with toilet and bathing facilities. There are well kept gardens to the side and rear of the property.

# Summary of findings

At the time of our inspection there were four people living in Clifford house and we were able to spend time with all of them during our visit. They all told us they felt safe living in Clifford House and had lived there for many years.

The registered manager and the other member of staff were aware of their roles and responsibilities to keep vulnerable people free from harm and the threat of abuse.

We found that medicines were managed well and in line with peoples' prescriptions.

We observed warm and friendly interactions between the staff and people who lived in Clifford House. We saw that staff were able to communicate well with the people they supported.

We looked at the assessed needs as recorded in the care plans and also the dependency levels of the people who lived in the home and saw these were well managed by the registered manager.

People were encouraged to eat a healthy diet but could also choose their favourite food.

Healthcare needs were met through peoples' doctors and consultants were necessary. Dental, optical and chiropody services were accessed when required.

People had been assessed prior to their admittance to the home. Each person had an up to date care and support plan that gave staff sufficient information to provide an appropriate level of care.

People knew how to make their concerns known and were confident that any concerns or complaints raised would be listened to and dealt with in a timely manner.

There was an open culture in the home with the staff team supporting people who lived in Clifford House to live as fulfilling a life as possible.

# 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 is safe.

The registered manager had completed training in safeguarding vulnerable adults. They were aware of their responsibility to protect people from the threat of abuse.

Medicines were administered safely and in line with peoples' prescriptions.

There was sufficient staff employed to care for and support people who lived in Clifford House.

Good



### Is the service effective?

The service is effective.

Staff had received training relevant to their roles to ensure they were competent to provide the support people needed.

People had a choice of meals and snacks. Nutritional assessments were in place.

People's rights were being protected because the Mental Capacity Act 2005 Code of practice was being followed.

Good



### Is the service caring?

The service is caring.

People told us the staff provided good care and support.

People's dignity and privacy were respected.

Staff knew people well and had formed caring and appropriate relationships with them.

Good



### Is the service responsive?

The service is responsive.

People's needs had been thoroughly assessed before moving in to Clifford House. Re-assessment of their needs was ongoing.

People were able to raise complaints and concerns knowing they would be listened to.

People were given freedom of choice at all times and staff respected the choices people made.

Good



### Is the service well-led?

The service is well led.

There was a registered manager in place.

The registered manager constantly, though informally, monitored the quality of the service provided.

All records concerning every aspect of the operation of the home were in place and up to date.

Good



# Clifford House

## 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 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 the 31 October 2015 and was announced and outside of normal working hours. The provider was given 24 hours' notice because the location was a small care home for younger adults who are often out during the day; we needed to be sure that someone would be in.

This inspection was completed by the lead adult care inspector.

We did not receive a provider Information Return (PIR) as one had not been sent for completion. A PIR is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

We reviewed the information we held about the service, such as notifications we had received from the registered provider. A notification is information about important events which the service is required to send us by law. We also spoke to commissioners of care for the local authority and health during our regular meetings held with commissioners of services. We planned the inspection using this information.

We spent time observing how the registered manager supported people in the home and how they interacted with each other.

We read all four care files which included assessments, care plans and person centred plans.

We walked around the building and we also looked at records relating to maintenance and risk in the environment. We inspected medicines kept on behalf of people in the home.

# Is the service safe?

## Our findings

People told us they felt safe living in Clifford House. We saw that the registered manager and the member of staff had completed training in safeguarding vulnerable adults.

People told us, “I feel very safe here and Oriel [manager] is always there when we want her” and “We all feel safe and we have lived here for ages”.

Records we looked at showed that risk assessments had been completed and covered the time people were in the home and out in the community. All risk assessments were reviewed and updated with the support plans. All the people who lived in Clifford House went out to day services in the community and the registered manager told us she always made sure people were kept safe during their various activities.

This small home was run very much on family lines with the majority of the care and support provided by the provider who was also the registered manager. All of the people had lived in the home for many years and we saw that they were totally relaxed in each other's company.

The registered manager was fully aware of her responsibility to keep those people she supported safe from the risk of harm or abuse. She was supported in her work by one other part time member of staff who had worked in the home for a number of years. People told us they knew the other staff well as she had supported them for some time too. Both the registered manager and the other member of the staff team had completed training in safeguarding people last year. The registered manager also kept herself up to date by reading and accessing information on the internet.

We looked at the arrangements in place in relation to the recording of medicines received into the home and kept on people's behalf. We looked at the medicines administration records and found these to be clearly and correctly completed. There were records showing what had been received and details of any medicines returned to the pharmacy. Medicines management was the responsibility of the registered manager and she told us that, currently, there were no medicines liable to misuse called controlled drugs prescribed to any of the people who lived in Clifford House.

# Is the service effective?

## Our findings

As this was a very small home it was run very much on family lines with the provider who was also the registered manager providing most of the care and support. There was one other part time member of staff who worked 20 hours per week who assisted with care and support. Both the registered manager and the other member of staff had worked in the home for many years and knew the people who lived there very well.

We saw, during our inspection visit, that the people who lived in Clifford House very much considered they were part of one family with the registered manager. We looked at the assessed needs as recorded in the care plans and also the dependency levels of the people who lived in the home and saw these were well managed by the registered manager.

Meals were discussed and chosen by those who lived in the home and they also went shopping with the registered manager. We saw that the registered manager encouraged people to choose and eat healthy meals but also made sure they chose their favourite food also. We were told the kettle was always on so there were plenty of hot and cold drinks available. People also told us they often went out for meals which they all enjoyed. All those who lived in the home were able to voice their opinions about their meals and in particular when went 'out to eat'. They had all been out for their breakfast on the morning of our inspection visit.

We saw, from the care records and our observations, that all those who lived in Clifford House had the capacity to makes both small and large decisions about how they wished to spend their time and live their lives. They were all able to tell us what they did at their various community activities.

We saw, during our inspection that there was no restriction on people's movements. We observed the four people in the home during the time we spent with them. People came and went as they wished and were all sitting in the large kitchen/diner when we arrived. During our visit one went to their room and the others were busy with their hobbies or chatting.

We looked briefly around the building and were shown their bedrooms by two of the people who lived in the home. These were large and airy and decorated in the style and colours chosen by those whose rooms they were. One of the bedrooms was on the ground floor and the others on the first floor. All those who lived in Clifford House were fully mobile so there was no need for mobility aids.

Health care needs were met by peoples' GP practices and hospital consultants when their services were required. The registered manager ensured all hospital or consultant appointments were kept up to date and recorded in each person's individual daily diary. We saw there was a hospital passport in each of the care plans should a stay in hospital be necessary.

People who lived in Clifford House saw the dentist and optician on a regular basis and the registered manager ensured chiropody appointments were regularly kept.

We found that people in the home had good access to health prevention, care and treatment when necessary.

We discussed, with the registered manager how she organised training for herself and the other staff member. She told us that she accessed training organised by duly social care and also E learning via the computer. Training last year included infection control and safeguarding of vulnerable adults.

# Is the service caring?

## Our findings

People told us they were well cared for living in Clifford House. We spoke to all the people who lived in the home and they all said that Clifford House was their home and they found the manager and the other member of the staff team kind and caring. One person told us, “This is my home, I have lived here for ages and I love it”. Another said, “It is lovely living here and we are all treated very well”.

Each of the four people in the service had their own bedrooms and we saw during the day that they could spend time on their own if they wanted to. We were shown two of the bedrooms and saw they were very personal to the individual. They contained photographs, ornaments and televisions. We were told by one person, “I like having my own television so I can watch my favourite soaps”.

We also saw that confidential files about each person were kept locked away. This ensured the confidentiality and privacy of the written records.

We saw that all the people were treated as individuals and equals and were supported by a registered manager who knew them very well. Because they had all lived at Clifford House for so many years the registered manager, who provided most of the care and support, was able to tailor the care to each individual whilst respecting the decisions each person made.

We saw that people were given as much independence as they wanted with the home being run very much on family lines. Everyone was involved with their care and support and told us, “We can choose what we do and where we go”. The people in the home managed most of their personal care and chose their own clothing, times of getting up or going to bed, food and outings. People told us they were involved in making decisions about their care and knew all about their care plans. They also told us that they were all given time to make their own decisions and said, “We always discuss things of importance when we are all together so anything we decide is what we all want”.

# Is the service responsive?

## Our findings

Each person had their own personal care plan that included risk assessments, details of the support required to meet the individual needs and detailed information relating to health care needs. We saw that care plans were reviewed every month by the registered manager and included input from the people who lived in Clifford House. We saw that each care plan review was signed by the person whose care plan it was. People knew their own care plan as each was a specific colour and we were told that the colour was the same as 'their daily diary'.

We saw that, due to the number of people who used this service there were regular consultations in place as a way of establishing people's views about what they wanted to do and how they wished to spend their time when in the home or out in the community.

The registered manager confirmed she discussed the care and support provided with the other staff on a daily basis and this always included the people who lived in the home also.

People had lived in this home for many years and we could follow, through each of the monthly reviews, when any of the originally assessed needs had changed. We saw how risk assessments had been updated to meet the changing needs particularly when people went out into the community.

All of those who lived in Clifford went out to work or to day centres during the week and were able to tell us what they did. We also spoke about leisure activities and were told that everyone liked going away on holiday. When we asked about this we were told that they had gone to Spain during the Summer but they also enjoyed going to Centre Parcs. They hadn't yet decided on next year's holidays but this was to be discussed in the new year.

This home had its own transport and we from speaking to people in the home we saw that "going out" was something that was enjoyed by all four people. The registered manager arranged outings each week and they had recently visited a large shopping centre in Gateshead. We were told, "We go out for a meal a few times a week and we had been out for breakfast before you (the inspector) arrived".

We observed that there was a warm and open relationship between the registered manager and the people she cared for and supported. The atmosphere was relaxed and when we asked people if they had any complaints about the service everyone was quite satisfied with the care provided and had no complaints. People told us they would talk to the provider if they were unhappy. One person told us, "I can talk to [registered manager] about anything at all if there is something wrong she sorts it out right away".



# Is the service well-led?

## Our findings

The registered provider who was also the registered manager had cared for the four people who lived in her home for over 17 years. She approached this as if the people she supported were members of her family but with an appropriate degree of professionalism. She told us that her aim was to give people a full life and support them to be as active as possible. It was obvious from our observations that she did this with openness and accountability.

The registered manager had always encouraged the people she supported to maintain family links and all the people living in the home were in touch with their families. Invites are given for family members to visit the home and people who lived there do go to visit their families from time to time. Links with the community were also important and these were kept up through work and other social activities in the centres people attended. The registered manager encouraged the people she supported to maintain their community links but they all told us there were times when they enjoyed “doing their own thing at home”. This gave people the opportunity to have contact with agencies outside of the home.

The registered manager also ensured that people had access to external advocates should they wish to speak up about any concerns or to be supported to make decisions if this was ever necessary.

The registered manager confirmed that she kept in touch with the local authority learning disabilities team for help and advice should she need it.

We saw that supervision of her staff team was informal because the arrangements in the service were very much based on a family model and there was only one other member of staff who provided care and support. They had worked in Clifford House for all the 17 years so knew the people living there very well. The registered manager told us they met on a daily basis to discuss any matters pertaining to the running of the home and the provision of care. We suggested that it would be useful to have the details of these meetings on record.

Monitoring of the quality of the service provided was done on an informal basis through constant dialogue with the people who lived in Clifford House. People were able to discuss their care with the registered manager and they told us, “We all get on well together and everything is always fine”. The registered manager also maintained contacts with family members to ensure they were always kept up to date with their relatives care and support.

We saw that all the electrical and gas equipment were maintained under service level agreements and the home had been awarded five stars by the Food Standards Agency.