

# Lifeways SIL Limited

# Bluebell Court

## Inspection report

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Date of inspection visit:  
13 March 2018

Date of publication:  
10 May 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

The inspection visit took place on 13 March 2018 and was announced.

Bluebell Court provides specialist support and recovery services for people with enduring mental health needs, supporting them to transition from Hospital, Secure and other institutional living environments to their own tenancy within the community. Bluebell Court is the registered office for regulated activity provided by SIL in the North of England. Each service is staffed 24/7 by a team of recovery support workers with an on-site manager and additional support is provided by an allocated mental health professional from within the quality and practice team. Bluebell Court is registered for the regulated activity of personal care, which could be provided at any of their services located in the north of the country. This care could also be provided elsewhere in the community if the service wanted to.

Bluebell Court provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented, and is the occupant's own service. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service. Not everyone using Bluebell Court receives a regulated activity; CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and on-going monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

There was a registered manager in place. 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

Three people received personal care from Bluebell Court when we inspected. During the inspection we spoke with two of them. They told us they felt safe and well supported by staff.

There were procedures in place to minimise the risk of unsafe care or abuse. Staff had received training and knew how to keep people safe. Risk assessments had been developed with each person. These enabled people to remain as independent as possible while reducing the risk of harm. Care plans were personalised, reflected people's wishes and involved them and where appropriate, their relatives. These had been regularly reviewed.

Medicines were managed safely. They had been ordered appropriately, checked on receipt into the service, given as prescribed and stored and disposed of correctly. People received their medicines when needed and were supported to administer their own medicines if safe to do so. Appropriate records had been completed for entering, administering and disposing of medicines.

We saw from records and talking with staff that they had been recruited safely, appropriately trained and supported. People told us there were sufficient staffing levels in place to provide the support people required to progress their independence and skills.

Staff had documented information about people's dietary needs. People were supported to shop for and prepare food where needed and encouraged to eat a balanced diet. People had access to and support to see healthcare professionals and their healthcare needs had been met.

There were safe infection control procedures and practices and staff had received infection control training. Staff wore protective clothing such as gloves and aprons when needed. This reduced the risk of the spreading infection.

We looked at how accidents and incidents were managed by the service. Where they occurred any accident or incident was reviewed to see if lessons could be learnt and to reduce the risk of further incidents.

We saw the service had carried out assessments of the environment and equipment when supporting people. Where potential risks had been identified action taken by the service had been recorded.

Staff provided care in a way that respected peoples' dignity, privacy and independence. People told us staff treated them as individuals and delivered personalised care.

People had been 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 were told the ways they could complain and were given information about how to complain. People we spoke with told us they felt able to complain and express any concerns. Where people raised a complaint appropriate action was taken. People also had information about support from an external advocate should this be required.

The registered manager assessed and monitored the quality of the service. These included regular audits and ways to seek people's views about the service provided. People who were supported told us the management team staff were approachable and willing to listen.

Further information is in the detailed findings below.

## 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.

# Bluebell Court

## 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.

The inspection visit took place on 13 March 2018. We gave the service 24 hours' notice of the inspection visit because we needed to be sure that the registered manager would be available.

Bluebell Court is a domiciliary care agency that provides care and support to people with mental health needs living in one of their specialist 'extra care' services. The main office base is at Bluebell Court in Blackpool where the overall management is carried out and documentation for all six services can be available. When we inspected there were six specialist extra care residences. Personal care was available as required in each one. Three people were receiving personal care from the service on the inspection.

Prior to our inspection visit we contacted several local authority and health services who commission with Bluebell Court. They told us they were satisfied with the care and support provided. We also contacted Healthwatch. Healthwatch is an independent consumer champions for health and social care. This gave us additional information about 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.

The inspection team consisted of an adult social care inspector and an adult social care inspection manager.

During the visit we spoke with a range of people about the service. They included two people who received personal care, the registered manager and six staff members.

We looked at care and medicine records of two people. We reviewed a variety of other records, including

staff recruitment, training and personnel records of four members of staff and records relating to the management of the service. We checked staffing levels, arrangements for care and support. This enabled us to determine if people received the care and support they needed in a safe way.

# Is the service safe?

## Our findings

We asked people if they felt safe. They told us they felt safe and well supported by staff. One person told us, "I feel safe here. No-one here has upset me." Risk assessments had been developed with each person. This enabled people to remain as independent as possible while reducing the risk of harm. We saw these were monitored and reviewed regularly.

There were procedures in place to minimise the risk of unsafe care or abuse. Staff described their responsibilities to report unsafe care or abusive practices. They knew how to do this if they saw or suspected abuse and had received training on safeguarding vulnerable people. During the inspection process we contacted commissioners of the service and they told us there had been no concerns raised with them about Bluebell Court.

People told us they felt there were sufficient staff to support them when they wanted this. One person said, "There are staff here when I want them. I have been to the shop to get my food with them." Another person commented, "There are staff to help me if I need them." Staff told us they had been recruited safely and staffing levels were sufficient to provide safe care that met people's needs. We looked at staffing rota's and saw the registered manager monitored and adjusted staffing levels so staff were available when people needed them.

We spoke with people who said they were satisfied with the arrangements and support with their medicines. People received their medicines when needed and were supported to administer their own medicines if safe to do so. One person said, "They remind me to take my medicines and check them with me."

We looked at medicines and administration records. Medicines were managed in line with The National Institute for Health and Care Excellence (NICE) national guidance. Medicines had been ordered appropriately, checked on receipt into the service, given as prescribed and stored and disposed of correctly. Staff had received training and had competency checks to assess if they were managing medicines safely.

Staff had received infection control training and understood their responsibilities in relation to infection control and hygiene. They had access to personal protective clothing such as disposable gloves and aprons. This assisted staff to reduce the risk of infection to people they supported and themselves when providing personal care.

We looked at how accidents and incidents were being managed at the service. Where any incident, accident or 'near miss' occurred the registered manager and staff team reviewed them to see if lessons could be learnt and if they could reduce the risk of similar incidents.

## Is the service effective?

### Our findings

Before anyone received support from Bluebell Court, staff completed an assessment of people's needs and developed a written plan of care and support. This helped staff determine if they could meet the person's needs and provide the right support. One person said, "I met [staff] and talked about what help I needed before I moved into my flat."

People were encouraged to develop skills in daily living including meal preparation and budgeting. Care plans seen confirmed people's dietary needs had been assessed and support and guidance recorded. Staff encouraged people to eat a healthy balanced diet but respected their right to choose the foods they wanted. People told us staff supported them to purchase and prepare meals if they needed help. One person said, "We went to [supermarket] and chose my food."

Staff assisted people to personalise their flats if they needed help. They helped them check any equipment they needed was safely maintained and requested any repairs from their landlord.

People told us staff supported them to see GP's and other healthcare professionals. One person said, "The staff have arranged an appointment for me as I said I wanted to see a doctor." People's healthcare needs were discussed and agreed with the person and if appropriate their relatives. Care records seen confirmed this. Staff advised and encouraged people to keep safe and healthy and worked with other professionals to provide appropriate support. They provided relevant information and documentation so people received the right care and treatment.

We looked at how the service gained people's consent to care and treatment in line with the Mental Capacity Act (MCA). People we spoke with said staff checked with them they agreed for them to provide care and support. We saw written consent to various aspects of care and treatment was recorded on people's care records. If a person who lacked capacity to make decisions moved into one of the flats, staff would follow best practice guidelines and legislation. This would ensure decisions were made in people's best interests.

We saw evidence that the provider was referencing current legislation, standards and evidence based guidance to achieve effective outcomes. to provide care that met people's needs. Staff were trained and knew how to support people. Records seen and staff spoken with confirmed they received regular training relevant to their role. They had skills, knowledge and experience required to support people with their care and social needs. This assisted them to provide care that met people's needs. One member of staff told us, "I have been impressed with the training and support I have had since starting work here."

Staff told us and records seen confirmed they received supervision on a regular basis. These were one to one meetings with their line manager. They told us they could suggest ideas and training needs and were given feedback about their performance.



## Is the service caring?

### Our findings

People told us they were settled and comfortable with the staff who supported them. One person told us they had only recently moved into the service. They said it had been a big upheaval. However as well as supporting them with their medicines and personal care, staff had helped them improve their confidence. They said staff treated them in a caring and supportive way and respected their privacy. Another person said, "Staff have been really supportive and approachable. They have a polite, friendly approach and are very co-operative."

We saw staff were aware of the importance of supporting and responding to people's diverse needs and treated people with respect and care. They had a good understanding of protecting and respecting people's human rights and gave examples of where they had given additional support to people with protected characteristics. There was a sensitive and caring approach, underpinned by awareness of the Equality Act 2010. The Equality Act 2010 legally protects people from discrimination in the work place and in wider society.

People's personal relationships, beliefs, likes and wishes were recorded in their care records and staff were knowledgeable about each person. This helped people to receive the right support. The registered manager discussed ways the service could make it more apparent to people that they supported people's diverse needs. They proposed providing leaflets, information and images that identified the service was a safe environment for people to express themselves and their religion, culture or sexuality.

Information about advocacy services was on notice boards so people could access this should people need their guidance and support. This ensured people's interests would be represented and they could access appropriate services outside of the service to act on their behalf if needed.

People told us they were fully involved in planning their care, support and future aspirations. Care and support plans seen were personalised and demonstrated people had been involved in planning the support they needed. They described the support provided, their routines and activities and progress made towards their goals.

We saw staff made sure people's information remained confidential. People's records were safely stored in an office and staff knew not to talk about people's personal information in public areas.

## Is the service responsive?

### Our findings

People told us staff were responsive to their care needs and available when they needed them. They said they were encouraged to discuss how they wanted their care and support provided and their future plans. We saw people were encouraged and supported to develop daily living and social skills, to become more independent and make safe choices. One person told us, "The staff are very good. They help and encourage me and remind me of the things I need to do." Another person said, "The staff help me if I am not being sensible or taking risks. We talk about things."

We saw care plans were personalised and reviewed regularly and people were encouraged to take the lead in focusing on goals and skills. One person said, "They ask me what I want to do and then we plan how we are going to do it. Staff give me ideas when I can't think of any."

We looked at arrangements the service had taken to identify, record and meet communication and support needs of people with a disability, impairment or sensory loss. Care plans seen identified whether a person had communication difficulties. However no-one supported when we inspected had communication difficulties. Staff shared important information about people's needs including where relevant, communication needs, with other professionals.

The complaints procedure was made available to people supported by Bluebell Court. People we spoke with told us they were encouraged to raise any concerns and knew how to complain. We saw minor niggles were recorded and action taken in response to these. One person said, "I haven't needed to complain but I would if something wasn't right." They added, "We can complain at tenants meetings."

Bluebell Court does not provide end of life care. People were encouraged to discuss their end of life wishes but this care would not be provided by Bluebell Court. If people developed a life limiting illness they would use primary health services for support. The service focuses on developing independent living and is not geared towards end of life care.

# Is the service well-led?

## Our findings

People told us they thought the service was well organised and managed. There was a registered manager in place. 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. We spoke with the registered manager who demonstrated a clear understanding of the operation and oversight of the service.

People spoken with said the registered manager and management team were routinely available and willing to answer questions or concerns. There were tenants meetings where people could raise any issues or ideas and people were given the opportunity to complete satisfaction surveys. Information on care and health support available and local activities was displayed on notice boards around each of the extra care buildings.

The registered manager and her staff team were, knowledgeable and familiar with the needs of the people they supported. There was a clear management structure and reporting system in place that assisted the registered manager to ensure the services were safe, effective and well led. They understood the legal obligations, including conditions of registration from CQC and those placed on them by other external organisations. We talked with the registered manager and staff on duty. They confirmed they were clear about their roles which assisted in the management of the organisation.

Staff said they were well supported by the registered manager. One member of staff told us, "I get great support, [registered manager] is a fantastic manager, helpful, knowledgeable and caring." Another member of staff said, "I couldn't ask for a better line manager. She is really supportive."

The management team completed a variety of audits to effectively govern, assess and monitor the quality of the service and staff. We saw quality monitoring and audits had been completed regularly. These included medicines, care records, infection control, and health and safety. Actions had been taken as a result of any errors or omissions found. In addition the organisations quality team completed an annual comprehensive quality assessment. Staff told us they were able to contribute to the way the service ran through staff meetings, supervisions and daily handovers. They told us they felt supported by the registered manager and management team.

The staff team worked in partnership with other organisations and relevant guidance to make sure they followed current practice and provided a safe and quality service. They told us sought information, advice and guidance from other organisations and professionals. These included mental health organisations, adult social services, GP's and other healthcare professionals. They learnt from incidents that had occurred and made changes to care and support in response to these.

The service 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.

