

Mrs Elizabeth Greaves Gwenlyn 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 inspection visit took place on 25 November 2015 and was announced. The registered provider was given 48 hour's notice because the location was a small care home for younger adults who are often out during the day, we needed to be sure someone would be in.

At the last inspection on 20 June 2014 the service was meeting the requirements of the regulations that were inspected at that time.

The registered provider was an individual who also managed the home on a day to day basis. Registered

providers 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.

Gwenlyn House is registered to accommodate up to three adults. The home is situated in the North Shore area of Blackpool, within easy reach of local amenities. Accommodation comprises of three single bedrooms, a large lounge and dining room. Off street parking is available for visitors. At the time of our inspection visit there was one person who lived at the home.

Summary of findings

The carers in the home were the registered provider and her husband. The service did not employ any staff. The person who lived at the home was independent and could attend to their own care needs with minimum supervision.

Suitable arrangements were in place to protect people from abuse and unsafe care. The person told us they felt safe and their rights and dignity were respected. The person said, "I love it here they are my family. I am safe and well. If I had to go anywhere else I would be miserable."

We looked at the care records for the person. There was information in place about their support needs and how these were being met.

We found the person was having their healthcare needs met. They told us they had access to their doctor when they needed to see them.

We found the person who lived at the home was in good health and did not need to take any medicines. Appropriate arrangements for storing medicines were in place should the person need to take any medicines in the future. The home was well maintained, clean and hygienic when we visited. The person who lived at the home said they were happy with the standard of accommodation provided. The person said, "I love my room and like keeping it clean."

The person was happy with the variety and choice of meals available to them. Regular snacks and drinks were available to between meals to ensure they received adequate nutrition and hydration. We observed the person had unrestricted access to the kitchen and could prepare drinks and snacks whenever they wished.

The registered provider understood the requirements of the Mental Capacity Act (2005) (MCA and the Deprivation of Liberty Safeguards (DoLS). This meant they were working within the law to support people who may lack capacity to make their own decisions.

The person had freedom of movement around the building. They were involved in decision making about their personal care needs and the running of the home. We saw no restrictions on the person's liberty during our visit.

There was no formal internal quality assurance in place but informal checks were made routinely. Everyone talked together frequently to discuss any plans or changes. Decisions were made as a family group.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

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Is the service safe? The service was safe.	Good
Procedures were in place to protect people from abuse and unsafe care.	
Staffing arrangements in place were sufficient to meet the needs of the person who lived at the home.	
Assessments had been undertaken to identify risks to the person who lived in the home. Written plans were in place to manage these risks.	
The person who lived at the home was protected against the risks associated with unsafe use and management of medicines.	
Is the service effective? The service was effective.	Good
Suitable support arrangements were in place to ensure the person had a good quality of life.	
The person who lived at the home received a choice of suitable and nutritious meals and drinks in sufficient quantities to meet their needs.	
The registered provider was aware of the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguard (DoLS) and had knowledge of the process to follow.	
The person's healthcare needs were monitored and continuity of care was maintained.	
Is the service caring? The service was caring.	Good
The person who lived at the home was able to make decisions for them and be involved in planning their own care.	
The person who lived at the home was satisfied with the support and care they received. They said they were treated with dignity and their privacy was respected.	
The person who lived at the home was supported to express their views and wishes about all aspects of life in the home.	
Is the service responsive? The service was responsive.	Good
The person who lived at the home participated in a range of activities which kept them entertained and occupied.	
The person who lived at the home had a care plan in place. This had been developed with them to identify what support they required and how they would like this to be provided.	
The person who lived at the home told us they knew their comments and complaints would be listened to and acted on effectively.	

Is the service well-led? The service was well led.	Good	
There were informal quality assurance systems in place to monitor the quality of the service. The provider worked in the home and dealt with any issues of quality quickly and appropriately.		
The registered provider had clear lines of responsibility and accountability. The registered provider was committed to providing a good standard of support for the person who lived at the home.		



Gwenlyn 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 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 25 November 2015 and was announced. The registered provider was given 48 hour's notice because the location was a small care home for younger adults who are often out during the day; we needed to be sure someone would be in.

The inspection was undertaken by an adult social care inspector.

Before our inspection visit on 25 November 2015 we reviewed the information we held on the service. This included notifications we had received from the registered provider, about incidents that affect the health, safety and welfare of people who lived at the home and previous inspection reports. We also checked to see if any information concerning the care and welfare of people who lived at the home had been received.

We spoke with a range of people about the service. They included the registered provider, her husband and the person who lived at the home. We also spoke with the commissioning department at the local authority. This helped us to gain a balanced overview of what people experienced accessing the service.

We looked at the care records of the person who lived at the home, arrangements in place for meal preparation and records relating to the management of the home.

Is the service safe?

Our findings

We spoke with the person who lived at the home. They told us they felt safe and their rights and dignity were respected. They told us they received safe and appropriate care which was meeting their needs. They said they liked the registered provider and her husband and wouldn't wish to live anywhere else. The person said, "I love it here they are my family. I am safe and well. If I had to go anywhere else I would be miserable."

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. The person told us they were safe and well and had no concerns about their care. Discussion with the registered provider confirmed she was aware of the local authorities safeguarding procedures and these would be followed if required.

When we arrived for our inspection visit the person who lived at the home had just finished their breakfast and was enjoying a cup of coffee. They told us they were safe and received the level of support they required when they needed it. They said they enjoyed being part of the registered provider's family and didn't feel as though they lived in a home. The person lived as part of the registered provider's family who was their main carer. We saw the person enjoyed the time spent with the registered provider and there was lots of discussion and laughter. The person said, "I have lived here for years as a member of the family. I am very happy."

We looked around the building and found it was clean, tidy and 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 registered provider's husband told us the service had recently received a visit from the fire service. We were told actions requested by them would be addressed as requested. We spoke with person who lived at the home. They told us they were comfortable and felt safe. The person said, "I love my room I have everything I need including my television and CD player. I love listening to the sound of music."

We checked hot water temperatures in the persons bedroom. We found water was delivered at a temperature in line with health and safety guidelines. This ensured the person was safe and not at risk of scalding.

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 service did not use any moving and handling equipment such as hoists. This was because the person who lived at the home was mobile and could be supported independently.

The carers at the home were the registered provider and her husband. The service did not employ any staff. The person who lived in the home was independent and could attend to their own needs with minimum supervision.

Although the service did not employ separately paid staff we did complete checks to ensure the registered provider was safe to support the person in her care. We found a Disclosure and Barring Service check (DBS) was in place. These checks were required to identify if people have a criminal record and were safe to work with vulnerable people.

We found the person living at the home was in good health and did not need to take any medicines. The person said, "I am fit and healthy and haven't needed to take any tablets for years." We found appropriate arrangements for storing medicines were in place should the person need to take any medicines in the future.

Is the service effective?

Our findings

The person who lived at Gwenlyn House had lived at the home for a number of years. They received effective care because they were supported by people who had an good understanding of their needs. We were able to establish through our observations and discussions they received effective, safe and appropriate care which was meeting their needs and protected their rights. The person who lived at the home said, "I have lived here forever and love it. I love everything about it here. I really couldn't imagine being anywhere else. They are my family."

We spoke with the registered provider to establish her understanding of the needs of person in her care and the support they required. We found she was able to describe the individual needs and support they required. Observations throughout the inspection visit confirmed the person was happy with the care and support they received.

We spoke with the registered provider about training she or her husband had undertaken so they could provide effective support to the person in their care. She told us her husband had a management qualification and had relevant mandatory training. These included health and safety, first aid and food hygiene. This confirmed the person who lived at the home was supported by a well-trained and competent person.

Our observations confirmed the atmosphere was relaxed and the person who lived at the home had freedom of movement around the building. The person said, "We spend time together as a family but I can go to my room whenever I want. I like a bit of time on my own to listen to my music and watch television."

The person told us they enjoyed food provided by the service. They said they received varied, nutritious meals and always had plenty to eat. They did not work to a set menu and the person was asked daily about meals and choices available to them for the day. The main meal was served in the evening with lunch consisting of sandwiches or a light meal. The person told us they had unrestricted access to the kitchen and made their own breakfast and snacks throughout the day. We were told breakfast usually consisted of a hot drink, cereal and toast. The person told us if they fancied a cooked breakfast the registered provider would make whatever they wanted. We noted fresh fruit was available in the dining room for the person to help themselves.

On the day of our inspection visit it was the registered provider's birthday. The person who lived at the home said a special meal was being prepared for tea which they were really looking forward to. The person said, "I don't know what we will be having but it will be good."

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 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).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty were being met. The person who lived at the home had mental capacity and was able to make decisions for themselves. We did not see any restrictive practices during our inspection visit and observed the person had freedom of movement around the home.

The person's healthcare needs were carefully monitored and discussed with them as part of the care planning process. Care records seen confirmed visits to and from General Practitioners and other healthcare professionals had been recorded in the past. The records were informative and had documented the reason for the visit and what the outcome had been. This confirmed good communication protocols were in place for people to receive continuity with their healthcare needs.

We saw the person had recently attended the optician for an eye test and had purchased a new pair of glasses. When spoken with about their healthcare needs the person said, "I haven't been to the doctors for years. I am fit as a fiddle."

Is the service caring?

Our findings

During our inspection visit we spent time observing interactions between the registered provider and the person in her care. This helped us assess and understand whether the person using the service received care that was meeting their individual needs. We saw the registered provider was caring and attentive. She was polite, respectful and kind and showed compassion. We spoke with the person about their care. They told us they were happy and couldn't receive better care anywhere. The person said, "I am looked after really well. I love everything about being here. I am getting the best care possible and will never leave."

Throughout the inspection visit we saw the person had freedom of movement around the building and was able to make decisions for themselves. We observed routines within the home were relaxed and arranged around the person's individual needs. We saw they were provided with the choice of spending time on their own or in the lounge area. The home had a relaxed atmosphere.

The person told us they were supported to express their views and wishes about all aspects of life in the home. We observed the registered provider enquiring about the persons comfort and welfare throughout the inspection visit and she responded promptly if assistance was required. We looked at care records of the person. We saw evidence they had been involved with and were at the centre of developing their care plan. The person told us they were encouraged to express their views about how their care and support was delivered. The plan contained information about the person's current needs as well as their wishes and preferences. Daily records completed were up to date and maintained. These described the daily support the person had received and activities they had undertaken. The records were informative and enabled us to identify how the person had been supported with their daily routines. We saw evidence to demonstrate the persons care plan had been reviewed with them and updated on a regular basis. This ensured information about the persons needs was up to date.

The person told us their privacy was respected when they wanted to spend time in their room. The person said, "I like to spend time on my own in my room sometimes. I listen to my music if that is what I want to do."

Before our inspection visit we received information from external agencies about the home. They included the commissioning department at the local authority. Links with these external agencies were good and we received some positive feedback from them about the care being provided. They told us they were pleased with the care people received and had no concerns.

Is the service responsive?

Our findings

The person who lived at the home told us they received a personalised care service which was responsive to their care needs. They told us the care they received was focussed on them and they were encouraged to make their views known about the care and support they received. They told us they were encouraged to pursue personal interests and had no restrictions placed upon them with their daily routines. On the day of our inspection visit the person was enjoying spending the day with the registered provider who was celebrating her birthday.

The person participated in a range of activities which kept them entertained. These included arts and crafts, completing jigsaws, shopping, attending the local bingo hall and going out for lunch. When we undertook our inspection visit the person had just returned from a five week holiday in Cornwall with the registered provider. The person said, "We had a great time visiting lots of places. We went to the village where Doc Martin is filmed and I saw the school where his wife works. I went on a ferry, did lots of shopping and had some lovely meals."

The person told us they were enabled to maintain relationships with their friends and take part in activities which were of particular interest to them. The person said, "I like painting and drawing and doing arts and crafts. I also like playing with the grandchildren. We have lots of fun." We looked at the care records of the person to see if their needs had been assessed and consistently met. We found the person had a care plan which detailed the support they required. The care plan was person centred and had been developed with the person identifying what support they required and how they would like this to be provided. We spoke with the person who told us they had been involved in planning their records. They said they were happy and received the support they needed when they needed it. The person said, "I know I have a care plan and they write down what I have been doing."

We observed the person was treated with respect throughout our inspection visit. The person had capacity and was able to make decisions about their daily routine for themselves. The person said, "I like to help around the house. I hate being idle I like to keep busy. I also play with the grandchildren when they visit. I love them."

The service had a complaints procedure which was on display in the entrance hall. The procedure was clear in explaining how a complaint could be made and reassured people these would be responded to appropriately. Contact details for external organisations including social services and CQC had been provided should people wish to refer their concerns to those organisations.

The person who lived at the home said they were happy and had never had anything they wanted to complain about. The person said, "I love everything about living here. I am so happy and never want to leave."

Is the service well-led?

Our findings

The person lived at Gwenlyn House as part of the family, with everyone sharing the same communal facilities. We saw they had unrestricted access throughout the home and could enter the kitchen to make snacks and drinks if they wished. The person was involved in decision making about the running of the home and their own lifestyle. It was evident the person was treated as part of the family and involved in family activities. During our inspection visit we observed the person discussing with the registered provider the destination for their holiday next year. The person said, "I think we might go to France."

The registered provider was knowledgeable about the support the person in her care required. She was clear about her role and was and committed to providing a high standard of care and support for the person. Throughout the inspection visit we saw the person was comfortable and relaxed in the company of the registered provider. The person told us they were very lucky to live with the registered provider and be treated as a member of her family. The person said, "I really am lucky to live here. I am so happy."

There was no formal internal quality assurance systems in place but informal checks were made

routinely. Everyone talked together frequently to discuss any plans or changes. Decisions were made as a family group about holidays, outings, meals and any changes made to the environment. This meant the person who lived at the home was given as much choice and control as possible into how the service was run for them.

The person told us they were encouraged to express their views about any improvements or changes they would like to see made to the service they received. They told us they were happy and didn't feel improvements needed to be made. The person said, "I am treated well, enjoy my meals, love my room and do lots of things to keep me busy. I am very happy here and give the service an excellent rating."