

Bleak House Limited

Bleak House

Inspection report

High Street
Patrinton
Humberside
HU12 0RE

Tel: 01964630383

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26 April 2018

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Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Bleak House 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. The service is situated in Patrington, in the East Riding of Yorkshire and provides care for up to 19 people with learning disabilities and/or mental health conditions. At the time of the inspection the home was fully occupied.

The service was operated 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 using the service can live as ordinary a life as any citizen.

The home had a new manager in post who had registered with the Care Quality Commission in February 2018. 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 carried out an unannounced comprehensive inspection of Bleak House on 22 June 2017. A breach of Regulation 20A, requirement as to display of performance assessments, of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, was found.

We undertook this focused inspection on 26 April 2018 to check that the service was now meeting legal requirements. The service was inspected against one of the five questions we ask about services: is the service well led. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Bleak House' on our website at www.cqc.org.uk."

People were supported by a staff team who understood the aims of the service and were motivated to support people according to their choices and preferences.

The registered manager was approachable and the atmosphere in the service was relaxed and inviting.

The leadership and management of the service was of a good standard. It was clear from our discussions with the registered manager that they understood their registration responsibilities with regards to submission of statutory notifications about significant events that occurred at the service.

Staff and people spoke positively about the management at the service.

Quality assurance and monitoring systems were in place which included seeking the views of people who used the service. The registered manager routinely gathered feedback from people living in the service.

The registered manager and staff worked in close partnership with external health and social professionals.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

Good ●

The service has improved to Good.

There was a positive person centred culture at the service.
People living at the service were encouraged to develop new skills and experience different opportunities.

People and staff spoke positively about the home and the registered manager. Staff felt supported by their manager.

Effective systems were in place to monitor and review the quality of the service.

Bleak 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 focused inspection took place on 26 April 2018, was unannounced and completed by one adult social care inspector.

Prior to the inspection we contacted the local authority commissioning and safeguarding teams to gain their views on the service. We also looked at notifications about significant events that the provider was required by law to inform us about. The provider had completed a Provider Information Return (PIR). This is a document that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to help us plan our inspection.

We spoke with eight people during the inspection. We interviewed the registered manager and two care staff. We also spoke with a visiting healthcare professional. We looked at documents relating to the running of the service including audits, satisfaction questionnaires and staff meetings and supervision.

Is the service well-led?

Our findings

At the last inspection the provider was not displaying their current rating on their website. This failure to display the rating was a breach of Regulation 20A of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we saw action had been taken and the provider was now meeting legal requirements.

The provider had ensured the services ability to comply with regulatory requirements. The service had a manager who was newly registered, but had worked at the service for 12 years previously in other roles. They demonstrated a good understanding of their legal responsibilities in relation to their registration and were knowledgeable about what they had a legal responsibility to notify the Care Quality Commission (CQC) about. Records showed the service had notified the CQC appropriately of significant events when required. The registered manager attended a 'Providers Forum' which was run for care providers by the local authority. They told us this helped them to keep up with any changes. In addition, the provider had suitably displayed, both in the service and on their website, the ratings we gave at our last inspection.

The service was operated in line with the values that underpin "Registering the right support" and other best practice guidance. These values include choice, promotion of independence and inclusion. We saw the registered manager had implemented a learning group with people at the service. Once a week people took part in the group and studied English, Maths and reading at levels that were tailored to their abilities.

The service was located in a residential area, close to local shops, medical services, and transport and leisure facilities. This meant people had opportunities to have a role in accessing their local community. We saw two people regularly attended a local day centre. Others visited local cafes, bakery's, hairdressers and the church. 14 people visited the local library bus that came to the village once each week. People told us, "We go for walks in the village, do sports and go to the pub", "We are going on holidays in two weeks' time to the Yorkshire Dales and taking our cameras with us" and "We have treat nights every Saturday. We have crisps, shandy, beer and discos."

Staff told us the registered manager was committed to promoting a positive culture in the service that was focused on supporting people to achieve good outcomes. One told us, "We want to give residents the best possible life." Staff spoke positively about the registered manager and about the culture of the working environment at the service. One member of staff said, "The transition of the new registered manager has gone really well. [Name of registered manager] is so positive. I call it (the service) a family. It feels great here." Another said, "It's (the service) managed really well. [Name of registered manager] is really open and outright. We all talk any issues through. [Name] is so clever and always hands on if needs be. The place is full of warmth and love."

Staff attended regular staff meetings. One member of staff told us, "We have regular meetings where we talk about people's needs, any upcoming events and any concerns we may have." This provision helped to ensure that care staff were suitably supported to care for people in the right way.

Without exception, people living at Bleak House told us that they thought the service was managed well. One person told us, "We have a new boss. [Name] is the boss and she is alright. [Name] does what [Name of previous registered manager] does and that means [Name of previous registered manager] gets to spend more time with us. A healthcare professional said, "[Name of registered manager] is always very easy to get hold of. She is very supportive in reviews for people. She is organising holidays for people and activities and stimulation."

The service had systems in place for monitoring and reviewing the quality and safety of care provided. We saw that regular audits had been carried out at the home in areas such as medication, health and safety, housekeeping, people's finances, care records and bed rails.

People's views on the service were sought through meetings and the use satisfaction questionnaires. One person told us, "We have meetings with [Name of registered manager]. We talk about going to the pub and the church. [Name] asked us what colour we wanted the dining room to be, green or red." We reviewed the questionnaires conducted in January 2018 about recreation and occupation. We saw sign had been used by staff to help some people understand the questions. For example, the sign for jigsaws, computers and dusting had been used. The findings from the survey were all positive.

The registered manager worked with external organisations to promote peoples wellbeing and ensure people received good quality care. For example, they told us they were currently working with a dietician, physiotherapist and advocates to support people using the service. The speech and language therapy team (SALT) had suggested staff at the service attended a specific training course to support interaction with a person at the service. We saw three staff had completed this training. The registered manager told us, "Staff have attended the training and shared their learning amongst the staff team." Some staff had also completed communication awareness training to support the person.