

# Richmond Fellowship (The) Windsor Road

## 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

Windsor Road is a care home providing personal care to eight people aged 18 and over at the time of our inspection. The service can support up to 11 people. Accommodation is comprised of single occupancy rooms spread over two floors with lift access. There are sufficient washing and toilet facilities along with multiple shared spaces, including dining and lounge areas.

### People's experience of using this service and what we found

People told us staff were very effective at helping them stay safe. One person said, "They are there to support me along the way, but withdraw when I feel safe enough." The registered manager trained staff to enhance their knowledge and responsibility in preventing abuse or harm. They developed good systems to reduce incidents and maintain a safe environment.

The registered manager deployed good staffing levels and skill mixes to meet each person's needs. The registered manager provided a range of training sessions to upskill their workforce in the delivery of quality care. One person stated, "It's run by staff who know what they are doing."

Staff commented they had good levels of evidence-based guidance to complete medication procedures safely. People confirmed they received their medicines as prescribed.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. Care records held evidence people had discussed and signed their consent to care and treatment.

The registered manager and staff created a support programme centred on optimising people's health, nutritional needs and life skills. One person told us, "The food is great."

Staff and people interacted in highly respectful and caring relationships. One person said, "I feel I genuinely matter to them and they are always going the extra mile to make sure we are mentally well and enjoying our lives." Care records included joint goal-setting to assist individuals to move on into independent living.

People and staff consistently stated there was strong leadership, who involved them in service development. A staff member commented, "I worked here before and the difference now is astounding. They handle things and the support for service users has considerably improved. I am safe in my job and that's down to [the managers]."

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

### Rating at last inspection

The last rating for this service was good (published 09 February 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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.

# Windsor Road

## 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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

#### Inspection team

This inspection was carried out by one inspector.

#### Service and service type

Windsor Road is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 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.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We spoke about Windsor Road with the registered manager, three people and three staff. We walked around the building to carry out a visual check. We did this to ensure Windsor Road was clean, hygienic and a safe

place for people to live.

We looked at records related to the management of the service. We did this to ensure the provider had oversight of the home and they could respond to any concerns highlighted or lead Windsor Road in ongoing improvements. We checked care records of one person and looked at staffing levels, recruitment procedures and training provision.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training records.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong; Systems and processes to safeguard people from the risk of abuse

- The registered manager trained staff to enhance their knowledge and responsibility in preventing abuse or harm. Staff demonstrated a good awareness of reporting protocols. One employee said, "We have got good avenues, such as a new whistleblowing policy, so we know who we need to report to. It's structured and all available so you can't not know what to do."
- Senior staff created highly structured risk assessments to mitigate the risk of unsafe or inappropriate care. Records covered multiple hazards and guided staff about risk levels, control measures and different ways to de-escalate and prevent their occurrence.
- The registered manager developed systems, including a review of patterns and themes, to reduce incidents and maintain a safe environment. People told us they felt safe. One person stated, "They help me stay safe and I understand now how important that is to me." A second person added, "My safety is crucial, I get very anxious. The staff are great at helping me with that."
- The management team exhibited a strong desire to learn from identified concerns and improve the service. For instance, they developed a more robust pre-admission assessment process and better relationships with other organisations to prevent unsuitable placements.

### Staffing and recruitment

- The registered manager deployed good staffing levels and skill mixes to meet each person's needs. People confirmed staff were available to discuss issues and provide support when required. One person said, "There's always a staff member around if you need to talk. They have time for you here." Another person added, "There's enough staff around to keep us all safe."
- Staff commented the workforce was sufficient to provide support in a timely way. One employee told us, "I always feel there are enough staff around. The support is there when needed and the on-call system is excellent."
- The management team followed the same safe recruitment procedures we found at our last inspection. This ensured staff were suitable to work with vulnerable adults.

### Using medicines safely

- The management team created extensive risk assessments to ensure staff had clear direction to manage people's medicines safely. They showed multiple potential hazards and different methods of reducing harm. This included detailed support for individuals who self-administered medicines to prepare for discharge from the home. People confirmed they received medication correctly. One person said, "I have a lot of medication, which I don't feel safe taking myself, so they do it for me."
- Staff commented they had good levels of training and evidence-based guidance to complete related

procedures safely. One employee stated they had medication training, which helped them "to keep up-to-date and ensure I'm meeting the needs of the service and the service users."

#### Preventing and controlling infection

- Staff worked with people to promote a clean and tidy environment to reduce the potential spread of infections. They assisted each person to develop an understanding of and improve their related skills in preparation for moving to independent living. One person told us, "Staff are there to check you're ok and support you to keep your flat clean and tidy. It's helpful relearning those skills."
- The registered manager completed regular audits to check the quality of cleanliness. Staff had access to and made use of personal protective equipment, such as disposable gloves and sanitising gel.



# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- The registered manager provided a range of training sessions to upskill their workforce in the delivery of quality care. These covered, for instance, medication, safeguarding, equality and diversity, food hygiene and nutrition, environmental safety and personalised care. One person commented, "The staff are all really experienced and I am confident they are well trained."
- Staff told us their learning and development was underpinned by regular supervision. One-to-one sessions helped employees to explore their understanding of their role and responsibilities. A staff member said, "Supervision is amazing because I feel more confident and also get further advice and support with training. It's a very positive experience."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked closely with people to ensure they were fully involved in the assessment, review and continuity of their care. This included continuous assessment of treatment from before their admission onwards centred on assisting people to move on. One person stated, "In this place it's all about focusing on getting better and moving on back out into the community."
- The management team engaged with other professionals to ensure a multi-disciplinary approach to meet each person's needs and aims. People confirmed staff assisted them to access other agencies to meet their changing health needs. One person told us, "They always come with me to my appointments and explain things. I'm getting healthier all the time because I've got the right people supporting me."

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 when this is in their best interests and legally authorised under the MCA.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

- At the time of our inspection, no-one at Windsor Road had an authorised DoLS to safeguard them. The registered manager provided MCA training to enhance staff awareness and legal responsibilities. Staff were able to describe good practice in minimising restrictions on each person's life.
- People were able to move about freely and structure their daily routines. Care planning focused on assisting individuals to develop and maintain their independence. One person said, "They are around to protect you, but at the same time they don't take over and give you as much freedom as I want and need."

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

- Windsor Road housed a range of facilities designed in ways that improved people's wellbeing. This included wide open spaces and corridors to aid manoeuvrability and communal rooms to relax and socialise within. Additional group and one-to-one session rooms ensured people had privacy and space throughout their therapeutic programme.

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

- The registered manager and staff created a support programme centred on optimising people's health, nutritional needs and life skills. They had large kitchen facilities to assist each person to develop cooking skills and awareness of healthy eating. This also formed part of their care planning in preparation for independent living.
- Staff promoted a community spirit at meal times to help people feel involved, enjoy their food and socialise. They had nutritional training to underpin their understanding of supporting each person to meet their needs. One person stated, "They make sure we eat and that we eat well, like healthy diets and that. The staff also support us to cook. I've learnt I actually enjoy cooking."

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- The registered manager worked closely with people to understand, agree and plan care around their individual needs. Care records held recorded consent to treatment, as well as joint goal-setting to assist individuals to move on into independent living. Staff demonstrated a detailed awareness of each person's backgrounds and personalised approach to their support.
- People told us they were in control of their day-to-day decisions and jointly developed their care plans. One person said, "The staff sit down and talk about different strategies we can develop together to help me get better. If something doesn't work the staff are patient and help me to keep trying."

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

- The management team developed records in line with people's diverse needs, including their protected characteristics as defined in the Equalities Act 2010. For example, they checked each person's gender, such as male, female, trans, non-binary and gender fluid. They did this to assess support was continuously meeting their requirements.
- People stated staff were respectful and supported them in a dignified, personalised way. One person said, "It's not a factory here where you have to fit the programme. We all have different needs and the staff respect that. It's that expression, I'm not a number I am a person." The registered manager trained staff in equality and diversity to enhance their expertise and skills.

Respecting and promoting people's privacy, dignity and independence

- The registered manager created a treatment programme centred on each person's goals for independent living. This included bar charts to assist staff and people to gain visual oversight of their progress. One person told us, "The staff have a fantastic attitude. They keep me motivated, excited and happy to be alive. For the first time in my life I feel like I know where I'm going."
- Staff and people interacted in highly respectful and caring relationships. One person said, "Staff are very kind and supportive. They talk on my level and don't patronise you, but they also don't talk over you." People confirmed staff paid particular attention to their privacy and dignity.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The management team worked closely with each person to create detailed care plans and assess treatment responsive to their needs. People consistently told us their lives had improved as a direct result of the support they received. One person said, "I feel better already. I can see a future. We're always talking about my care plan and trying different things to see what works."
- Staff recorded people's choices and life decisions throughout their placement at the home. This helped them to understand each person's backgrounds and reflect changes as they moved on to independent living. One person stated, "If it were not for them I would not feel like I am now, ready to get on with my life and confident that I will succeed. I cannot thank them enough."
- The management team had developed an extensive activity programme throughout the day to enhance people's mental and social health. One person told us, "There's loads to do. We have film nights, parties and lots of groups to develop as people." A display board outlined activities for each day, such as budgeting and mental wellbeing groupwork and guided meditation.
- The provider supported a person to train as a mentor to help people during their admission. They said, "[The registered manager] has asked me to come back [after discharge] to run a support group. I am really excited about my future." Additionally, staff provided information about external fun and support activities to assist people to engage within the local community.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager checked people's communication needs and related support. They installed computer equipment and large projector screens to assist people with their educational and social needs. One person commented, "I'm really into computers, so they make sure I have access to the equipment I need." The systems gave people access to the 'Big White Wall,' an online application providing extra, anonymous support for people with mental health conditions.

Improving care quality in response to complaints or concerns

- The registered manager had good systems to enable people to understand how to raise concerns. They displayed information publicly that showed their procedures and how they would manage complaints. People had not raised any formal concerns over the last 12 months, but confirmed they felt staff were approachable and listened to them.

#### End of life care and support

- The provider worked with younger adults and did not support people at the end of their lives. However, staff had documented each person's religious requirements and had an understanding of procedures to follow should this need begin to arise.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has now remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Continuous learning and improving care

- The registered manager fostered a culture of strong team bonds in their cohesive approach to people's care. During our inspection, they held a planned team-building day, run biannually, to help staff form trusting relationships with each other. They empowered people by involving them in this, which they said helped them to enhance their communication and skills.
- The provider monitored quality assurance and was keen to learn from identified concerns to improve the service. For example, they enhanced their admission procedures to reduce the risk of failed placements. A staff member told us, "Whenever there's a situation, no matter how small, it is managed incredibly well. We get together and have a few debrief sessions."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The workforce was clear about their role, responsibilities and accountability. An employee stated, "It's a new team and it's been really good to build our team together. We're gelling really well." The registered manager also assisted people to develop an understanding of staff roles.
- The management team completed a wide range of audits to assess everyone's safety and welfare. These covered, for instance, maintenance, safeguarding, infection control and fire safety. They assured us they would address any identified concerns to maintain people's wellbeing.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager sought people's feedback, through meetings and satisfaction surveys, to assess ongoing service development. Responses from sampled questionnaires showed positive experiences of care delivery. Comments seen included, 'Friendly, elated, love activities and staff accepting me and all my phobias' and, 'I feel safer since using this service.'
- People told us the registered manager was visible and accessible. One person commented, "[The registered manager] really understands how to run this place, but also hasn't lost touch with how to be kind and caring towards us." Another person added, "He's a nice man and makes us feel important to him and understands what we need."

#### Working in partnership with others

- The management team worked closely with other services to enhance people's lives. This included health and social care agencies, as well as a managers' forum, to share good practice and improve care delivery.
- The registered manager recently engaged with the local police and held regular meetings to develop strong relationships. They provided training to assist police awareness of mental health and substance misuse. They explained, "It's helped us understand what incidents would require us to engage with them and helped the residents have a better understanding of their roles."