

# Croftlands Trust

# Carranmore

## Inspection report

218 Warwick Road  
Carlisle  
Cumbria  
CA1 1LH

Tel: 01228514180

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## Ratings

Overall rating for this service	Good ●
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Is the service safe?	<b>Requires Improvement</b> ●
Is the service effective?	<b>Good</b> ●
Is the service caring?	<b>Good</b> ●
Is the service responsive?	<b>Good</b> ●
Is the service well-led?	<b>Good</b> ●

# Summary of findings

## Overall summary

This unannounced inspection took place on 13 November 2015. We last inspected Carranmore in July 2014. At that inspection we found the service was meeting the five regulations that we assessed.

Carranmore is a residential home that provides support for up to six people with mental health issues. The provider, the Croftlands Trust is a local charitable organisation which provides support for people in a number of residential homes and in the community.

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.

The service carried out risk assessments in order to keep the people who used the service safe during times of crisis. These assessments were not sufficiently detailed or robust. We made a recommendation about this.

Some areas of the home required refurbishment and were difficult to keep clean. We made a recommendation about this.

The service had sufficient appropriately recruited staff available to support people.

As part of their recruitment process the service carried out appropriate background checks on new staff.

Staff were aware of how to identify and report abuse.

All staff received regular supervision and appraisal.

People who needed support with nutrition and hydration received it.

People told us that staff were caring and treated them with dignity and respect.

There was a quality assurance system in place at the service.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

**Requires Improvement** 

The service was not always safe.

Risk assessments were not robust. We made a recommendation about this.

Some areas of the home were in need of refurbishment and difficult to clean. We made a recommendation about this.

There were sufficient staff to provide support to people.

### Is the service effective?

**Good** 

The service was effective.

Staff had completed their mandatory training.

The service worked in conjunction with other health and social care providers.

People received adequate support with nutrition where necessary.

### Is the service caring?

**Good** 

The service was caring.

People told us that staff were caring.

People told us that staff treated them with dignity and respect.

There were plans and procedures in place to ensure that people's privacy was protected.

### Is the service responsive?

**Good** 

The service was responsive.

Care plans were written in a clear and concise way so that they were easily understood.

People were able to raise issues with the service in a number of

ways including formally via a complaints process.

People were supported to access the local community in a variety of ways.

**Is the service well-led?**

**Good** ●

The service was well led.

The registered manager was involved in an overall re-structure of the service and was developing ideas as to how Carranmore would operate in the future.

Staff told us they felt supported by their manager.

There was a quality assurance system in use.

# Carranmore

## **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 the 13 November and was unannounced.

The inspection was carried out by an adult social care inspector.

Before the visit 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 planned the inspection using this information.

We spoke with two of the people who used the service. We also spoke with two staff including the registered manager and the project lead.

We looked at three records of written care and other policies and records that related to the service. We looked at two staff files which included supervision, appraisal and induction. We saw a record of training and a training plan. We looked at quality monitoring documents.

# Is the service safe?

## Our findings

We spoke with people who used the service and asked them if they felt safe at Carranmore. Everyone we spoke with agreed that they did.

We saw that each individual who used the service had assessments in place that identified risks that they faced and planned ways to reduce them. For example people had plans in place that outlined what to do if their mental health deteriorated. Although all the people who used the service had plans in place we noted the plans did not contain sufficient up to date information to ensure that staff were aware of how best to support people in times of crisis.

We recommend the service review all its crisis and contingency plans to ensure that they are sufficiently robust.

We looked at how the home managed cleanliness and hygiene. We saw that the home had cleaning rotas in place for the staff and a cleaner was employed on a part time basis to carry out deep cleans of areas that required this. The people who used the service were encouraged and supported to keep the home clean as part of their rehabilitation and recovery. However we noted that some parts of the kitchen were worn to the point that they were impossible to keep clean and therefore infection free.

We recommend that the service replace any fixtures or fittings that they deem inappropriate in terms of infection control.

During our inspection we looked at the duty rota. We saw that there was a minimum of one member of staff on at all times, this included at night. We looked at people's care needs and saw that one member of staff was sufficient to support people if no crisis occurred.

We spoke with the project lead and asked how they ensured there were sufficient staff to meet people's needs in times of crisis or when people required additional support. They explained that staffing levels were based on people's needs and if those needs changed staffing levels could be increased by offering extra hours to staff within the service or 'borrowing' staff from other Croftland Trust services

We spoke with staff and asked how people were protected from bullying, harassment and avoidable harm. Staff explained that they had all had training that ensured they were able to protect vulnerable people from abuse. Staff were able to tell us what kinds of abuse there were and how they would raise concerns about them. If staff were concerned about the actions of a colleague there was a whistleblowing policy. The policy gave clear guidance as to how to raise concerns. This meant that staff could quickly and confidentially highlight any issues they had with the practice of others.

We reviewed recruitment procedures in the service. The service provided assurances that all candidates for jobs completed an application form and underwent a formal interview with senior staff present. If they were successful criminal records checks were carried out and references sought. We saw staff records that

confirmed this.

We looked at how the service managed medicines. We saw that there were systems in place to ensure that medicines were stored safely, ordered correctly and disposed of properly. The service was aware on the different levels of support that people required and their medicine support plans correctly reflected this.

# Is the service effective?

## Our findings

We spoke with people who used the service and asked if they thought the staff knew how to support them properly. One person said, "Yes I think so."

We spoke with staff and asked them if they felt well supported and correctly trained. All staff told us that they were supported by the provider. The staff told us that they had recently received training around supporting people who abused alcohol.

We looked at staff training records. We saw staff had completed their mandatory training and had attended additional courses.

We looked at supervision and appraisal records for staff. We saw that the registered manager and the project lead were ensuring that supervision and appraisal were carried out as per the provider's policy.

We examined how the service supported people to make their own decisions. People we spoke with lived as independently as possible at Carranmore. We saw that the service supported people in making their own decisions whilst encouraging them to move forward with their recovery.

We spoke with people who used the service and asked if they were satisfied with the nutritional support they received. People told us, "They have good square meals here." And, "I think the food is better than where I previously lived"

We looked at how staff supported people to take adequate nutrition and hydration. We saw that staff and the people who used the service often cooked together. This helped equip people with new skills to help them live more independently. The service regularly monitored people's weights to ensure they were not at risk of malnutrition.

We saw from the written records that the service regularly involved other health and social care professionals in people's care. This included members of the local community mental health team as well as specialists in counselling and substance misuse.

The Care Quality Commission monitors the operation of the Deprivation of Liberty Safeguards (DoLS) which applies to care homes. DoLS are part of the Mental Capacity Act 2005 (MCA) legislation which is designed to ensure that any decisions are made in people's best interests. At the time of our inspection no one who used the service had their liberty restricted under the MCA.



## Is the service caring?

### Our findings

We spoke with people who used the service and asked them if they thought the service provided good care. One person told us, "Yes, I think so." Then added, "They help with day to day stuff." Another person who used the service said, "Yes they are nice."

We observed staff supporting people in a kind and caring way. Staff told us they knew the people who used the service well and were often able to anticipate their need.

Staff worked hard to build positive caring relationships with people. There was a key worker system in place that ensured that people were able to safely disclose personal information about themselves to an identified member of staff. This meant that people did not have to repeat sensitive, or difficult to discuss, information to multiple members of staff.

We saw that people were encouraged to express their views about their care as part of the recovery process. Staff used this information to ensure that people were supported in a manner of their choosing.

The service ensured that people lived as independently as possible. People were encouraged to do things for themselves as part of their recovery and their support plans reflected this.

People told us that staff respected their rights to privacy and dignity. We observed staff ensuring that they knocked on people's doors before entering and spoke with people in a respectful manner.

We noted that the service had robust policies that referred to upholding people's privacy and dignity. These policies were linked with staff training and referred to in the staff handbook. In addition the service had policies in place relating to equality and diversity, this helped to ensure people were not discriminated against.

## Is the service responsive?

### Our findings

We asked people if they knew how to raise concerns about the service they received. People told us that they felt comfortable telling someone if they were unhappy about anything at Carranmore.

The service had a formal complaints policy and procedure. The procedure outlined what a person should expect if they made a complaint. There were clear guidelines as to how long it should take the service to respond to and resolve a complaint. The policy mentioned the use of advocates to help support people who found the process of making a complaint difficult. There was also a procedure to follow if the complainant was not satisfied with the outcome.

At the time of our inspection the service had no outstanding formal complaints. The registered manager explained that wherever possible they would attempt to resolve complaints informally.

We looked at the written records of care for people who used the service. We saw evidence that indicated the service had carried out assessments to establish people's needs. People were assessed as to whether they needed support in all aspects of their life. The service used a recovery based model of care in which people were asked about their aspirations for the future.

We spoke with one person who had a support plan in place to ensure that they were able to access the community easily and safely. They told us, "I'm getting up town."

We looked at the standard of care plans in the service. We found that they were subject to a review by the registered manager who was keen to ensure that they were all clear and straightforward. In addition the service was starting to use an electronic system. We found evidence that the service was formulating clear and concise care plans that were easy to understand. Staff had written daily notes that corresponded with people's plans of care.

People who used the service had access to their care plans. Reviews of care plans were carried out regularly and involved the person receiving support. Their relatives and other health and social care professionals were invited to these reviews.

## Is the service well-led?

### Our findings

When we spoke with people who used the service they did not raise any issues to how the service was led.

The registered manager of this service had been in position for a short period. We found evidence to indicate that they were assessing the service and ensuring that it met the needs of the people who lived in the home. We noted that they were working alongside staff on a regular basis which gave them first-hand experience as to how their staff worked with people.

The registered manager told us that the Croftlands Trust were carrying out a review of all their services to ensure they all were suitable for purpose. They went on to tell us that they were confident that Carranmore would continue to provide a service to people who required intensive support during their recovery.

The project lead told us they enjoyed working with the registered manager and were confident that staff were receiving good leadership and support. We saw there was a clear management structure in place for this service. The manager reported to an area manager who visited the service monthly and was in regular telephone contact.

We saw evidence that questionnaires were sent to people who used the service. They were designed to ascertain whether people were satisfied with the service they received. The returned questionnaires were analysed and action plans created.

Audits and checks were undertaken regularly. These included paperwork audits, training audit and spot checks on the staff's performance. The outcomes of audits were analysed by the manager of the service who then used them to improve the way the service was run.

The provider measured the quality of the service by using key performance indicators (KPI). For example the manager regularly reported how many people had progressed through the service successfully. This information was discussed by the senior management team at board level. This meant that the provider was aware of the quality of service being provided at Carranmore.