

Belgravia Care Home Limited

Clarence House

Inspection report

1 St. Thomas Road
Lytham St. Annes
FY8 1JL

Tel: 01253728885

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12 March 2021

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Good ●
Is the service well-led?	Good ●



Summary of findings

Overall summary

About the service

Clarence House is registered to provide care for up to 20 older people or people living with dementia. It is a detached home in Lytham St Annes. Bedrooms are situated on all floors and are all en-suite. There is a choice of communal lounges and seating areas. There are gardens and parking. At the time of our inspection 15 people lived at Clarence House.

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

People were safe and cared for. There were enough staff to meet people's care and support needs. Staff interacted with people in a friendly and respectful way. One person told us, "They [staff] really love me. I can ask for help and know they are there for me." Staff knew how to keep people safe from the risk of abuse and who to contact if they suspected people were being harmed. Staff assessed and helped people manage avoidable risks. They supported people with their medicines according to national guidelines.

The home was clean and hygienic. This reduced the risk of infection outbreaks. The infection prevention and control policy was up to date. Staff followed infection control guidance and encouraged people to do the same. The building was maintained, and equipment serviced as required. Actions had been or were being taken on any defects or improvements recommended.

People said staff involved them in decisions about the home such as, meals, routines, leisure and social events. The registered manager had a thorough recruitment system and monitored the service to check on the quality and to make sure staff were providing good care. They understood and acted on legal obligations, including conditions of CQC registration and those of other organisations. They worked in partnership with other services and organisations to keep people safe and improve their well-being.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Why we inspected

This was a planned inspection as the home had not received an inspection since registration. This service was registered with us on 22 November 2019 and this was the first inspection. The home has not yet received a comprehensive inspection and therefore has not received an overall rating.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

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 well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Clarence House

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 safe and well led domains but did not provide an overall rating for the service under the Care Act 2014.

This is the first inspection of this service. As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by two inspectors.

Service and service type

Clarence House 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 announced shortly before the inspection visit to make sure we could speak with the registered manager.

What we did before the inspection

We reviewed information we had received about the service since registration. This included notifications we had received from the provider, about incidents that affected the health, safety and welfare of people supported by the service. We sought feedback from professionals who worked with the service, including

Blackpool local authority. We used this information to plan our inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with five people who lived at Clarence House about their experience of the care provided. We also spoke with the registered manager and three care staff. We reviewed a range of records. This included two people's care records. We looked at quality audits, staff rotas and two staff recruitment records. We also looked at a variety of management records. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead in ongoing improvements. We walked around the building to check the home was clean, hygienic and a safe place for people to live.

After the inspection

We continued to seek clarification from the provider to validate evidence. We looked at COVID-19 information and management records.

Is the service safe?

Our findings

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

This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Assessing risk, safety monitoring and management

- Staff kept people safe and protected them from avoidable harm. They knew people and their care and support needs and made sure these were met. They assessed and acted to reduce risks to make sure people were safe from unnecessary hazards. People said they were content and felt safe and cared for. One person said, "It's lovely here, the girls are grand. I'm glad I came if you need help, they just come and help you." Another person told us, "I feel safe here. There is always someone about if I need anything."
- Staff knew what to do if they felt someone was being harmed or abused and who to contact if they suspected people were at risk. The management team had contingency plans to support people in emergency or unexpected situations.
- The registered manager had managed risk through effective procedures and practice. One person said, "They know what they are doing." Staff interactions with people were friendly and patient with staff providing prompt and considerate care. Comments included, "They [staff] really love me. I can ask for help and know they are there for me." And, "They are very loving here." Staff members comments included, "You miss the residents when you are not here." And, "This is their home and we have to remember we work in their home."
- The building was maintained, and equipment serviced as required. Actions had been or were being taken on any defects or improvements recommended.

Preventing and controlling infection

- Staff were trained and followed safe infection control practices. This protected people supported, staff and visitors from potential infection. The home was clean and hygienic throughout and people told us staff made sure the home was always clean and fresh.
- Staff said the infection control training and support from the registered manager and provider had made them confident in caring safely during the pandemic. The infection prevention and control policy was up to date. Staff followed this correctly and used PPE effectively and safely. One person said, "The staff wear PPE and I understand why they have to." There was easily accessible PPE, hand washing and sanitising facilities throughout the building, which helped reduce infection risks. Staff and people supported were accessing testing and vaccinations which helped reduce the risk of infection.

Using medicines safely; Staffing and recruitment; Learning lessons when things go wrong

- Staff managed medicines safely, as prescribed and in line with good practice guidance. Staff were trained in medicines management. Medicine records were completed accurately, and medicines stored securely.
- Staff recruitment was thorough and reduced the risk of appointing unsuitable staff. The registered manager had made recruitment checks before any new staff member could work at the home.
- Staff reported and documented any accidents, incidents and near misses. The registered manager

reviewed, reflected with staff and took action where needed. This reduced the risks of similar incidents.

- The registered manager reported any issues to the relevant external agencies.

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.

This key question has been rated Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The management team had a clear staffing structure and lines of responsibility and accountability which people understood. They planned and delivered effective, safe and appropriate person-centred care.
- The provider and registered manager had systems to check people had good care and were supported as they should be. They carried out audits on the quality of the service. If shortfalls were found, they promptly made improvements. They met frequently about the management of the home.
- The registered manager followed current and relevant legislation along with best practice guidelines. This helped them keep people safe and to meet their diverse needs. They understood legal obligations, including conditions of CQC registration and those of other organisations.

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

- The registered manager was open and transparent. They were passionate about providing a good standard of care and making sure all staff did so. They sought people's views in a variety of ways. They routinely talked with people and their relatives in meetings, surveys or on a one to one basis about how they wanted their care provided and any changes they would like.
- People were complimentary about the registered manager. One person said, "[The registered manager is lovely. She is the boss of us all." Another person told us, "[The registered manager] is very kind and makes sure we are all alright."
- Staff said the registered manager was familiar with people's care and support needs and made sure these were well met. They told us they also felt supported by the registered manager. They said they were willing to listen to ideas and suggestions and were caring and supportive. Comments included, "It is a really well-run home. [The registered manager] is very organised." And, "[The registered manager] will always listen to me." And, "[The registered manager] is a really good boss. She cares about residents and staff."
- The registered manager and provider met their responsibilities to apologise to people and/or their relatives when mistakes were made and act on their duty of candour. They told us there had been no recent events that had required such a response.

Continuous learning and improving care; Working in partnership with others

- The manager had checked staff learning needs and updated training. They had carried out supervisions and team meetings to assist in providing good outcomes for people.

- The management team looked at current legislation, standards and evidence-based guidance. They evaluated any accidents and incidents to see if lessons could be learnt and to reduce risks of similar events.
- The manager worked with and fostered relationships with partner agencies to keep people safe and improve their well-being. They had developed links within the local community, although many of these were on hold because of the restrictions in relation to the COVID-19.