

The Blackpool Fylde and Wyre Society for the Blind

Princess Alexandra Home For The Blind

Inspection report

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11 January 2024

12 January 2024

15 January 2024

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Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Princess Alexandra Home for the Blind is a residential care home providing accommodation for persons who require nursing or personal care to up to 40 people. The service provides support to older people who may have a sensory impairment or learning disabilities or autistic spectrum disorder. At the time of our inspection there were 32 people using the service.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support:

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. When people lacked capacity to make specific decisions, we found the service was following the best interest's principle. Relevant authorisations had been granted where people's liberties were deprived.

People's needs were assessed, and care plans were developed to promote positive risk taking. People's bedrooms and decor was personalised and reflected their personalities, showing their choices and decisions had been respected. Staff had been employed following robust recruitment procedures and were trained in the safe storage and administration of medicines. Staff were knowledgeable on what actions to take should they witness any safeguarding concerns or hear any allegations of abuse.

Right Care:

The service had enough staff to meet people's needs and keep them safe. Staff knew the people they were supporting well, including their health and wellbeing needs. Staff were trained and skilled to offer support and guidance to quickly lessen or minimise people's distress. Staff and visitors had access to protective personal equipment to limit the risk of infection.

Right Culture:

People and staff told us they could raise concerns with managers and feel safe and supported. People were comfortable and relaxed in the company of staff. People and staff had a friendly rapport and people had a positive relationship with the management team. The provider carried out regular audits and could evidence lessons were learnt when things went wrong. The management team worked alongside staff to

keep people safe.

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

Rating at last inspection: The last rating for this service was good (published 28 January 2019).

Why we inspected

We received concerns in relation to the management of risk and personal care. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained the same based on the findings of this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'All inspection reports and timeline' link for Princess Alexandra Home for the Blind on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 •
Is the service well-led? The service was well-led.	Good •



Princess Alexandra Home For The Blind

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 Health and Social Care Act 2008.

Inspection team

One inspector, 1 regulatory co-ordinator and 1 Expert by Experience carried out the inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Princess Alexandra Home for the Blind is a 'care home' without nursing. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there were 2 registered managers in post.

Notice of inspection

This inspection was unannounced on the first day. The other 2 days we looked at care records off site.

Inspection activity started on 11 January 2024 and ended on 15 January 2024. We visited the location's office/service on 11 January 2024.

What we did before the 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.

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, professionals who work with the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

During the inspection

We spoke with 8 people who lived at the home and 2 relatives and 1 person's friend about their experience of the care provided. We spoke with 13 members of staff including the chief executive officer, 2 registered managers, 2 deputy managers, and 3 carers. We spoke with 2 cooks, 2 housekeeping staff, the maintenance person and 1 visiting health professionals. We had a walk around the home to make sure it was homely, suitable and safe. We observed the care and support people received. This helped us understand the experience of people who could not talk with us.

We reviewed a range of records. This included 6 people's care records and multiple medication records. We looked at 4 staff files in relation to recruitment and a variety of records relating to the management of the service, including policies and procedures were reviewed.



Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The registered managers had systems to record, report and analyse any allegations of abuse. Staff had received training to recognise abuse and knew what action to take to keep people safe, including reporting any allegations to external agencies. One staff member told us, "It's a good place to work. I enjoy making sure people are secure and happy."
- People told us they felt safe living at Princess Alexandra Home for the Blind. One person told us, "Yes, I am well looked after." A relative said, "[Family member] is 100% safe."

Assessing risk, safety monitoring and management

- Risks to people had been identified and reviewed. The provider and staff knew how to provide care and treatment in a safe way.
- Each person had a personal emergency evacuation plan [PEEP]. A PEEP is a plan for a person who may need help, for instance, to evacuate a building or reach a place of safety in the event of an emergency.

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

• We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

• Systems were in place to ensure staff were recruited safely. Records confirmed a range of checks including references, disclosure and barring checks (DBS) had been requested and obtained prior to new staff starting work in the service. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. However, not all records held a full employment history. The provider made changes to ensure processes were in place to promote robust recruitment practices in the future.

• The provider had ensured appropriate staffing arrangements were in place to meet everyone's needs. One person told us, "There seems to be enough staff, they are all very caring." Everyone spoken with said if they wanted to do anything the staff will go out of their way to help them.

Using medicines safely

- Medicines were managed safely and properly. Medicines were stored safely and the stock we looked at matched the stock levels recorded.
- People received their medicines safely. We observed medicines administration and found staff were trained and followed best practice. One person told us, "They are always on the ball [with medicines]." A relative commented, "[Family member] needs [ongoing medical support]; they have sorted everything out."

Preventing and controlling infection

- We were assured the provider had enough staff to ensure the home was clean. One person told us, "The cleaners are very thorough, they come in twice a day." One relative said, "I am very impressed; the home always looks clean."
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.

Visiting in care homes

The registered managers supported visits for people following government guidance. This meant people could have relatives and friends visit at any time. One person told us, "They can come whenever they want." One relative said, "I can visit whenever I want 24/7, no problem."

Learning lessons when things go wrong

• Accidents and incidents were recorded and reviewed by the management team to identify any learning which may help to prevent a reoccurrence. This information was then shared with the local authority.



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 our last inspection we rated this key question good. The rating for this key question has remained good. 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

- Management and staff were committed to delivering a person-centred service which achieved positive outcomes for people. They were knowledgeable and respectful of people's needs and preferences.
- Feedback from people was overwhelmingly positive, and included, "They [staff] are marvellous," "They are very kind and caring."
- Feedback from relatives was overwhelmingly positive, and included, "The staff have looked after me as much as my mum; they are so caring," and, "I phone every day to talk to [family member]. I phone the office and they take the phone to him so we can speak. We only speak for about ten minutes, but they are very good that way."
- Feedback from staff was positive, and included, "I love it! It's one of the best homes I've worked in," and, "I love the staff and residents. They're like family."

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 managers and provider understood their responsibilities to keep us informed of events which may affect people and the care delivery.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care;

- The provider had set up systems to check the quality of the service. The management team carried out audits and checked the standards and quality of the service.
- There was a clear management structure with easily identifiable lead roles. People and relatives spoke positively about the way the service was managed and the registered managers' leadership styles. One person told us, "Superb [leadership], as far as I am concerned."

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

- People and families felt involved in their care and development of the service at Princess Alexandra Home for the Blind. They were able to give their views about the service through questionnaires and regular formal and informal meetings. We saw suggestions made by people in meetings had been implemented into the home.
- The management team held daily staff meetings for the exchanging of views and ideas.

• Staff told us they were comfortable raising any issues or concerns and confirmed the management team were open to feedback. One staff member told us, "Yes, feel able to raise concerns with the managers. They are very approachable."

Working in partnership with others;

• Records highlighted advice and guidance was sought from health and social care professionals when required. This helped to ensure people's needs continued to be met and their wellbeing enhanced. Feedback from one health professional included, "They have a diverse population here and they cater for all their needs. They are brilliant."