

CPM Care Limited

Breck Lodge Care Home

Inspection report

78-80 Breck Road
Poulton Le Fylde
Lancashire
FY6 7HT

Tel: 01253894567

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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

Breck Lodge is a residential care home providing personal care to 14 people aged 65 and over at the time of our inspection. The service can support up to 15 people. Breck Lodge provides single accommodation and communal areas for people's comfort, such as lounges, a dining room and an extensive rear garden.

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

People told us they felt safe living at Breck Lodge. One person commented, "Yes, I am very safe here." The management team regularly assessed staffing levels were sufficient to meet people's complex needs in a timely way. They checked procedures and records continued to ensure each person received their medicines safely. The registered manager completed risk assessments to guide staff to protect people from abuse, harm or inappropriate care.

People said they were provided with nourishing food and offered a choice of meals. One person stated, "It's very good food here." Staff recorded each person's progress and completed timely referral to other services to optimise their health. The management team had a programme of training to ensure a skilled workforce supported people effectively. One person confirmed, "The staff are experts, all of them, in what they do."

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice. People said staff discussed their care and sought their consent before assisting them.

The management team and staff put into practice their philosophy of optimising each person's dignity in all aspects of care delivery. One person told us, "The staff have a lovely attitude. They are very friendly, wonderful really." The registered manager completed assessments of each person's needs with them and jointly devised care plans to ensure care was person-centred.

Everyone we spoke with stated the home had strong, supportive leadership. One person said, "The managers are amazing. I like that they work as a team and I have a really good relationship with them." The management team monitored quality assurance to retain people's safety.

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 07 April 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.

Breck Lodge Care Home

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

Breck Lodge 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 home since the last inspection. We sought feedback from the local authority and professionals who work with Breck Lodge. 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 walked around the building to visually check Breck Lodge was clean, hygienic and a safe place for people to live. We spoke about the home with four people, the providers, registered manager and five staff.

We looked at records related to the management of the service. We did this to ensure the management team had oversight of the service, responded to any concerns and led Breck Lodge in ongoing improvements. We checked care records of people who used the service 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 their staff training matrix.

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.

Staffing and recruitment

- The management team regularly assessed staffing levels were sufficient to meet people's complex needs in a timely way. Staff were patient and unhurried in their duties. People and staff told us staffing ratios and skill mixes were adequate. One person said, "Oh yes, there are lots of staff on duty, the owners don't scrimp on that. It means I never have to wait long for them to help."
- The registered manager used the same, safe recruitment procedures we found at our last inspection. Staff confirmed they did not commence in post before required checks were obtained.

Using medicines safely

- The management team monitored and assessed procedures and records continued to ensure each person received their medicines safely. People stated they had their medicines on time and when they required them. One person commented, "The staff give me my tablets. I really appreciate that because I feel much safer. It's all about trust and I certainly have that here."
- Staff confirmed they had training and felt confident to administer people's medicines. They were patient and explained to each person the purpose of their medication. Staff completed care plans and followed correct recordkeeping, such as documenting when people refused their medicines.

Preventing and controlling infection

- Breck Lodge was clean and tidy throughout and staff had access to and used sufficient personal protective equipment, including disposable gloves and aprons. One person told us, "The staff are constantly cleaning and tidying up." The management team regularly audited the environment to check procedures mitigated the risk of infection.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The registered manager completed risk assessments to guide staff to protect people from an unsafe environment and inappropriate care. One person explained staff discussed possible hazards with them and developed plans to protect everyone. They added, "It's great, I feel like they understand how to keep me safe and that this is important to them as well."
- The management team had good oversight of incidents, including remedial actions to limit risk. Staff logged accidents and, if necessary, made timely referral to other agencies to retain people's safety. The registered manager assessed any patterns to check control measures were effective.
- These processes formed part of the management team's review of possible lessons learnt. For instance, the provider noted staff were becoming more risk averse with people who were more independent. Consequently, they developed systems to better guide staff to support each person to make risky decisions safely.

Systems and processes to safeguard people from the risk of abuse

- The provider ensured staff had relevant training to protect people from harm, abuse or unsafe care. Staff had a good understanding of relevant procedures, including agencies to report poor practice. One staff member explained, "I wouldn't hesitate to report any concerns straight away."
- People expressed they felt safe at Breck Lodge. One person said, "They don't stop you doing things, but they advise you about how to stay safe. The staff are there to protect you." Another person added, "Here I am safe because I am monitored and checked that everything is ok."

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.

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

- The registered manager completed care plans and risk assessments to guide staff about people's nutritional needs and prevent the risk of malnutrition. Staff effectively monitored people's weight, food and fluid intake to ensure good health was maintained. One person said, "They keep an eye on my weight to make sure I am eating well."
- People and their relatives told us they were provided with nourishing food and offered a choice of meals. One person commented, "The meals are fantastic and we can have what we want to eat." Another person added, "I love the meals because it's all well cooked and wholesome."

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

- The registered manager assessed people's needs and created care plans with them to guide staff to maintain their continuity of care. Staff recorded each person's progress and completed timely referral to other services to optimise their health. An employee said, "Any concerns we can't deal with we get in touch with the GP immediately, who we have a good relationship with."
- People confirmed staff assessed their needs and worked in a multi-disciplinary approach to maintain healthy lifestyles. One person explained, "When I've not been well the staff have got in touch with the doctor straight away when they have not been able to help me get better."

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

- The provider ensured Breck Lodge had wide communal areas and corridors to help people with a physical disability. They provided staff with equipment to assist individuals safely. This included supporting people to use computing equipment in their approach to help those who lived with dementia. One person stated, "This technology is amazing. I have a video call with my [relative] every week. It's fantastic that I get to see her and chat even though she is so far away."

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 Breck Lodge had an authorised DoLS to safeguard them. The registered manager provided staff with relevant training, such as the MCA and dementia awareness, to enhance their skills. One employee explained, "Even when someone has no capacity it is still their right to make decisions. My job is to ensure I always respect that and help them to understand the risks involved."
- People told us staff discussed their care and consistently sought their consent before assisting them. One person stated, "Oh my goodness, they would never come in here to do something without my permission. If I say no, they understand that means no." Another person added, "Staff understand how me having control and making decisions are vital to my independence."

Staff support: induction, training, skills and experience

- The management team had a programme of training from staff induction to ongoing refresher courses to ensure a skilled workforce supported people effectively. Sessions included health and safety, falls, infection control and environmental safety. A staff member said, "My experience and learning has come on leaps and bounds because the training we get is brilliant."
- People verified staff were well-trained and confident in their roles. One person commented, "Without a doubt, all the staff are very experienced and trained. They are definitely skilled at their jobs."

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 engaged with staff, people and relatives to develop care plans focused on the person's wishes and preferred method of support. One person said, "I am absolutely involved in my care plan. Right from the start we sat down and talked about what's important to me." Care records evidenced people were supported to make their own decisions and guided staff to deliver care with a personalised approach.

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

- The registered manager trained staff in equality and diversity and created an ethos centred on respecting people's individuality. Staff had an in-depth awareness of each person, their care plans and how they wished to be assisted. A staff member told us, "Care is not like it used to be, thank goodness. Now, it's about personalisation and respecting the residents as individuals."
- People confirmed staff were compassionate and had regard for their uniqueness and human rights. One person stated, "The staff really get how important our rights are. The word is respect, most importantly for me and the other residents as people who are all different." Another person added, "[The registered manager] explained their priority is to respect you as an individual who has a different personality to the other residents. I am very much treated that way here."

Respecting and promoting people's privacy, dignity and independence

- The management team and staff put into practice their philosophy of optimising each person's dignity in all aspects of care delivery. Care plans detailed ways of achieving people's goals, aims and independence. A staff member explained, "Dignity is often about the simple day-to-day things, like knocking on the person's door and making sure we are always polite and respectful."
- People confirmed staff consistently displayed a kind, caring attitude. One person said, "Being in a home requires two-way patience and respect. Both of these are there at all times." Another person added, "Oh, without a doubt, the staff have a lovely attitude. They really care about us."

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 registered manager completed assessments of each person's needs with them and jointly devised care plans to ensure care was person-centred. People told us they were involved in the update of their care to ensure this met their changing needs. One person stated, "My goodness, they really have been responsive in their support. I am so much better and happier here."
- Staff worked with people to attain the best outcomes, whilst respecting their wishes. One person explained they wanted to buy a car to drive again and added the registered manager went above and beyond to achieve this. They said, "I appreciate they have a responsibility to look after me, especially with my dementia, but my freedom only happened because they believed and trusted in me enough to make it happen. I will always be grateful for that."
- The management team provided a range of stimulating activities to enhance people's social needs. This included entertainers, reminiscence therapy, movie afternoon, pamper sessions, bingo, crafts, music sessions and trips out. One person commented, "Yes, I'm very happy here. I have a lot of fun with the staff, which keeps me going. They do lot to keep us occupied."

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 told us they checked people's communication needs to support those with a disability, impairment or sensory loss. One person who lived with sensory loss stated staff obtained audio books and computer equipment that, for example, told them the time. They felt this was an important lifeline and added, "I can't read so well, but I have my story books."

End of life care and support

- The management team documented each person's wishes and advanced directives to ensure end of life care was personalised to their needs. A written comment explained, 'Thank you for the outstanding care you gave to [my relative] ... also for the kindness and support we were given in the last few days of [relative's] life.' A staff member had the designated role of end of life champion. They obtained and shared good practice guidance with the rest of the team.

Improving care quality in response to complaints or concerns

- The registered manager displayed an overview of their complaints procedure to assist people and their

relatives to raise concerns. This included steps to follow and contact details of CQC and the Local Government Ombudsman. People told us they understood the process, but did not have any issues to raise. One person commented, "I have never felt the need to complain because everything is perfect. If I did, however, I trust they would deal with it straight away."

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

- The management team and staff delivered care that empowered people to maintain their self-reliance. For example, one person told us the registered manager went above and beyond to maintain their freedom and enable them to drive again. They also explained the provider was considering building semi-independent flats. They added, "It's only at the pre-planning stage, but I am really chuffed I am involved in the early discussions in recognition of my life experiences."
- The registered manager provided annual questionnaires to gain people's feedback about the service. Surveys we sampled were positive about their experiences. Comments seen included, 'Thank you for your kind thoughtfulness' and, 'I was very grateful for a welcome coffee when I arrived and lunch was a lovely bonus.' Also, 'My [relative] is very happy here. He has always said how well he is looked after and how kind the girls are.'

Working in partnership with others

- The registered manager worked closely with other services to gain and share good practice and current guidance. For instance, they accessed the local authority champion role forums, such as for infection control and safeguarding. They also engaged with the care home support team in a scheme to enhance end of life care through planned admission and support. Staff said these practices developed their skills and experiences.

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

- The management team monitored quality assurance through a range of audits to retain everyone's welfare. These included checks of care files, medication, environmental safety and equipment. We found the registered manager addressed identified issues in a timely way.
- Staff told us the home had strong, supportive leadership. One employee said, "[The providers] are very supportive and valuing of me." Another staff member added, "[The management team] have been a huge support to me and are fair. I wouldn't be afraid to raise anything with them."

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 management team developed an open ethos at Breck Lodge, focused on continuous improvement.

Everyone we spoke with said they felt listened to and were confident issues would be addressed quickly. An employee stated, "The support you get from [the registered manager] is incredible. We have team meetings where we can raise any problems or make suggestions."

- The provider gave us examples of areas they had improved following lessons learnt, such as developing systems to improve risk management and safety. One person said, "They are keen to get our opinions about how things are run and done and if they could improve anything."