

Finest Care Limited

Clifton House Residential Care Home

Inspection report

94-96 Clifton Avenue
Hartlepool
Cleveland
TS26 9QP

Tel: 01429223399

Date of inspection visit:
28 February 2023

Date of publication:
14 April 2023

Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Is the service responsive?

Inspected but not rated

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

About the service

Clifton House Residential Care Home provides accommodation and personal care for up to 28 people, some of whom are living with dementia. At the time of the inspection there were 23 people living in the home.

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

People were safe living in the home. We observed positive interactions between staff and people, and they communicated with ease and familiarity. Staff were passionate about their roles and of the people they supported. One staff member said, "I love working at Clifton house. Our residents are at the forefront of our philosophy of care. Our residents are our second family and are always treated with compassion, dignity, and respect."

People were safeguarded from abuse. Risks to the environment were well managed. The registered manager learned from accidents and incidents to mitigate future risks. Infection prevention and control processes were embedded into the service and staff followed government guidance in relation to infection control and prevention practices, in particular, relating to COVID-19. A health professional told us, "It's a nice clean and tidy home. All Infection Prevention and Control (IPC) practice is adhered to and they have always followed the government guidance by the book."

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 this practice.

Staff supported people with their social needs and to maintain relationships that were important to them.

The home was well managed. People, staff and health professionals were complimentary about the home and felt the registered manager was pro-active, open and approachable. In a recent survey a health professional stated, "There aren't any areas for improvement as this is an excellent care home with very caring and professional staff." An effective quality assurance process was in place.

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 27 February 2019).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook this targeted inspection to follow up on specific concerns we had about the service about safeguarding, health and safety of the service, people's social needs, governance and overall management of the home. A decision was made for us to inspect and examine those risks.

CQC have introduced targeted inspections to follow up on warning notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the Safe, Responsive and Well-Led sections of this full report.

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 COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Clifton House Residential Care Home 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?

At our last inspection we rated this key question good. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Is the service responsive?

At our last inspection we rated this key question good. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question good. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Clifton House Residential Care Home

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check on concerns we had about safeguarding, health and safety of the service, people's social needs, governance and overall management of the home.

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

The inspection was carried out by 1 inspector.

Service and service type

Clifton House Residential Care Home is a 'care home'. 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. Clifton House Residential Care Home is a care home without nursing care. 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 was a registered manager in post.

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 used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

We sought feedback from the local authority and professionals who work with the service. We also contacted 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 of this information to plan our inspection.

During the inspection

We spoke with 2 people about their experience of the care provided. We spoke with 4 staff members including the registered manager, the deputy manager and 2 care workers. We also received feedback from a further 6 members of staff.

We reviewed documentation, inspected the safety of the premises and carried out observations in communal areas. We reviewed a range of records including 2 people's care records, quality audits and a variety of records relating to the management of the service, including policies and procedures.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check specific concerns we had about safeguarding, health and safety of the premises and accidents and incidents. We will assess all of the key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- Staff supported people to keep them safe from harm. People told us they felt safe living in the home. One person said, "I feel content and safe here. If there's anything I need, I just ask."
- Staff knew people well and were aware of how to report any safeguarding issues or concerns. Staff told us, "I would feel very confident to raise concerns through the whistleblowing policy, I can confirm that I have not had to use this policy" and, "I feel confident that I am able to raise concerns, I feel that the management have a very open door policy. I feel that they would act on the concern if I had any."
- The provider raised safeguarding alerts with the local authority in a timely manner and took appropriate action to mitigate risks of a reoccurrence.

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

- Environmental risk assessments were in place and up to date. The building was maintained by a dedicated maintenance person.
- The registered manager monitored all accidents and incidents to identify any trends and lessons learned. Any action taken to mitigate risks were also recorded.

Preventing and controlling infection

- 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 admitting people safely to the service.
- 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 promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current 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 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 staff were working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check specific concerns we had about staff supporting people with their social needs. We will assess all of the key question at the next comprehensive inspection of the service.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People enjoyed and took part in a range of activities in the home. Some people were supported in their rooms, in line with their preferences to prevent social isolation. One person said, "The girls are all nice. They come in and chat with me or help me to do crosswords and other things. There's not a lot I can do because I can't see but I'm content with everything and I have my talking books which are brilliant."
- The home had dedicated activities champions who were passionate about their roles and tailored activities to what people wanted to do. One staff member said, "We chat to the residents when they come into Clifton House to find out what they like to do and continue to do so in case their interests change at any time. We offer 1 to 1 and group activities and we accompany [people] if they want to go for a walk if unable to do so independently. We do a weekly evaluation of activity interest and [people's] abilities in case either change."
- People were supported to maintain and develop relationships, and to follow their own interests and social activities. One person said, "I have two daughters who come to visit me each week which is nice." People received visitors in the home and also enjoyed telephone and video calls with loved ones.

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. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check specific concerns we had about the governance and overall management of the home. We will assess all of the key question at the next comprehensive inspection of the service.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager and staff promoted a positive culture in the home. A health professional told us, "It's a lovely homely home, staff are very committed to the delivery of safe care and are very welcoming."
- Staff told us they enjoyed working in the home and felt management were approachable. They told us, "I feel that management are great and friendly, very much approachable. I feel that I can go to them with any issues I have professional or personal and they would do the upmost to help me" and, "The management team are amazing and very supportive."

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 understood their legal responsibility to be open and honest when something goes wrong. They submitted notifications to CQC for significant events that had occurred at the service. However, we identified one significant event that CQC had not been notified of and the registered manager acted immediately to resolve this.

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

- The registered manager and other dedicated senior staff monitored the quality of the service to make sure they delivered a high standard of care and to drive improvement.
- The provider supported the registered manager in their role and had regular communication with them. The registered manager said, "[Provider] is very supportive and always on the other end of the phone. They have visited every month since the direct monitoring activity call. They have a look around, speak with residents, myself and [deputy manager] as well as staff."
- The registered manager attended management forum meetings with other providers as well as the local authority commissioning team and NHS health care alliance. Discussions included health and safety, care network, training and sharing best practice.