

Highcroft Care Blackpool Limited The Highcroft Care Home

Inspection report

599 Lytham Road South Shore Blackpool Lancashire FY4 1RG Date of inspection visit: 10 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

The Highcroft Care Home is situated in a residential area of Blackpool. Accommodation is provided in single rooms. There are communal lounge areas, dining room and garden areas to the rear of the premises The home is registered to provide care for up to 31 people. At the time of the inspection there were 24 people living at the home.

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

People were safe. One person said, "It's my home and I feel relaxed and safe here." Monitoring and quality assurance checks were completed. These included the building, equipment and care provided for people. Recruitment procedures were in place and were robust. There were sufficient staff to care for people. 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.

The management team had auditing systems to maintain ongoing oversight of The Highcroft Care Home. Quality assurance processes ensured people were able to give their views and opinions of the service and felt listened to.

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 at this service was good (published 13 December 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service. We undertook a focused inspection to review the key questions of safe and well-led only. For those key question not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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 •



The Highcroft 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 The inspection was carried out by 1 inspector.

Service and service type

Highcroft 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. 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.

At the time of the 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 sought feedback from the local authority and commissioners who work with the service. We also looked at information we had received and held on our system about the service, this included notifications sent to us by the provider and information passed to us by members of the public. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key

information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 6 people who lived at the home 2 relatives, 4 members of staff, the registered manager and provider. In addition, we spoke with a visiting health professional. We observed staff interaction with people, also, we reviewed a range of records. These included care records of people, medication records, and staff files in relation to recruitment. We also reviewed a variety of records relating to the management of the service. We had a walk around the premises and looked at infection control measures.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at their quality assurance systems the provider had in place and staff training records.

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.

Using medicines safely

- People were supported to receive their medicines safely.
- Staff had received training and had their medicine competencies checked.
- Auditing processes to monitor medicines and identify any issues were undertaken regularly.

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

- The registered manager assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- Checks on the premises and equipment were in place and up to date. Fire safety checks were completed, and fire alarm systems were monitored. Personal emergency evacuation plans (PEEPS) were recorded in individual care records of people.
- Accidents and incidents were analysed to look for how a reoccurrence could happen. Action was taken to reduce the risk of accidents and learn lessons from this.

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.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. People told us they felt safe and confident with staff who cared for them.
- There were effective safeguarding processes in place. The management team and staff had a good understanding of safeguarding people. They understood their responsibilities for keeping people safe and the processes for reporting any concerns. One staff member said, "We update our safeguarding training all the time [registered manager] is on the ball with safeguarding."

Staffing and recruitment

- Sufficient staff were deployed around the home to ensure people were cared for. Staff spoken with confirmed they were happy with the number of staff on duty to support people.
- Staff recruitment processes were good and thorough. Records looked at confirmed all checks had been completed prior to staff commencing work.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- Staff had received infection control training and had enough PPE to help minimise cross infection.

Visiting in care homes

• People were able to receive visitors without restriction, in line with best practice guidance.

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 people's outcomes were consistently good, and people's feedback confirmed this

Continuous learning and improving care; working in partnership with others

- The management team and staff worked well with other health and social care professionals for the benefit of people who lived at the home.
- Care professionals told us they had very good communication with staff and the registered manager who were competent and caring.
- The provider and registered manager were committed to continuous improvements to the home for the benefit of the people they supported. For example, parts of the building had recently benefited from some refurbishment. One person said, "It is a lovely home".

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

- People were engaged and involved. There was a positive culture throughout the home which focussed on ensuring people received high standards of care
- Staff told us they felt supported and valued by the registered manager. A staff member said, "I feel well supported by the management."
- People and their relatives were comfortable and confident when approaching staff and the registered manager to express their views. This was achieved through meetings and surveys

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

- The registered manager was supported by staff who were well trained and understood their responsibilities for delivering care for people.
- The management team had established systems for monitoring the quality and safety at The Highcroft Care Home. They were aware of their regulatory responsibilities to notify (CQC) of significant events and incidents.
- The registered manager had systems to monitor the quality and safety of service. The registered manager carried out audits of the service and reported their findings to the provider.

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

- The staff team promoted a positive, personalised and open culture. This helped and supported positive outcomes for people.
- The registered manager was visible in the home. They supported people with who lived and worked there.

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 encouraged candour through openness.

• The registered manager and provider had been open and honest when things went wrong and apologised to people when appropriate.