

Across The Bay LTD

Across The Bay

Inspection report

479 Marine Road East
Morecambe
Lancashire
LA4 6AF

Tel: 01524410625

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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

Across The Bay is a four-storey building and has a passenger lift for people to access all the floors. Registered for 24 older people. At the time of the inspection visit there were 18 people who lived at the home.

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

Across The Bay was clean and hygienic. The service had an infection prevention and control policy in place. One staff member told us, "We are aware of the importance and have had training on infection control and Covid-19 guidance." There were sufficient staff to meet people's care and support needs. They were employed subject to robust recruitment processes. People's safety was at the centre of care delivery. Risks were assessed and carefully monitored to ensure individuals safety. People received their medicines safely.

People received support with their healthcare and nutritional needs. They 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. There was a programme of staff training and regular updates were in place for staff to improve their skills.

We observed staff interactions with people who lived at Across The Bay and found them to be caring and they treated people with respect and kindness. This was confirmed through discussion with people.

Activities were varied, staff had worked hard with people to provide meaningful social activities to provide stimulation and exercise. One person told us, "We have singalongs, ball games all sorts go here in the afternoons." There was a complaints process which people and relatives were aware of.

The management team had auditing systems to maintain ongoing oversight of the service and make improvements where necessary. Quality assurance processes ensured people were able to give their views of the service. We found the management team acted upon suggestions to improve the lives of people.

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

Rating at last inspection

This service was registered with us on 10th October 2019 and this is the first inspection.

Why we inspected

This was a planned first inspection based on their registration. We looked at infection prevention and control measures under the Safe key question. We look at this in all 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

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?

The service was safe.

Details are in our safe findings below

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Across The Bay

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.

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 one inspector.

Service and service type

Across The Bay 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. This was because we needed to be sure that the registered manager would be available to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since they registered with CQC. We sought feedback from the local authority and professionals who work with the service. 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 used all this information to plan our inspection.

During the inspection

We spoke with five people who lived at the home, four members of staff, the cook, registered manager and the owner who was the registered provider. We observed staff interaction with people. In addition, we reviewed a range of records. These included care records of two people, medication records, staff files in relation to recruitment and the staff training records. 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.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. 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

- People were protected from the risk of harm and abuse.
- Staff told us they had received training in areas of keeping people safe and protecting them from abuse. One staff member said, "It has been hard through the pandemic, but we have kept up with safeguarding training."
- Staff were able to talk about good practice in safeguarding people to protect them from harm, or unsafe care and were aware of signs to look for people being abused.

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

- The registered manager had good processes in place to manage people's safety and reduce risks. This helped to protect people's safety. One person told us, "I am safe here and staff make you feel that way."
- The registered manager reviewed incidents as part of lessons learned, to ensure risks were reassessed to prevent reoccurrence where possible. The registered manager told us they engaged with other services to learn any lessons and what worked well during the pandemic, so they could make changes to improve the home.

Staffing and recruitment

- The registered manager ensured appropriate staffing arrangements were in place to meet people's needs in a person-centred and timely way. This was confirmed when we spoke with people. One person told us, "They don't seem rushed and always someone on hand if I want a cup of tea."
- The registered manager informed us despite the national staff shortages at present they were managing to safely provide sufficient staff. A member of the management team said, "It is difficult at times, but the staff have been amazing."
- Recruitment processes ensured people would be supported by staff with appropriate experience and character. A recently employed member of staff said, "Very good process, yes and the induction was informative."

Using medicines safely

- The registered manager had good systems and procedures to manage medicines safely for people.
- Staff received competency checks on a regular basis. We observed staff ensured the trolley was secure whilst away from it and signed records afterwards to confirm people had their medicines.
- Staff maintained appropriate records for the receipt, administration and disposal of medicines. There were written protocols to guide staff on the administration of medicines prescribed 'as and when' required.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider had processes to admit people safely to the service.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- 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.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The registered manager ensured people's needs were assessed.
- Assessments were reviewed and we found information ensured effective care could be planned and delivered. One staff member said, "The online care records are good and easy to follow and update when needed."
- People's diverse needs were detailed in their assessment and met in practice. This included support required in relation to their culture, religion and diet preferences.
- Care records were regularly reviewed and updated monthly or when their needs had changed.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and carried out their roles effectively. There was a programme of training and records highlighted when staff required their training to be updated such as moving and handling and safeguarding. Records we looked at confirmed this was happening.
- Staff told us they felt supported by the registered manager and registered provider. Records showed regular one to one supervision sessions were in place, staff confirmed this.

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People were supported with their healthcare needs. Staff had developed relationships with other agencies and professionals to provide a flexible and effective service.
- People were provided with meals of good quality and choice. Comments from people included, "The food is good, we have plenty of choice." Another said, "I like my Weetabix and tea in the morning always given when I want it, I cannot complain."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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). We checked whether the service was working within the principles of the MCA.

- Staff had received training and understood the relevant requirements of the MCA.
- Staff confirmed they asked for people's consent before providing support. Staff explained the reasons behind this and giving people enough time to think about their decision before taking action.
- People's capacity to make decisions was considered as part of the assessment process. We saw evidence of this in care plans. The best interest decision making process was followed where necessary, and appropriate documentation completed where appropriate.
- The registered manager had submitted applications for DoLS authorisations, as appropriate.

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

- Accommodation was accessible, safe, homely and suitable for people's needs.
- We found bathrooms could accommodate people who required support with their mobility and use equipment to help them use the bath.
- People were able to bring their own items into their rooms and to personalise their rooms as they wanted to. People we spoke with confirmed this and enjoyed making their room homely.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- The registered manager and the registered provider concentrated on building and maintaining open and honest relationships with people.
- One person told us, "You can approach the manager any time and they do treat you with kindness and understanding." Staff had received training on equality and diversity and one staff member explained it had given them more confidence in their role.

Respecting and promoting people's privacy, dignity and independence

- People were provided with information that enabled them to make decisions about their lives.
- Staff understood the importance of empowering people to make decisions if possible.
- People were encouraged to make choices about their day to day living. One person told us, "I do as I please and the staff are great." This was in line with their preferences and they were encouraged to express their views.

Supporting people to express their views and be involved in making decisions about their care

- People told us they were involved in making decisions about their care and what was best for them.
- Evidence of consent obtained from people were in care records we looked at.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. 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 and staff developed person-centred care plans to help people to meet their requirements and preferences. People we spoke with confirmed they were involved in this process, including reviews of their care monthly.
- People's care records included health and social care needs that was personal to them. Records described what support was required to help with people's needs.

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.

- Records detailed individual communication needs of people.

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

- Staff worked hard to provide meaningful activities and stimulation for people.
- One person told us, "The staff do put activities on." Another said, "We have singalongs, ball games all sorts go here in the afternoons."
- The management team kept records of activities people had taken part in. These showed there had been a variety of activities offered both on a individual level and group events.

Improving care quality in response to complaints or concerns

- People had access to a complaint's procedure. The procedure was clear in explaining how a complaint could be made and reassured people their concerns would be dealt with.
- The registered manager had ensured any concerns or issues had been investigated and resolved.

End of life care and support

- Where appropriate end of life plans were put in place and staff had appropriate training. Training documents looked at confirmed this.
- People's end of life wishes had been recorded so staff were aware of these.

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 is the first inspection for this newly registered service. 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.

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

- People we spoke with described a positive, caring culture at the home. One person told us, "Everyone is kind and cannot do enough for me".
- Staff were consistently complimentary about the registered manager.
- Staff said their views and suggestions were listened to and they felt valued by the management team and organisation.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; 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 management team had auditing systems to maintain ongoing oversight and continued development of Across The Bay.
- They had systems in place to address any issues or shortfalls and improve the service.
- People and staff spoke positively about the way Across The Bay operated.
- The registered manager understood their responsibilities to keep CQC informed of events which may affect people and the care delivery.
- They were open and honest about what achievements had been accomplished. In addition, what had not worked so well and where improvements might be needed.

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

- Systems and processes continued to be developed to ensure people and relatives were fully engaged. For example, this could be through, telephone calls and care reviews.
- The management team and staff involved people in the running of the home and gave consideration to their equality characteristics. For example one to one conversations with people and their relatives to look at ways improvements could be made.

Working in partnership with others

- The registered manager and staff worked closely with other agencies and relatives to share good practice and enhance care delivery.

