

Ormerod Home Trust Limited (The)

The Ormerod Home Trust Limited - 2 Headroomgate Road

Inspection summary

CQC carried out an inspection of this care service on 14 December 2017, 18 December 2017, 19 December 2017 and 08 January 2018. This is a summary of what we found.

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 

This inspection visit took place on 18 19 and 28 December 2017 and 08 January 2018 and was announced. We telephoned and spoke with people who receive support, their relatives and staff on 18 19 and 21 December 2017. The registered provider was given 48 hours' notice because the service delivered domiciliary care to people who lived in their own homes. We needed to be sure people in the office and people the service supported would be available to speak to us.

The Ormerod Trust provides support to adults with a learning disability across the Fylde, Blackpool, and Wyre areas of Lancashire. People's support is based on their individual needs and can range from 24 hour care within a supported living environment to a set number of visits each week from the domiciliary service.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen. For example, we saw the location of people's homes enabled people to have easy access to health and social care services and the option to be a part of their local community.

This service provides personal care and support to people living in 24 'supported living' settings, so they can live in their own home as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

At the time of our inspection visit there were 76 adults who received support from The Ormerod Trust. They also provide domiciliary care to 42 adults with a learning disability. It provides personal care to people living in their own houses and flat in their local community.

There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At the last inspection the service was rated Good. At this inspection we found the service remained Good.

Although a number of people had limited verbal communication and were unable to converse with us, we were able to speak with 22 people who received support. They told us they were happy being supported by staff that cared for them and treated them well. One person said, "I am all right with the carers. I am quite happy. It's a very nice house [Supported Living]." A visiting relative said, "This is [relative's] house and she is the priority. I can't believe how lucky we have been. This is the best house for her."

Relatives told us they were made welcome by friendly and caring staff and had unrestricted access to their relatives when they visited them in their own supported living homes. They told us they were happy with the care provided and had no concerns about their relatives safety.

The registered provider told us they had ongoing recruitment to manage staff retention as several staff had left in recent months. However, people and staff told us they had had sufficient staffing levels to provide support people required. Within the supported living settings we met staff who knew people they supported very well. They were able to share people's care needs and how best to support people. We observed there was an appropriate rapport between people and staff who supported them.

The service had systems to record safeguarding concerns, accidents and incidents and take necessary action as required. Staff had received safeguarding training and understood their responsibilities to report unsafe care or abusive practices. The registered provider had reported concerns to the commission when appropriate.

Risk assessments had been developed to minimise the potential risk of harm to people during the delivery of their care. These had been kept under review and were relevant to the care provided.

Staff had been recruited safely, appropriately trained and supported. They had skills, knowledge and experience required to support people with their care and social needs.

Medication procedures observed protected people from unsafe management of their medicines. People received their medicines as prescribed and when needed and appropriate records had been completed.

We saw there was an emphasis on promoting dignity, respect and independence for people who

received support. People told us staff treated them as individuals and delivered person centred care. People their relatives and care plans seen confirmed the service promoted people's independence and involved them in decision making about their care.

The designs of the supported living homes were appropriate for the care and support provided. The registered provider had liaised with the local authority and housing associations to ensure people's homes were appropriate and safe.

The service had safe infection control procedures and staff had received infection control training. Staff wore protective clothing such as gloves and aprons when needed. This reduced the risk of cross infection.

People had been 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.

Staff knew people they supported and provided a personalised service in a caring and professional manner. Care plans were organised and had identified care and support people required. We found they were informative about care people had received.

People told us they were happy with the variety and choice of meals available to them. We saw regular snacks and drinks were available between meals to ensure people received adequate nutrition and hydration. Staff had information about people's dietary needs and these were being met.

We saw people had access to healthcare professionals and their healthcare needs had been met. A visiting healthcare professional spoke highly about the care provided by the registered manager and her staff. They told us staff listened and worked closely with them ensuring people received good healthcare.

People and their relatives told us they enjoyed a variety of activities. These included attending day services, drama, baking and social evenings. We observed one person was excited about attending a forthcoming pantomime.

People told us staff were caring towards them. Relatives praised the positive caring attitude of staff. Staff we spoke with understood the importance of high standards of care to give people meaningful lives.

The service had information with regards to support from an external advocate should this be required by them. They worked with family members who were court appointed advocates to provide agreed standards of care.

The service had a complaints procedure which was made available to people and their relatives. People and their relatives we spoke with told us they were happy and had no complaints about the care delivered.

The registered provider used a variety of methods to assess and monitor the quality of the service. These included regular audits, questionnaires and relative meetings to seek their views about the service provided.

You can ask your care service for the full report, or find it on our website at www.cqc.org.uk or by telephoning **03000 616161**