

## Lakeview Rest Homes Limited

# The Moorings

### Inspection report

60 North Promenade  
Lytham St Annes  
Lancashire  
FY8 2NH

Tel: 01253729941

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22 January 2019

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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

What life is like for people using this service:

People who lived at The Moorings and relatives we spoke with only had positive comments about the management team and how the service operated. They told us good staffing levels afforded people responsive and dignified support.

It was evident through discussions with people and general observations staff morale was good. Everyone was committed to ensuring people received care and support based on their preferences and life choices. People told us they enjoyed the range of activities and felt well cared for. Comments included, "We have such a great activity person, [name] is unbelievable she is so enthusiastic and it is a joy to join in activities here."

We observed staff administered medication with a skilled and secure approach, which the registered manager strengthened through training. They continued to have good oversight of relevant procedures through monitoring and auditing to ensure people who lived at the home received medication safely.

Staff files we looked at evidenced the registered manager used the same safe recruitment procedures we found at our last inspection. Staff records showed personnel received training to enhance their skills. Staff we spoke with confirmed this. In addition, in-house trainers provided courses throughout the organisation on the premises.

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.

Care plan information focused on a person-centred method of supporting people. Also, information contained what support was required and consent to care forms had been signed by people who lived at The Moorings or their representative.

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.

Staff supported people with their meals sensitively and respected their privacy. Staff checked they had enough to eat and comments were positive in relation to quality of meals and choices available to them. The cook had a good knowledge of different cultural needs of people and offered alternative menus if required. One person who lived at The Moorings said, "Great cook and lots of choice the meals are excellent."

People who lived at The Moorings were very positive about how they were cared for and treated by staff and the management team. One person who lived at the home said, "I could not get a more caring bunch of

people anywhere else."

There was a complaints procedure which was made available to people and their family when they commenced using the service. People we spoke with told us they were happy with the support they received.

The registered manager used a variety of methods to assess and monitor the quality of the service. These included staff and 'resident' meetings and satisfaction surveys to seek their views about the service provided. Recent surveys only produced positive comments about the home.

More information is in Detailed Findings below.

Rating at last inspection:  
Good (report published 09 November 2016).

About the service:

Lakeview Rest Homes Limited provides care and support to people who lived at The Moorings. The home is a registered care home situated in Lytham St Annes. It is located close to public transport links, leisure and shopping facilities. It is registered to provide accommodation for up to 78 older people. The building is a five-storey property with two courtyard areas for people to enjoy.

At the time of the inspection visit there were 52 people who lived at the home.

Why we inspected:

This was a planned inspection based on the rating at the last inspection. The service remained rated good overall.

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme or if any issues or concerns are identified.

## 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 ●

# The Moorings

## Detailed findings

### Background to this inspection

**The Inspection** • We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

**The inspection team** • Consisted of an adult social care inspector, a specialist advisor (SPA) and an expert by experience. The SPA had clinical experience of supporting people with nursing needs. In addition, the expert-by-experience was a person who had personal experience of using or caring for someone who uses this type of care service.

**Service and service type** • The Moorings 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, both of which we 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 comprehensive inspection visit took place on 22 January 2019 and was unannounced.

**What we did preparing for and carrying out this inspection** • Before our inspection we completed our planning; tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people supported by the service and previous inspection reports.

We also checked to see if any information concerning the care and welfare of people supported by the service had been received. We contacted the commissioning departments who used The Moorings. We also contacted other health and social care organisations such as Healthwatch Lancashire. Healthwatch Lancashire is an independent consumer champion for health and social care. This helped us to gain a balanced overview of what people experienced living at The Moorings.

As part of the inspection we used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection visit we spoke with a range of people about The Moorings. They included seven people who lived at the home, three relatives/friends, the registered manager, two senior staff members, and six care staff. In addition, we spoke with the cook, kitchen assistant and activity co-ordinator.

We looked at records relating to the management of the service. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead The Moorings in ongoing improvements. We also looked at staffing levels, recruitment procedures and the environment. We checked care records of four people who lived at the home and documents related to the safety of people who lived at The Moorings.

# Is the service safe?

## Our findings

Safe – this means people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

### Systems and processes

- The service had safe, effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm. Staff demonstrated a good level of awareness about protecting people from poor practice or abuse. One staff member said, "I know what to do and who to report to should I encounter any concerns."
- We found care records looked at included risk assessments that covered mobility, health and safety, the environment, falls and medication. Information contained details comprised of the person's level of independence and action to support them.

### Assessing risk, safety monitoring and management

- Staff understood where people required support to reduce the risk of avoidable harm. Care plans we looked at contained explanations of the control measures for staff to follow to keep people safe and reduce risk of accidents and incidents.

### Staffing levels

- We looked at how The Moorings was staffed and found appropriate arrangements were in place as the previous inspection. People who lived at The Moorings felt sufficient staff were available to meet their needs and staff were satisfied sufficient staff were on duty.
- The registered manager had good systems for recruiting staff in place as the previous inspection. Staff recruitment records seen were consistent and held required information. This included professional references and criminal record checks from the Disclosure and Barring Service (DBS). Staff we spoke with confirmed the recruitment process was thorough and they did not start work until all checks had been completed.

### Using medicines safely

- We looked at medication records and found people's medicines to be managed safely. Staff who administered medication did so at the correct time. Staff had received appropriate training and competency assessment to ensure they followed safe procedures. People who lived at the Moorings told us their medication was given promptly and one person said, "I self-medicate and the items are locked in a cupboard, only I have the key. I've never been left in pain or discomfort."
- Medicines were managed in line with The National Institute for Health and Care Excellence (NICE) national guidance. This showed the service had systems to protect people from unsafe storage and administration of medicines.
- The registered manager regularly completed medication audits to check their procedures and processes were safe. We looked at a sample and found any discrepancies had been looked onto and action taken to

reduce risks in the future. This showed the registered manager learnt from errors and actioned appropriately when issues were highlighted.

#### Preventing and controlling infection

- Staff had sufficient personal protective equipment, such as disposable gloves and aprons to maintain good standards of infection control. We saw when we had a walk around the building the availability of plenty of hand gels and aprons for staff usage when delivering personal care. One person who lived at The Moorings said, "I see the staff wearing aprons and gloves in the dining room, and after they have attended to other residents."
- The registered manager ensured infection control procedures were maintained with effective staff training. People who used the service we spoke with told us staff consistently washed their hands before and after providing personal care for them.

#### Learning lessons when things go wrong

- We looked at how accidents and incidents were managed by the registered manager. They detailed the nature of the incident, time and action taken to resolve it. When accidents occurred any accident or 'near miss' was reviewed so that lessons could be learnt and to reduce the risk of similar incidents.



# Is the service effective?

## Our findings

Effective – this means people's care, treatment and support achieved good outcomes and promotes a good quality of life based on best available evidence.

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.

- Staff applied learning effectively in line with best practice. This led to a good service for people who lived at The Moorings and a good quality of life.

- Assessments of the needs of people were comprehensively covered and the person's care package highlighted the person's own wishes were catered for. They were not over clinical however demonstrated good levels of understanding of clinical need.

- Care records were regularly reviewed and updated when changes occurred. This meant people's support was up to date to ensure staff had correct information. In addition, people received the right care and support that was required.

Staff skills, knowledge and experience

- We spoke with staff and found they had a wealth of experience and were competent, knowledgeable and skilled in their individual role. Comments about access to training and development were all positive for instance, "We have the best training opportunities here supported so much by [registered manager]." And, "I have been helped to develop my career by doing professional qualifications all down to the organisation."

- The registered manager had a wide-ranging training programme to develop staff skills. Courses included, safeguarding, health and safety, food and hygiene, infection control and moving and handling."

Supporting people to eat and drink enough with choice in a balanced diet

- We observed staff supported people with their meals, where required, with a sensitive and respectful approach. People we spoke with said meals, snacks and drinks were of a good standard. Comments included, "There is a good choice and it's changed daily. They also have a backup menu if you don't like what's on." Also, "Special diets are catered for. I am on diet controlled diabetes. It's well presented and nutritious. I've never felt hungry, in fact there's often too much."

- Care records held nutritional assessments and relevant guidance to assist staff to reduce the risks of malnutrition. For example, one person was a diabetic, all areas of diabetic care were covered thoroughly in their care plan and district nurses administered their insulin.

Staff providing consistent, effective, timely care

- We found evidence the registered manager was referencing current legislation, standards and evidence based on guidance to achieve effective outcomes.

- People received effective support from staff at The Moorings because they were supported by trained staff who had a good understanding of their needs.

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

- People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The registered manager knew the process to safeguard people who did not have capacity. Records we reviewed included an assessment of capacity and best interest decisions. Throughout our inspection, we observed people were supported to make their day-to-day decisions.
- Records we reviewed contained evidence to demonstrate care planning was discussed and agreed with people and their representatives. Consent documentation was in place and signed by the person receiving care or their relatives if appropriate. Again, consent was clearly assessed throughout care records we looked at.

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

- We had a walk around the premises. It was appropriate for the care and support provided. Each room had a nurse call system to enable people to request support if needed. The building was furnished to a high standard with additional areas for people to enjoy. For example, they had a bowls/golf area and outside garden areas with garden furniture for the benefit of people. One person who lived at the home said, "It is luxurious like a 5-star hotel." Aids and hoists were in place to meet the assessed needs of people with mobility needs.

# Is the service caring?

## Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect.

People were supported and treated with dignity and respect and involved as partners in their care.

Ensuring people are well treated and supported.

- Staff were kind, respectful and patient with people and this was observed throughout the day by the inspection team. People who lived at The Moorings only said positive comments about the attitude of staff towards them. Comments included, "The staff are kind and compassionate, you can have a laugh with them they are very amenable." Also, "I do like the staff that look after us. If you have a problem you can always speak to them and they will help you." And, "They treat you with respect, they are caring and compassionate."
- Care records reflected important information in relation to each person's dignity and privacy. It was clear from care records and the attitude of staff was to ensure support given to people who lived at The Moorings was individual and personalised to their needs. Also, staff focused on retaining and promoting people's independence as much as they could within a care home setting. This was confirmed by our observations during the inspection visit and comments from people we spoke with. For example, one person said, "I like my own space and the manager and staff respect that. They do try and make me more independent and that is a good thing."

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

- Care records we looked at contained evidence the person or a family member had been involved with and were at the centre of developing their care at The Moorings with appointed staff.
- The registered manager and staff documented people's diverse needs and assisted them to maintain their different requirements. For example, they recorded each person's religious preferences. This contained details about whether they were practicing and how they wished to maintain their spirituality. We saw equality and diversity was extended to all personnel and training was provided for staff.
- There was information available about access to advocacy services should people require their guidance and support. The registered manager had information available for people in the reception area. This ensured their interests would be represented and they could access appropriate services.

Respecting and promoting people's privacy, dignity and independence

- The registered manager and staff supported people to maintain their lawful rights as set out in the Human Rights Act 1998. For example, they assisted those who lived at Wentworth House to retain their 'Freedom of thought, conscience and religion', Article 9 of the act. They achieved this through recording each person's spiritual needs and helping them to access relevant services.
- Staff respected people's choices around privacy and dignity. Comments we received supported this.

# Is the service responsive?

## Our findings

Responsive – this means that services met people's needs

People's needs were met through good organisation and delivery.

### Personalised care

- Records we looked for people who lived at the home were detailed and showed that staff used a person-centred approach to plan and support people. For instance, care records had covered people's physical, mental, social and personal care needs. In addition, we noted an in-depth support plan and history of the person's life prior to coming into care. This was sensitively and nicely documented in a personalised and person-centred way. This was so staff were aware of people and this helped to develop meaningful relationships.
- Staff told us they were encouraged to spend time socialising and were encouraged to sit and join in with their hobbies and activities. There was an activity person employed by the service. Everyone we spoke with had positive comments about social events, activities and the effort provided by the activities co-ordinator. For example, people said, "We've got an activities coordinator who is a very good singer, at Christmas it was non-stop, school choirs and pantomimes." Also, "What a fantastic person [activity co-ordinator] is she puts so much effort into everything and keeps the place going. She certainly makes a lot of people happy." Another person who lived at the home said, "There's plenty going on if you want, but there are plenty of quiet places where you can relax."

### Improving care quality in response to complaints or concerns

- The registered manager provided information in documentation to inform people about how to make a complaint if they chose to. In addition, the complaints process was available in the hallway for people to see. The policy included details about the various timescales and steps to take, as well as contact details for the Local Government Ombudsman and CQC. No complaints had been received since the previous inspection.

### End of life care and support

- People's end of life wishes had been recorded in care records we looked at. The registered manager informed us staff had been trained in end of life care and staff we spoke with confirmed this. This demonstrated the registered manager understood the importance of providing end of life support and how this should be delivered and people cared for. At the time of our inspection visit no person was on end of life care support. Care records we looked at contained information about each person's preferences in the event of their death. Details included, religious needs and choices for relatives to adhere to. This information provided staff with guidance to meet people's wishes.

# Is the service well-led?

## Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

The service was consistently managed well led. Leaders and the culture they created promoted high-quality, person centred care.

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong.

- People who lived at the home and staff commented positively about the registered manager and management team. They told us the registered manager was visible about the home and had a good understanding of people's needs and backgrounds. One person said, "The best manager you could have she is always around for a chat and is like one of the staff."
- Comments we received about the management of The Moorings were positive and complimentary in the way the home was run and managed. A staff member said, "The place is well organised and people get on so well. That is down to the manager. You don't mind staying over for [registered manager] to help out because she would do anything for anyone." Other comments from a person who lived at the home included, "Yes I know the name of the manager and senior staff. I consider the home well managed and would recommend it to others."

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- We found the service had clear lines of responsibility and accountability. The registered manager, management team and staff were experienced, knowledgeable and familiar with the needs of people they supported.
- Evidence demonstrated the registered manager had quality assurance processes that were effective as intended and monitored on a regular basis. Systems involved meetings with staff and the provider that ensured the service continued to improve.
- Discussion with the registered manager, management team and staff on duty confirmed they were clear about their role and between them provided a well run and consistent home.

Engaging and involving people using the service, the public and staff

- Relative and 'resident' meetings were held on a regular basis to discuss the performance of The Moorings and any improvements that could be made.
- Surveys were given out to relatives/residents twice annually. The results from the 2018 December questionnaires were positive. Comments included, 'The housekeeping is very good.' Also, 'A great home with good management.' Also, lots of leaflets and a suggestion box were visible. In addition, a relative survey form is clearly placed to welcome feedback about the service.

Continuous learning and improving care

- The registered manager completed a range of quality audits to ensure they provided an efficient service

and constantly monitored The Moorings. These for example included, medication, care records, the environment and infection control. This demonstrated improvements could be made to continue the home to develop and provide a good service for people who lived there.

#### Working in partnership with others

- The registered manager at The Moorings worked in partnership with other organisations to make sure they followed current practice, providing a quality service and the people in their care were safe. For example, local social services and healthcare professionals. A recent report from the local commissioning department reported on how well the service operated and the good systems they had in place to ensure people received the care and support they required. They had no concerns with communication links with the registered manager and management team.