

Lakeview Rest Homes Limited

Lakeview Rest Homes

Inspection report

10-12 Lake Road
Lytham St Annes
Lancashire
FY8 1BE

Tel: 01253735915

Website: www.lythamresthomes.co.uk

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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

Lakeview is registered to provide personal care for up to 28 people. Accommodation is accessible by a lift between the floors. There are two lounges, a large dining room and a garden for people to use. At the time of the inspection there were 20 people living at the home.

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

People were protected from the risk of abuse and harm by staff who understood how to recognise and respond to any concerns. Staff continued to be recruited safely. In addition, people told us sufficient staff were available to support people who lived with dementia. Medicines were managed safely and administered by staff who received training. Infection control systems and audits continued to ensure a clean environment and reduce any risks to people.

The manager ensured staff received training that met their needs and supported people. People received support with their healthcare needs promptly. Comments about meal provision and quality of food were all positive. For example, one person said, "Yes good cooks make sure the food is very good." 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.

People told us how staff were kind, caring and treated them well. A relative said, "We have never known such caring people they could not have looked after [relative] any better." Information about local advocacy services was available, to ensure people could access support to express their views if required.

People's communication needs had been assessed so staff were aware how to understand and talk with them. Activities were provided daily they included regular trips out and entertainers visiting the home.

The manager and organisation were clear about their roles and provided care which resulted in good outcomes for people. They worked in partnership with a variety of agencies to ensure people's health and social needs were met. The manager used a variety of methods to assess and monitor the quality of the service. This ensured they continued to be monitored and improve.

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

Rating at the last inspection

The last rating for this service was good (published 30 March 2017)

Why we inspected

This was a planned inspection based on the previous rating

Follow up:

The next scheduled inspection will be in keeping with the overall rating. We will continue to monitor information we receive from and about the service. We may inspect sooner if we receive concerning information about the service.

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 ●

Lakeview Rest Homes

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 one inspector.

Service and service type

Lakeview is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

The service did not have a manager registered with the Care Quality Commission (CQC). A registered manager and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. However, the new manager who commenced employment on the 18th December 2019 was in the process of applying to be registered with CQC.

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, including information from the provider about important events that had taken place at the service, which they are required to send us. We sought feedback from Lancashire local authority and Healthwatch Lancashire. 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 information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do

well, and improvements they plan to make. This information helps support our inspections and we used this to plan our inspection.

During the inspection

We were unable to talk with most of the people who lived with dementia. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with three people who lived at the home, two relatives, the manager and operations manager. We also spoke with four members of staff and the cook. We observed care practices and how staff interacted with people in their care. This helped us understand the experience of people supported by the service.

We looked at care records of one person and arrangements for meal provision. We also looked at records relating to the management of the home, recruitment of a staff member and medicines records. We reviewed the services staffing levels and walked around the building to ensure it was clean, hygienic and a safe place for people to live.

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 remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe and protected from abuse and their human rights were respected. Staff told us training provided enabled them to be confident to identify signs of abuse and poor care.

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

- The manager had good processes in place to manage people's safety and reduce risks to them. Relatives told us they felt reassured their relatives were safe. One said, "We feel relaxed [relative] was safe in the hands of competent staff and management."
- The manager continued to maintain good oversight of infection control procedures to ensure a safe environment.
- The manager reviewed incidents to ensure risks were reassessed to prevent reoccurrence where possible and update any actions that were identified. Regular audits were completed, and lessons learned were shared with staff to improve the service.

Staffing and recruitment

- The manager continued to make sure appropriate staffing arrangements were in place to meet the assessed needs of people in a person-centred and timely way. A staff member said, "Staffing levels gives us enough time to spend with residents."
- Staff were visible to people in their care and provided support as and when required.
- Staff continued to be recruited safely. A staff member recently recruited confirmed this.

Using medicines safely

- The manager had good systems and procedures to manage people's medication safely. They trained staff and regularly checked medication administration was safe and act on any discrepancies.

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.

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.

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

- People had their needs assessed before they were admitted to Lakeview. Information gathered during the process helped to form a care plan.
- The manager continued referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. This supported staff and management team to ensure people received effective and appropriate care which met their needs.
- The manager regularly reviewed people's care and support and updated care plans monthly or where people's needs had changed. Care plans looked at confirmed this.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and carried out their roles effectively. Staff told us they regularly updated training and were encouraged to undertake professional care qualifications. A staff member said, "Training is very good. I requested some challenging behaviour training which they acted on straight away."
- Staff told us they felt supported by the manager. A staff member said, "Yes regular supervision every two months is provided."

Supporting people to eat and drink enough to maintain a balanced diet

- Staff ensured people's nutritional needs were managed to ensure they received a balanced diet and sufficient fluids to keep them hydrated. Care plans confirmed people's dietary needs had been assessed when required.
- People were provided with meals of quality and choice. Comments received confirmed this. One person said, "Yes good cooks make sure the food is very good."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- The manager continued to work effectively with healthcare professionals to ensure people's healthcare needs were met. They worked closely with healthcare services including GPs and district nurses. We saw documented outcomes and support required for people who had health care plans in place.
- People were supported by staff to attend healthcare appointments when required. Staff supported people in managing their health and wellbeing needs by making appropriate referrals to specialist services.

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

- Accommodation was accessible, safe, homely and suitable for people's needs. Bathrooms could accommodate people who required support with moving and transferring to 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.
- There was dementia friendly signage around the building which help support people who lived with dementia to identify their rooms and other parts of the building.

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 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met. There were authorised DoLS in place.

- Records 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 who had legal status to provide consent on their behalf.

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.

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 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

- People were treated with respect and kindness by competent staff. This was observed throughout the day of our inspection visit. One relative said, "Never known such caring people, they could not have looked after [relative] any better."
- Staff had a good understanding of protecting and respecting people's human rights. They talked with us about the importance of supporting people's different and diverse needs.

Supporting people to express their views and be involved in making decisions about their care. Respecting and promoting people's privacy, dignity and independence

- People and relatives continued to be consulted about their care and make decisions for their wellbeing and support they required. A relative told us they were always kept informed about their relative's needs.
- There was information available about access to advocacy services should people require their guidance and support. An advocate is an independent person, who will support people in making decisions, to ensure these are made in their best interests.
- People continued to be treated with respect and their dignity was upheld. We saw this was demonstrated by how staff treated people.
- The culture at Lakeview was caring and compassionate. We observed this during the day by the way staff treated people. Staff also were sensitive when supporting people with personal care and respected their privacy.

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. At this inspection this key question has remained the same. 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

- People continued to receive care and support which was personalised to them. Staff were familiar with people's likes and preferences including hobbies and interests. One person said, "Lots going on, we played bingo before, I like that."
- People told us staff gave them choices and they were able to make every day decisions about their care and how they wished to spend their time.

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.

- The manager identified how people who lived with dementia needed information to be provided. Their communication preferences were written in their care plans and staff understood people well to establish how best to understand them.

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 were encouraged to take part in events at the home and develop relationships. People told us they were helped to pursue activities and interests of their choice. On the day of the visit a singer was performing for people.
- The manager provided a range of activities to improve people's wellbeing. There was a mini bus to take people out on trips and comments were positive about local visits to cafes and garden centres.

Improving care quality in response to complaints or concerns

- Complaints and concerns were taken seriously, and a system was in place. People knew how to make complaints and felt confident these would be acted upon.
- People told us they had no reason to complain about anything. However they were sure concerns would be dealt with appropriately.

End of life care and support

- People's end of life wishes had been recorded so staff were aware of these. Training was provided for staff. A relative said, "The best end of life care we could have expected from exceptional caring people, they have been wonderful."

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 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

- The management team planned and delivered effective, safe and person-centred care. Current and relevant legislation along with best practice guidelines had been followed. This was to ensure the diverse needs of everyone who lived at Lakeview were met.
- Staff told us they felt valued and were given support and guidance to fulfil their roles confidently. One staff member said, "Yes, a very good manager who is always on hand and there for support."

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; Continuous learning and improving care

- The manager encouraged candour through openness. People spoke positively about the manager and organisation. A relative said, "The manager is always available and joins in with the staff."
- The manager regularly assessed and monitored the service through formal and informal methods such as audits, and meetings with staff, relatives and people who lived at Lakeview. We saw evidence they had acted upon any findings from the audits. This demonstrated improvements were made to continue to develop the service.

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

- The service was well-led. The manager had worked within the organisation for a number of years and was experienced in senior roles. The manager was in the process to be registered with CQC. Everybody spoken with were positive of the manager and how well Lakeview was managed.
- Discussion with staff confirmed they were clear about their role and between them provided a consistent and organised service.

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

- The manager created an open culture and encouraged people to provide their views about how the service was run. For example surveys were completed annually by people and relatives to seek their views on the home. Results were positive. One person wrote, '[Relative] loves it here.'
- Relatives were regularly involved in consultation about the provision of the service and its quality.

Working in partnership with others

- The manager continued to work in partnership with other organisations to ensure sure they followed current practice This supported staff to provide a quality service and keep people safe.