

Lyme Valley House Limited

Lyme Valley House Residential Care Home

Inspection report

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Newcastle Under Lyme
Staffordshire
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Tel: 01782633407

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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

We inspected this service on 14 November 2018. Lyme Valley House is a care home for up to 26 people, some of whom may be living with dementia. People in care homes receive accommodation and nursing or personal care as 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 is provided in one building, arranged over two floors, with three communal lounge areas, a dining room, a conservatory and a hairdressing salon. At the time of this inspection 23 people used the service.

The service had a registered manager in post. 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 our last inspection we rated the service 'Good' overall, with improvements needed to ensure people were supported in accordance with legal requirements when they lacked the capacity to make certain decisions. At this inspection we found the required improvements had been made and evidence continued to support the rating of 'Good'. There was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

People continued to receive safe care. People were protected from the risk of harm by staff who understood their responsibilities to identify and report any signs of potential abuse. We found that concerns were taken seriously and investigated thoroughly to ensure lessons were learnt. Risks associated with people's care and support were managed safely. People received their medicines when needed and there were suitable arrangements in place in relation to the safe administration, recording and storage of medicines. There were sufficient, suitably recruited staff to meet people's needs.

The provider had made improvements to ensure people consistently received effective care. People were supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice. The service worked very well with other organisations and health and social care professionals spoke highly of the registered manager and staff. Staff received training and support to meet the needs of people at the service. People were supported to have a varied and healthy diet and to access other professionals to maintain good health.

The care people received remained good. Staff knew people well and promoted their dignity and independence at all times. Staff placed great emphasis on ensuring people were living in a kind and caring, family atmosphere. Staff had good relationships with people and ensured people's friends and families were a part of daily life at the service.

The service remained responsive. People's support plans reflected their needs and preferences and were reviewed when their needs changed. People's diversity was recognised and promoted by the staff and systems were in place to meet people's communication needs. People were supported to take part in activities and follow their hobbies, interests and religious beliefs. Arrangements were in place to ensure people's end of life wishes were explored and respected. People knew how to raise any concerns or complaints and felt confident they would be acted on.

The service remained well led. There were suitable systems in place to assess, monitor and improve the quality and safety of the service. These were monitored by the provider to ensure any improvements needed were made in a timely way. The provider listened to the views of people using the service, their relatives to make improvements in the service. Staff felt supported and valued by the registered manager and provider.

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 remains Good.

Is the service effective?

Good ●

The service has improved to Good.

The provider had made the necessary improvements and staff followed legal requirements when supporting people who lacked the capacity to make certain decisions themselves.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

Lyme Valley House Residential Care Home

Detailed findings

Background to this 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 unannounced, comprehensive inspection visit took place on 14 November 2018 and was carried out by one inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. The expert by experience had knowledge of services for people living with dementia.

We used information we held about the service and the provider to assist us to plan the inspection. This included notifications the provider had sent to us about significant events at the service. We also 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. We also reviewed information we had received from commissioners who purchase services on behalf of people. We used all this information to develop our inspection plan.

We spoke with eight people who used the service and one visitor, four care staff, the registered manager and the provider. We also spoke with two visiting health professionals and contacted two others after the inspection. We did this to gain views about the care and to ensure that the required standards were being met.

We looked at the care records for three people to see if they accurately reflected the way people were cared for. We also looked staff recruitment and training records, including three staff recruitment files and quality

assurance audits carried out by the registered manager and provider.

Is the service safe?

Our findings

At this inspection the provider continued to protect people from potential abuse, harm and risks and the rating for this key question remains 'Good'.

People continued to be safe. A visitor told us, "I come every week, I can come any time. I know [Name of person] is comfortable, safe and well cared for". Staff recognised the signs of potential abuse and knew how to protect people from harm. Staff had received training in protecting people from the risk of abuse and knew how to escalate concerns to the registered manager or to external organisations such as the local authority.

Risks associated with people's care continued to be assessed and managed. Staff understood the risks to people's safety and wellbeing and how to support people to minimise them. We saw that staff followed risk management plans which gave clear information on how to manage identified risks, for example when supporting people to move using equipment or to avoid developing sore skin through pressure damage.

People continued to receive their medicines safely. We saw that staff spent time with people and checked to ensure the person had taken the medicine before moving on. We saw that medicines were recorded, stored and disposed of correctly and there were management processes in place to ensure staff were competent to administer people's prescribed treatments.

The provider had systems in place to review when things go wrong to ensure that lessons were learnt and that action was taken to minimise the re-occurrence. Discussions with the registered manager showed us that accidents and incidents were thoroughly investigated and explored with the staff team to promote learning.

There were sufficient staff to keep people safe and promote their wellbeing. People had no concerns about the availability of staff and we saw staff responded promptly when people asked for assistance. We saw that staffing levels were based on the dependency of the people who used the service and staff said they felt there were enough staff to meet the needs of people. The provider carried out checks to ensure staff were suitable to work with people. These included checks of references and the Disclosure and Barring Service, a national agency that keeps records of criminal convictions. These checks assist employers in making safer recruitment decisions.

People were protected by the prevention and control of infection. We saw the home was clean and personal protective equipment was available when needed. We saw the staff had received training and followed clear policies and procedures to ensure the home was clean and safe for people.

Is the service effective?

Our findings

At our last inspection, improvements were needed to the documentation which recorded how people were supported when they needed help with decision making. At this inspection, we found the required improvements had been made. Effective is now rated as Good.

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 or 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 with appropriate legal authority. In care homes and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We found the provider had made improvements to ensure they were meeting the requirements of the MCA. People's ability to make decisions about their care and support was detailed in their care plans. Staff had received training in the MCA and DoLS and understood their responsibilities when people lacked the capacity to make certain decisions. We saw they recorded their actions and assessments appropriately. We found that DoLS applications had been made appropriately and where approvals had been received, any conditions on authorisations were being met. People were encouraged to make decisions about their daily routine. One member of staff told us, "We prompt and ask if people want help; we work together". This showed us people were supported to have as much choice and control over their lives as possible.

People's needs were assessed prior to moving to the service and the registered manager and staff worked with other agencies to ensure people's care was delivered effectively. Professionals we spoke with were positive about the approach of the registered manager and staff. One told us, "I have worked with Lyme Valley house now for a number of years, arranging planned and unplanned admissions. My experience of the home has been wholly positive. The management are proactive in terms of ensuring that all aspects of a person's needs and wishes are met."

The provider continued to ensure staff were trained to care for people effectively. Staff received training relevant to the needs of people living at the home and new staff received an induction which included shadowing more experienced staff and completing the nationally recognised Care Certificate. This supports staff to gain the skills needed to work in a caring environment. Staff told us they received regular supervision with the registered manager which gave them an opportunity to discuss their performance and any training needs.

The provider continued to support people to eat and drink enough to maintain their health and a balanced diet. People enjoyed their meals and lunchtime was a very sociable occasion. We saw that menu choices

were offered in a pictorial format and staff were aware of any specific dietary needs. Staff monitored people's weights and where needed, advice from other professionals such as the dietician was acted on.

People were supported to maintain their health through regular health appointments and check-ups. We saw that people were referred to other health professionals, including the GP and District Nurse, when needed and staff worked collaboratively with them to ensure people's needs were met.

People had access to a number of seating areas around the home including a conservatory and garden, to relax and socialise. People told us, and the registered manager confirmed, they were about to convert one area into a café/bistro, which people would have the opportunity to 'work' in, to promote their independence. Improvements had been made to enable people to use the rear garden safely. We saw this included decoration by a local artist, who had been commissioned to create a 'beach theme' to promote people's enjoyment of the area.

Is the service caring?

Our findings

At this inspection we found people continued to be supported in caring way by staff. The rating for this domain remains Good.

There was a visible person-centred culture at the service. People and staff told us there was a family atmosphere and everyone felt involved in making decisions made about their care and the running of the home. For example, people had come up with the name of the new café/bistro that was being created at the home. Arts and crafts which people had made were displayed around the home which created a homely, lived-in feel. Staff were observed spending time with people, just sitting chatting and checking people were okay when they were moving through the communal areas. People told us the staff treated them with kindness and respect at all times. One person said, "The girls are so nice and pleasant, easy to talk to. We get on well with them." Another said, "It's the best decision I made to come here. I was struggling at home. Here I have no worries. I can go to my room and watch TV or I can have company, good company." Professionals we spoke with were positive about the caring approach of the registered manager and staff. One told us, "They [staff] are innovative and seem to get a quick understanding, not just of the person's needs, but who they are, what was important to them and how to ensure some of this is put back into their lives."

Staff were discreet and maintained people's privacy and dignity at all times. We saw people were supported to maintain their appearance and sense of self. Since the last inspection, the provider had adapted and decorated a communal area to resemble a hairdressing salon, with mirrors and a sofa. We saw that people wandered in and out for their 'appointments' which seemed to add to the atmosphere, replicating a regular salon.

People's independence was promoted whenever possible. Staff gave people choices and ensured their preferences were respected. For example, one person enjoyed washing the dishes and we saw staff encouraged them to wash up after mealtimes. Staff told us about a person who regularly went out independently. We overheard the person saying, "I'm not going out today but I can go out whenever I want to. Staff just ask me to let them know what time I'll be back so they would know if there was a problem." At lunchtime, we saw people were able to choose where they sat and what they wanted to eat and drink. A member of staff told us, "We've had to make a larger table because so many people want to sit together."

People were supported to build and maintain contact with their families and friends. A professional told us about a person they worked with, "The home have worked hard to facilitate contact with the person's family member and their relationship now is better that it has ever been." People told us their family members and visitors were welcomed any time.

Is the service responsive?

Our findings

At this inspection we found people continued to receive care and support that met their individual needs and preferences. The rating for the domain remains Good.

People's needs and wishes were at the heart of the service. People were supported by a staff group that had worked at the service for a number of years, who understood their needs well. The registered manager and staff talked to people about their preferences for their care and support and this was recorded in their care plans and kept under review. Staff received training in equality and diversity and demonstrated a good understanding about treating people as individuals.

Professionals we spoke with were positive about the caring approach of the registered manager and staff. One told us, "They [staff] are innovative and seem to get a quick understanding, not just of the person's needs, but who they are, what was important to them and how to ensure some of this is put back into their lives". Staff recorded the care they provided and a hand-over was held at the start of every shift to ensure staff were kept up to date on people's changing needs.

Staff understood people's diverse needs and action was taken to remove barriers for people with sensory loss. For example, people with sensory impairments were supported to access audio books and digital radios. We saw the registered manager had developed a communication book to help a person get to know staff and introduce professionals when they visited them. This showed us the service was meeting the Accessible Information Standards (AIS). This was introduced to make sure people with a disability or sensory loss are given information in a way they can understand. We also saw that signage in the home supported people with memory loss and communication difficulties.

People were offered opportunities to join in activities and were encouraged to follow their hobbies and interests. We observed people enjoyed a bingo session before lunch and after lunch there was a lively, interactive quiz which promoted a lot of discussion and laughter. A visitor told us, "There's always something going on here. No one is isolated unless they want to be". We also saw there were activities designed to support people living with dementia. For example, there was a locks and latches board, which is used to encourage conversation and trigger memories about house-hold tasks. People told us their religious beliefs were explored and visits from local ministers were arranged to support people's wishes.

People knew how to make a complaint and were confident any concerns would be acted on. Whilst there had been no formal complaints since our last inspection, the registered manager had a system for people to raise informal concerns and compliments and this was monitored to ensure any received were responded to in a timely manner.

Although the provider was not supporting people with end of life care at the time of our inspection, we saw that their needs and wishes had been considered and recorded. This showed us people would be supported at the end of their life to have a comfortable, dignified and pain free death.

Is the service well-led?

Our findings

At this inspection, we found the service was consistently well-managed and led and the rating remains Good.

There was a registered manager at the service and staff understood their roles and responsibilities. People and visitors told us the registered manager, provider and staff were approachable and the service was well managed. People's comments were echoed by compliments which had been written in the 'Praise and Grumble' book. Comments included, "Very helpful, friendly staff, always smiling", and, "We could not have left [Name of person] in better hands, you have looked after them so well." The provider also continued to seek people's views on their experience of care through an annual survey. Whilst the 2018 survey had only just been sent out, the 2017 analysis had led to improvements in meal choices for people.

Staff were clearly proud of the service and told us they worked well as a team to ensure people received effective care and support. One member of staff said, "I love my job, this is a lovely place to work and we make sure it's friendly and homely." Another said, "Everyone is supportive in the team and the manager is very encouraging". We found the registered manager worked closely with other professionals to ensure people received effective, joined up care. One professional told us, "I've been coming here for two to three years; the manager and staff are very positive and listen and act on my concerns".

There were clear and effective governance arrangements at the service. The registered manager carried out a range of audits which looked at the quality and safety of the service, including. Where needed, an action plan was put in place and monitored to ensure any shortfalls were addressed. The registered manager also researched and made contact with other homes to identify areas of good practice they could learn from. The provider visited the home on a weekly basis to monitor the management of the home. We saw they had a maintenance plan in place which detailed the ongoing improvements at the home.

The registered manager understood the requirements of registration with us. They reported significant events to us, such as safety incidents, in accordance with the requirements of registration. It is a legal requirement that a provider's latest CQC inspection report is displayed at the service and on their web site where a rating has been given. This is so that people, visitors and those seeking information about the service can be informed of our judgments. We found the provider had conspicuously displayed this.