

Lola's House Residential Home Limited

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Inspection report

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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

Lola's House Residential Home is a residential care home providing personal care to up to 32 people in one adapted building. At the time of our inspection there were 15 people using the service.

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

Risks to people were assessed and their safety monitored and managed. However, two people who had recently moved to the home had not had all their risks recorded, and information in the fire safety 'grab bag' had not been updated. We discussed this with the registered manager who confirmed immediately following the inspection that these concerns had been rectified.

We have made a recommendation about timeframes for completing and updating risk assessments.

Safeguarding systems and processes had been developed, implemented and communicated to staff. There were sufficient numbers of suitable staff to support people to stay safe and meet their needs. Medicines were administered and managed safely. People were protected by the prevention and control of infection. The home was clean and tidy and odour-free. Staff meeting minutes showed discussions were held when things went wrong and information about improvements were shared.

People's needs and choices were assessed, and care was delivered to support people's best outcomes. Care plans were person-centred. Staff were recruited with the necessary skills and qualifications and were trained to deliver effective care and support. A thorough induction had been prepared for all new staff. A programme of supervisions and appraisals had commenced. People were supported to eat and drink to maintain a balanced diet. People enjoyed the dining experience and were encouraged to eat. Staff worked well together and with visiting professionals. Good working relationships had been built between the service and health professionals, and people were supported to regular access to healthcare services and support. People had been involved in, for example, choosing floor coverings during the programme of refurbishment. Consent to care was sought in line with legislation and guidance, and this was recorded. Staff had received MCA training and consulted with people before delivering care. 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 were treated with kindness, respect, and compassion. People had emotional support care plans in place. Staff had found ways to communicate with people newly moved to the service whose first language was not English. People were supported to express their views and were involved in making decisions about their care, where possible. Staff respected people's decisions. People's privacy, dignity and independence was respected and promoted. Care plans described how to support people to maintain their independence, wherever possible.

People received personalised care and their choices, likes and dislikes were recorded and monitored.

People enjoyed parties, sitting in the garden, and were supported to access the community. People and relatives said their concerns were listened to and acted upon. People and relatives felt they knew the managers well and could speak with them to raise any issues and were confident these would be acted upon. People had been supported to discuss their end-of-life care.

Although the new owners and managers had been in place for a short period of time, there was a commitment to improve and promote a positive, open, and inclusive culture within the home. The registered manager had instilled a culture of openness and transparency. Regular and planned checks took place across all aspects of the service to ensure managerial oversight. Regular staff meetings had commenced, with clear agendas and meeting minutes. Staff were able to contribute and discuss ideas. People and relatives were regularly spoken with; the owners and the registered manager knew people well. There was an invested commitment to continuing improvements, working with local authority and other professionals.

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 11 April 2023 and this is the first inspection. The last rating for the service under the previous provider was inadequate, published on 15 December 2022.

Why we inspected

This is the first inspection for this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 ●

Lola's House Residential Home Limited

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 Health and Social Care Act 2008.

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

An inspector and an Expert by Experience undertook the inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Lola's House Residential Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Lola's House Residential Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

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. 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 (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people who were using the service and 2 relatives about their experience of the care provided. We spoke with 3 members of staff, the registered manager, the cook, and the owners. We reviewed a range of records. This included 3 people's care records, numerous medication records and 3 staff recruitment files. A variety of records relating to the management of the service were reviewed.

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 of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks to people were assessed and their safety monitored and managed. People and their relatives, where appropriate, were involved in these decisions. However, two people who had recently moved to the service did not have risk assessments in place for all aspects of their care.

We recommend the registered manager review policies regarding timeframes for completing and updating risk assessments. Information received immediately following the inspection confirmed this had been completed.

- Accidents and incidents were reported, monitored and analysed.
- Appropriate checks were in place to ensure risks from the building and equipment were understood and minimised. An extensive programme of refurbishment had ensured identified risks to the environment had been removed.

Systems and processes to safeguard people from the risk of abuse

- Systems and processes were in place to safeguard people from the risk of abuse.
- People told us they felt safe. Comments included, "It's safe, it's lovely", and, "Yes, I feel safe, I like it."
- Safeguarding concerns were recorded and monitored. The information was used to improve the service, where applicable.
- Staff were trained and knowledgeable about how to spot the signs of abuse. Staff were confident concerns would be acted upon by the registered manager.

Staffing and recruitment

- People were supported by sufficient numbers of staff to ensure their needs were met. Comments from people included, "Yes, there's enough staff, they (staff) come straight away and help", "Always seem to be enough staff", and, "[I] have been satisfied that there are enough people (staff) around."
- There had been recent extensive recruitment and the registered manager ensured staff rotas considered the knowledge and skills of staff on each shift.
- Appropriate checks were in place to ensure people were supported by suitable staff.
- The training record showed all staff had received training deemed necessary by the provider. A staff member told us, "We have continuous training and learning."

Using medicines safely

- People received their medicines safely.
- One person received support to apply a topical cream. We discussed with the registered manager how the

recording of this could be improved. The registered manager provided evidence this had been completed immediately following the inspection.

- Staff were suitably trained and had their competency to administer medicines checked regularly.
- Current guidance was understood and followed. We discussed with the registered manager how information about 'as and when' medicines could be improved. Immediately following the inspection, the registered manager confirmed they had spoken with the GP and arranged for this to take place.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- 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.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

- Visiting was unrestricted.

Learning lessons when things go wrong

- Staff understood their responsibilities to raise concerns and record safety incidents. Documentation of these was accurate and timely.
- The registered manager reviewed each incident and had started to develop a system for analysing themes and trends from these.
- Staff meeting minutes showed how discussions were held when things went wrong and information about improvements was shared.

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

- People received care and support which was delivered in line with current guidance and standards.

Outcomes were clearly documented and understood.

- Care plans were person-centred and contained detailed information for staff to follow to ensure people received care as they wished. Care plans supported people's protected characteristics, where applicable.

Staff support: induction, training, skills and experience

- New staff received an induction. The registered manager had arranged for existing staff to receive this induction to ensure all staff had received the same information. A person told us, "New staff are introduced."
- Staff completed online training, which was monitored and up to date. Staff also received face-to-face training to embed their knowledge.
- The registered manager had commenced a programme of supervisions and appraisals, although this was still in the early stages due to the short length of time since registration of this new service. Supervision paperwork was detailed, and staff had the opportunity to provide feedback to their managers.

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

- People were supported to eat and drink and maintain a balanced diet.
- The dining experience was calm, and people clearly enjoyed their meal, with many asking and receiving a second helping. One person told us, "Food is pretty good." Another said, "We can ask if we want anything, enough for anyone", and, "Always enough to drink".
- People had a good choice of food, drinks, and snacks.
- People's likes and preferences were well-known and accurately recorded. There was no one who needed a specialised diet at the time of our inspection, however processes were in place to ensure these risks would be managed.

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

- Handovers took place to ensure staff worked together to support people's changing needs. Detailed information was shared so that people's support needs were known and understood by everyone involved in their care.
- People received regular visits, when required, from GPs, opticians, chiropodists, and dentists.
- The service worked had quickly developed close working relationships with health professionals and ensured documentation was updated and their advice followed.
- Feedback from health professionals described how the home had improved since the new owners took

over and how people seemed happier because of this.

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

- There had been extensive refurbishments since the new owners took over the service. Required safety improvements had taken place and communal areas and people's bedrooms had started to be refurbished. People had been consulted about these refurbishments and their views considered.
- Outside spaces had recently been improved and people had started to use these communal spaces, enjoying drinks, barbecues, and singsongs. One person said, "I like it; it's a big place with my friends."
- Dementia-friendly signage was in place.

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

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 for themselves. The MCA 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff were knowledgeable about the MCA. They gave people choices and respected their wishes. A relative said, "They (staff) ask her what she wants to wear and she tells them."
- Care plans contained information about people's consent to care and support. Best interest decisions had been recorded.

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

- People were treated with kindness and compassion. One person said, "[It's] good care. [It's] clean and [I'm] well cared for, [I'm] happy with the place." Another said, "Oh, yes, staff are kind and caring." A relative told us, "I'm happy with the care [name of relative] is receiving, everything is being done for her and she likes it."
- Two people who had recently moved to the home did not have English as their first language. The service had translated key words and phrases and one staff member had started to learn these people's first language. Staff used good eye contact and gentle touch to support and encourage them.
- People's care plans contained detailed information about people's preferences, personal histories and backgrounds and staff used this information to develop relationships with them. Staff knew people well. A staff member explained, "This morning [name of person] was crying because they hadn't slept well, so I sang a song, and they started singing with me, and then we laughed."

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

- The service ensured people received regular contact with professionals and advocates, where applicable.
- Staff monitored people's wellbeing and made appropriate referrals for support, where needed.
- A person told us, "I can do whatever I want." A relative said, "Oh, yes, they (staff) know [name of person] well."

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was understood by staff and respected. A staff member told us, "I know them (people) very well. I always ask their (people's) permission."
- People were supported and encouraged to remain independent. One person said, "I can do whatever I want."
- All written information about people was stored securely. Staff understood how to protect people's confidentiality.

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; 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 and their relatives, where applicable, had been involved in planning their care needs. This was clearly documented.
- Care plans were person-centred and contained information to ensure staff understood people well, and their care and support needs. People told us staff had time to talk to them.
- People were supported to enjoy activities personal to them, such as knitting, as well as organised activities, such as a Coronation party. The new owner had immediately arranged for people to have access to daily newspapers, which had been well-received. A trip to the seaside had been arranged for the summer.
- The service had also introduced themed menu days to support people whose cultural background was not English. These had been enjoyed by all.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were identified, recorded, and met. For example, where people wore glasses or hearing aids, staff were directed to ensure people were supported to wear these, and how to communicate if people chose not to wear these.
- People's communication needs were shared with health professionals using hospital passports.

Improving care quality in response to complaints or concerns

- People clearly knew the owners and registered manager well. People told us they felt comfortable to raise concerns. When asked who they would complain to one person told us, "The lady in charge." Another said, "I have never needed to complain."
- There had not been any complaints since the new owners had started to run the service.
- Systems were in place for any complaints or concerns to be recorded and monitored. One person had not liked the position of their bed in their room, so the room layout had been changed to their preference.

End of life care and support

- People's preferences and choices for their end-of-life care and discussed, where they wished to do so, and recorded. People and their relatives, where applicable, had been involved in planning and making these

decisions.

- Staff monitored people and ensured they received appropriate end of life care and support, when needed.

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

- The registered manager ensured staff were well-supported and had an open-door policy. There was a culture of openness and transparency. A staff member said, "I know the owners and the registered manager very well. I would be happy to speak with them about anything."
- People, relatives and staff told us the service was well-managed. A person said, "Yes, it is well-managed." A staff member told us, "They (the registered manager) are really strict, but in a good way, they tell you what's right and what's wrong in a nice way, it's really good they do that so we know what's right."
- People, relatives and staff told us they believed the service was changing for the better. One relative told us, "With the registered manager [name of person] has a laugh and a joke. She (the registered manager) heard him say he loves and walk and she came and said 'I am going shopping, do you fancy it?'. [Name of relative] goes out with her regularly to the shops."
- The registered manager had a well-developed system for monitoring and reviewing all aspects of the service. Regular checks and audits took place as planned. These included people's views about their care and the attitudes and behaviours of staff.
- At present the owners were working alongside the registered manager to develop and improve the service. The owners had daily oversight of all aspects of the service. We discussed with the owners how they would develop a more formal structure of checks and oversight in the future.

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

- Regular staff meetings had commenced with a clear agenda, topics for discussion and meeting minutes. Staff were encouraged to contribute their views. A staff member told us, "I think staff are listened to."
- People's views had been sought about the improvements to the running of the home. People and relatives were spoken with regularly and the new owners were known by all. A get-together had taken place in May with a planned formal meeting for the end of July. A person told us, "Oh yes, they listen."
- The registered manager had plans to introduce a more formal feedback system, including questionnaires and surveys, in the future.

Continuous learning and improving care; Working in partnership with others

- Despite the short length of time the new owners and registered manager had been in place there was a

clear commitment to continuous learning and improving care. An experienced staff member said, "I'm learning every day!"

- The service had developed links with the local primary school and scout group.