

## South West Care Homes Limited

# Lake View

### Inspection report

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### Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

### About the service

Lake View is a residential care home that provides personal care for people aged 65 and over. There were 16 people living there at the time of the inspection. The building has been adapted to accommodate 29 people.

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

Staff were attentive to help people keep safe and comfortable. People received their medicines on time. Staff responded to changes in people's health and well-being and worked with health and social professionals to benefit those living at the home. A visitor reported their relative said, "They look after me here and I don't think I could be anywhere better."

People were protected from abuse because staff understood their safeguarding responsibilities. Care staff were recruited safely. Staff recognised the importance of team work to provide consistent and safe care. There were systems in place which enabled the registered manager to monitor the quality of care and the safety of the service. Work had taken place to update the décor of the home. The home was clean. Staff had access to protective equipment to protect people from the risk of infections.

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.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 22 January 2020).

### Why we inspected

We undertook this inspection as part of a random selection of services rated Good and Outstanding. We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Lake View on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

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### 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?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our safe findings below.

# Lake View

## 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

One inspector completed the inspection.

#### Service and service type

Lake View 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, and both were 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 inspection was unannounced.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was a registered manager in post.

#### What we did before the inspection

The provider completed 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 reviewed information we had received about the service since the home had been registered. We used all this information to plan our inspection.

#### During the inspection

During the inspection, we spoke with three people living at the home to explain our role. Ten relatives responded to our survey. All were positive about the quality of the care and the skills of the staff and registered manager. We observed staff practice and spoke with the registered manager. We reviewed care records, complaints and compliments, survey outcomes, staff files, records of accidents/ incidents, audits and quality assurance records.

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 comment directly on their experience with us.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question Good. The rating for this key question has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The service provided safe care to people. People said they felt safe with staff because they responded quickly. For example, "It's good here...you only have to ask if you want help" and "It's first class...wonderful carers." People were at ease and looked comfortable in the company of staff.
- Relatives praised the standard of care and the commitment by staff to keep people safe. For example, how they supported a person when they first moved in. One relative told us, "(Name), the manager, and her lovely staff provided good support to mum during this transition phase. Yes, there were lots of tears from mum but lots of hugs and smiles from the staff who were working under enormous pressure to keep everyone safe."
- There were appropriate safeguarding policies in place and displayed information gave people the information they needed to report safeguarding concerns.
- Staff had received training on how to safeguard people. Staff said, "All staff work together to be sure all the residents are safe and happy. For me it's like a second family."
- The provider had systems in place to check safeguarding referrals had been made to the local safeguarding team when required.
- The registered manager demonstrated their safeguarding knowledge and responsibilities by the actions they had taken to safeguard individuals living at the home following concerns.

Assessing risk, safety monitoring and management

- People's care assessments included risks to their health and well-being. For example, one person explained to us how they needed assistance to move. They told us staff moved them in a safe manner using equipment, and that they were well looked after. Their records confirmed their mobility needs had been assessed, and clear instructions were in place for staff to follow.
- People's care needs were regularly reviewed, and where necessary updated to ensure they reflected the person's current needs. Where necessary, care records identified risks in relation to falls, nutrition and continence.
- Relatives were complimentary about the skills of the staff team. For example, staff are "approachable, polite and friendly" and, "The staff are always very polite and helpful. If a person is feeling ill, they do not hesitate to get them checked by a doctor." Another relative said staff were "quick to identify health issues as they occur, responding appropriately and liaising with GPs and local health services."
- Staff confirmed there was good communication, both verbal and written, to ensure they were kept up to date regarding people's well-being and physical health.
- The registered manager shared information about changes to people's health needs, and we saw from records these had been communicated to staff in a timely way. A relative said, "Now as (name) is entering the final stages of life (the registered manager) and the team have taken all necessary steps to ensure

(name) is comfortable. (The registered manager) is in regular communication with the GP as events unfold, this is of huge comfort to me..."

- The provider had systems in place to check the safety and effectiveness of the environment and equipment. Checks included, for example, hot water temperatures, equipment and bed rails.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

#### Staffing and recruitment

- The staff team met people's care needs. People told us, "It's excellent here." Staff were attentive, for example checking on people's comfort. Some staff said they would like more social activities for people. The registered manager advised as restrictions were being lifted more entertainment could be arranged. Relatives commented, "They often have activities to help residents with their mental health as well as their physical needs" and "I have been impressed by the person-centred approach to resident wellbeing."
- Some staff queried whether the staffing levels were appropriate because some people needed two members of staff to move them and so could potentially take them away from supporting others. The registered manager said the number of admissions was being closely monitored to reflect the staffing levels, which was why the home's occupancy was reduced.
- Relevant checks were completed to ensure staff were suitable to work in a care setting. For example, Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. Records were well kept and showed good recruitment practice.

#### Using medicines safely

- People received their medicines in the way prescribed for them. During the inspection, the registered manager spoke with a GP to ensure the timings of medicines were correct for a person who had just moved to the home.
- Medicines were well managed, including those requiring extra security. We checked stocks and saw records were correct and medicine administration records were completed appropriately.
- Staff received training and were checked to make sure they gave medicines safely before they were authorised to administer them. Staff competency checks were completed to ensure their practice was safe.
- Monthly medicines audits were completed, and any actions needed were recorded.

#### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections. A relative said, "I have been impressed by the recent Covid protocols when some staff and residents - including (name) - have had Covid, and good measures were put in place to keep people safe."

- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was people safely to the service. Visitors told us how their relative had been admitted in a safe way during the pandemic.
- We were assured that the provider was using PPE effectively and safely. Staff practice showed good understanding of infection control measures. A relative said, "Lake View has done everything they can to protect every resident through the last two years through this awful pandemic."
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises. Visitors and people living at the home praised the cleanliness of the home.
- We were assured that the provider was making sure infection outbreaks could be effectively prevented or managed. The registered manager and a staff member had lived on-site during the pandemic to ensure the safety of people living at the home.
- We were assured that the provider's infection prevention and control policy was up to date.

#### Visiting in care homes

- Staff worked hard to keep people safe during the pandemic. Families appreciated their approach and the leadership of the registered manager to ensure there was good practice. They told us, "Their care and patience with our Mum has been exceptional, especially over the pandemic, when they kept their residents' safe but accommodated visits when it was possible to do so."

#### Learning lessons when things go wrong

- There were systems in place that ensured accidents, incidents or near misses were reviewed by the service management, and remedial action was taken to reduce any identified or emerging risk.
- Where necessary, the service had escalated concerns to professionals, including safeguarding, to help reduce the risk of recurrence.



# 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 our last inspection we rated this key question Good. The rating for this key question has remained 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

- Conversations with the registered manager, feedback from staff, relatives and people showed Lake View was a welcoming and homely environment.
- Staff, people and visitors praised the leadership and skills of the registered manager in making the home a good place to live, visit and work. Comments included, "The home is well-led by the registered manager and it is clear that she leads her team - including by example - in a caring and respectful approach to care" and "We have found the manager, (name), extremely helpful and always willing to listen to anything we feel our friend needs."
- Staff commented positively on the teamwork of the staff group and how they were encouraged to complete training and learn new skills. For example, a staff member said they had been provided with relevant training specific for their role, including in areas such as dysphagia, calorie increased meals, end of life food and fluids, diabetes, allergies and dementia.

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

- When required, relatives or those acting on people's behalf were informed as soon as possible of any adverse incident.
- People's relatives told us they felt well informed about all matters within the service. This reassured them their family members were safe and living in a well-run home. A relative said, "There have been strong communications between the manager and family, and we have always felt fully informed and involved...I would have no hesitation in recommending Lake View to anyone requiring such accommodation and support."

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

- Staff were clear about their own roles and responsibilities but also recognised how good supportive teamwork benefited people living at the home. For example, in how they shared information to ensure risks were managed and changes in people's well-being were monitored.
- People said they would recommend the home to others.
- There was a range of effective quality monitoring and governance systems embedded in the service. This meant the risks of poor care being received were reduced. This included a service improvement plan. This was reviewed with the providers representative to demonstrate the effectiveness of their internal monitoring

systems.

- The registered manager had notified the Care Quality Commission (CQC) of events which had occurred in line with their legal responsibilities.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning, improving care and working in partnership with others

- There were systems to ensure feedback could be sought from people, relatives and staff to help improve the service. The registered manager was due to send out annual surveys to gain feedback from people visiting and living at the home. There was evidence of actions being taken in response to feedback, such as repairing the potholes in the drive and replacing carpets. Work had taken place to update the décor of the home
- Staff confirmed they felt supported in their job by each other and by the registered manager. The registered manager explained there were systems in place to help staff achieve their full potential and to contribute to the service, for example through supervisions.