

Mr John and Mrs Joan Kershaw Lancaster Court Residential Care Home

Inspection report

21 Lancaster Road Birkdale Southport Merseyside PR8 2LF Date of inspection visit: 28 April 2022

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Good

Tel: 01704569105

Ratings

Overall rating for this service

Is the service safe?	Good	
Is the service well-led?	Good	

Summary of findings

Overall summary

About the service

Lancaster Court is a residential care home that provides accommodation and personal care for up to 30 people some of whom were living with dementia. At the time of our inspection, there were 27 people using the service.

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

People received care and support from the right amount of suitably skilled and qualified staff. People told us there were enough staff to assist them and that they felt safe with staff and trusted them. The recruitment of new staff was safe. Applicants suitability and fitness was thoroughly checked before they were offered a job.

Risk assessments were completed, and measures put in place to minimise the risk of harm to people and others. Regular safety checks were carried out on the environment and equipment. People told us staff provided them with safe care and support.

There were processes for protecting people from the risk of abuse. The registered manager and staff knew the signs and indicators of abuse and the procedures for reporting allegations of abuse to other agencies.

Safe infection prevention and control practices were followed to minimise the spread of infection, including those related to COVID-19.

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.

The culture of the service was positive and inclusive. People received person-centred care and experienced good outcomes.

People, family members and staff were complementary about the way the service was managed, they described the registered manager as supportive and approachable and felt involved and listened to.

The systems used to assess, monitor and improve the quality and safety of the service were effective.

There was good partnership working with others to make sure people received joined up care.

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

Rating at last inspection and update The last rating for this service was good (published 27 October 2017).

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Why we inspected

We undertook this inspection as part of a random selection of services which have had a recent Direct Monitoring Approach (DMA) assessment where no further action was needed to seek assurance about this decision and to identify learning about the DMA process.

We undertook a focused inspection to only review the key questions of Safe and Well-led. Our report is only based on the findings in those areas reviewed at this inspection. The ratings from the previous comprehensive inspection for the Effective, Caring and Responsive key questions were not looked at on this occasion. Ratings from the previous comprehensive inspection for those key questions were used in calculating the overall rating at this inspection.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has stayed the same based on the finding from this inspection.

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.

During this inspection we carried out a separate thematic probe, which asked questions of the provider, people and their relatives, about the quality of oral health care support and access to dentists, for people living in the care home. This was to follow up on the findings and recommendations from our national report on oral healthcare in care homes that was published in 2019 called 'Smiling Matters'. We will publish a follow up report to the 2019 'Smiling Matters' report, with up to date findings and recommendations about oral health, in due course.

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
Is the service well-led? The service was well-led.	Good ●



Lancaster Court Residential Care Home

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

This inspection was completed by one inspector.

Service and service type

Lancaster Court 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. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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.

Notice of inspection

This inspection was announced the day before it took place.

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. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with eight people who used the service and two family members about their experience of the care provided. We also observed interactions between staff and people living at Lancaster Court. We spoke with the registered manager, care workers and ancillary staff.

We reviewed a range of records. This included three people's care records and multiple medication records. We reviewed staff recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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 was good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- Staffing and recruitment arrangements were safe.
- People received safe care and support from the right amount of suitably trained staff. People and family members comments included, "Plenty of staff to help me, they see to me when I ask" and "Very good at their job, [relative] always tells me the staff are very good."
- Applicants underwent a series of pre-employment checks to assess their fitness and suitability for the job including a Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National computer. The information helps employers make safer recruitment decisions.

Assessing risk, safety monitoring and management

- Risks to people were assessed and managed safely.
- Each person's care plan provided information about risks they faced and the measures to minimise the risk of harm to them and others.
- Regular safety checks were carried out on the environment, equipment, utilities and fire safety. Records of the checks and outcomes were maintained. Each person had an up to date personal evacuation plan (PEEP).
- People and family members told us the care staff provided was safe. Their comments included, "They [staff] do things carefully, take their time" and "They [staff] keep [relative] safe at all times."

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. Any conditions related to DoLS authorisations were being met.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong • Systems were in place to protect people from the risk of abuse. • Staff completed safeguarding training and were knowledgeable about their responsibilities for safeguarding people from the risk of abuse. They knew the different types and indicators of abuse and how to report any safeguarding concerns.

• The registered manager knew to alert the local authority safeguarding team and CQC of any allegations of abuse.

• There was a system for learning from accidents and incidents.

Using medicines safely

• Medicines were used safely. Staff had access to up to date polices, procedures and current guidance on how to safely manage medicines.

• Each person had a personalised medication administration record (MAR) detailing their prescribed medicines and instructions for use. Other important information such as known allergies were recorded on the persons MAR. MARs were signed to show when medicines were taken.

• Medicines were stored securely and only administered by staff who were suitably trained.

• People told us they received their medicines when they needed them. Their comments included; "Spot on, never missed" and "Always get my tablets on time."

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 meeting shielding and social distancing rules.
- 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 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.

• 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

Safe visiting procedures were followed. For example, visits took place in people's bedrooms or outside. Visitors were required to sanitise their hands on arrival and on leaving and wear a face mask throughout their visit.

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 was good. At this inspection the 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.

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

- The registered manager had a clear understanding about their role and responsibilities and regulatory requirements; including events they were required to notify the Care Quality Commission about.
- Staff understood their responsibilities, they were provided with job descriptions and had access to the providers policies and procedures to guide them on safe working practices.
- There were effective systems to assess, monitor and review the quality and safety of the service. Regular audits and checks were completed across areas of the service such as people's care, the environment and staffing and outcomes were used to make improvements were needed.

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

- There culture of the service was positive and person-centred which led to people experiencing good outcomes. People told us, "I'm happy, everybody is happy, it's such a nice place to live" and "It's all about what we want."
- Family members commented on the warm and friendly atmosphere, they said the registered manager and staff were always friendly and welcoming and encouraged their involvement, ideas and opinions about the service. Comments included, "They create a real family atmosphere" and "Always ask my opinion about [relatives] care."
- People, staff and family members described the registered manager as very supportive and approachable. They were confident that any concerns they raised would be listened to, taken seriously and acted upon. Comments included, "I have no worries expressing how I feel [manager] always shows an interest and listens" and "Nothing is too much trouble."
- The registered manager understood their responsibilities under duty of candour.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People, staff and family members were involved in the running of the service.
- The views of people, family members and staff, was obtained through care reviews, meetings, general discussions and surveys. Feedback about the service taken from the most recent surveys was positive with all responses ranging from good to excellent.
- The registered manager and staff worked in partnership with other agencies to make sure people received

joined up care and support to meet their needs and keep them safe.