

Mr John and Mrs Joan Kershaw

Lancaster Court Residential Care Home

Inspection report

21 Lancaster Road
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Southport
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Tel: 01704569105

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service effective?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

This unannounced inspection of Lancaster Court took place on 19 December 2016.

Lancaster Court is a residential care home in Birkdale, Southport. The service offers accommodation and support for up to 30 people. The home is spread across three floors including a basement. Car parking is available at the front of the building and there is a garden to the rear of the building.

The service was last inspected in July 2016 and at that time was found in breach of four regulations: Regulations 15, 13, 11 and 17 of the Health and Social care Act 2008 (Regulated Activities) Regulations 2014. These were in relation to the safe management of the premises and equipment at the home, consent, safeguarding and the governance arrangements in the home [how the home was being managed]. We served a warning notice regarding premises and equipment.

This inspection was 'focussed' in that we only looked at the four breaches of regulations to see if the home had improved and the breaches were now met. This report only covers our findings in relation to these specific areas / breaches of regulations. They cover only three of the domains we normally inspect; whether the service is 'Safe' 'Effective' and 'Well led'. The domains 'Caring' and 'Responsive' were not assessed at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Lancaster Court Residential Care Home' on our website at www.cqc.org.uk.

On this inspection we found improvements had been made and the home had taken action to address the issues identified with regards to the environment. In addition, the provider had reassessed people to establish whether they required a DoLS application and this process was much clearer. We saw that people who may be subject to DoLS had the applications in place. For people who could not consent to decisions about their care and treatment, we saw that the registered manager had followed the process to make decisions in people's 'best interest'. Quality assurance systems in place to monitor and improve standards in the home had also been improved. These breaches of regulation and the warning notice were now met.

There was 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.

We spent time looking around the home to check if the areas identified in our last report had been improved. During our last inspection we were concerned regarding the premises and equipment in the home. We felt people were at risk and served a warning notice to the provider to make the required changes within a specified timeframe. We checked this as part of this inspection. We saw there were systems in place to monitor the environment and any required repairs and maintenance was completed, this included a full refurbishment of the sluice room. Carpets had been replaced with flooring across the home, and new

window restrictors had been fitted to windows. The registered manager had taken on a laundry assistant to take responsibility for the task of cleaning people's clothes so there was a minimal chance of cross contamination. The warning notice had been met. We have revised the rating for the safe domain from 'Inadequate' to 'Requires Improvement' as the provider was able to evidence these changes were sustainable.

During our last inspection we found that some people who may require DoLS to be in place did not have them, which meant that people were unlawfully being restricted of their liberty. We found the provider in breach of this regulation. The provider sent us an action plan detailing what action they were going to take and we checked this as part of this inspection. We saw that all people who lived at the home had been re-assessed individually and appropriate applications to the Local Authority had been made. The provider had followed the principles of the MCA with regards to this and this was clearly documented in people's care plans. The provider was no longer in breach of this regulation.

During our last inspection we found that some people were not protected from improper use of restraint. This was because best interest processes had not been followed for people who were unable to give consent due to a lack of capacity. We found the provider was in breach of this regulation and told the provider to take action. The provider sent us an action plan detailing what action they were going to take, and we checked this as part of this inspection. We found during this inspection that for people who lacked capacity appropriate legal processes had been followed and decisions had been made in their 'best interests.' The provider was no longer in breach of this regulation.

During our last inspection we found that the quality assurance procedures were not robust as they had failed to identify the areas highlighted by us during our inspection process. We found the provider was in breach of this regulation and told the provider to take action. The provider sent us an action plan detailing what action they were going to take, and we checked this as part of this inspection. During this inspection we saw that the provider was able to evidence a series of quality assurance processes and audits carried out internally by the registered manager. We found these had been developed to meet the needs of the service. The provider was no longer in breach of this regulation.

While improvements had been made and we have revised the rating for the 'safe' domain from 'Inadequate' to 'Requires Improvement' we have not revised the overall quality rating for the home. To improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review the quality rating at the next comprehensive inspection

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Requires Improvement ●

The service was safe.

The home was clean and odour free.

Equipment had been replaced, and the sluice room had been refurbished.

Maintenance repairs had taken place on the external fixtures in the home, such as the window restrictors and the fire doors to ensure they met with current legislation.

Equipment such as bath chairs and commodes had recently been replaced by the provider and we saw these were clean and in good working order.

Improvements had been made and we have revised the rating for this key question from 'Inadequate' to 'Requires Improvement'. To improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for 'safe' at the next comprehensive inspection.

Is the service effective?

Requires Improvement ●

The service was effective.

The provider had a 'best interests' process in place for people who were unable to consent to their care and treatment. .

The provider had applied for DoLS for people who required them, and mental capacity assessments had been completed for people to show the reason for the application.

While improvements had been made we have not revised the rating for this key question. To improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for 'effective ' at the next comprehensive inspection.

Is the service well-led?

Requires Improvement ●

The service was well-led.

The systems for auditing and checking the environment and people's care plans had changed and were now more robust.

While improvements had been made we have not revised the rating for this key question. To improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for 'well-led ' at the next comprehensive inspection.

Lancaster Court 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.

This inspection took place on 19 December 2016 and was unannounced.

The purpose of this inspection was to see if the provider had made improvements they told us they would make and was meeting legal requirements in the areas of concern identified at the last inspection

The inspection was carried out by an adult social care inspector.

We spoke with the registered manager during the inspection.

We looked around the home, including the hallways, stairs, lounge areas, bathrooms and some people's bedrooms. We checked fire doors, windows and equipment, such as commodes and bath chairs. We looked at the care records and DoLS applications for four people. We checked the quality assurance and auditing systems.

Is the service safe?

Our findings

During our last inspection in July 2016, we identified a number of environmental issues, which compromised the health and well-being of the people living at the home. We found the provider was in breach of regulation relating to this, the 'safe' domain was rated as 'inadequate' and we issued a warning notice. We found during this inspection that the provider had taken action and addressed a number of health and safety issues in the home and had taken steps to ensure maintenance issues were not overlooked. The provider was no longer in breach of regulations in relation to this and the requirements of the warning notice had been met.

During our last inspection we found that window restrictors were not always in line with current health and safety guidance, which meant that people were at risk of falling from windows if they tried to climb out. We also saw during our last inspection that some of the rooms in the home did not have window restrictors. We checked these rooms during this inspection as well as other areas of the home and we saw during this inspection that all window restrictors in the home had been replaced with new ones and were in place on all relevant windows.

We saw during our last inspection that some of the fire doors in the home did not close properly which meant that people would not be appropriately protected if there was a fire. We saw during this inspection that all fire doors we identified at our last inspection had been replaced with new ones, which closed properly.

We identified during our last inspection that there were some concerns with the level of cleanliness and infection control at the home. Some of the bath chairs were rusted which meant that they could not be cleaned properly to prevent cross contamination. We also saw some of the commodes in people's rooms were rusted. We checked this as part of this inspection, and saw that the commodes and the bathroom chairs had been replaced with new ones.

We saw during our last inspection that there was clutter in one of the bathrooms, and the bath was dirty. The pull cord light in this bathroom was also dirty, which meant germs could be passed from one person to the next. We checked this bathroom as part of this inspection and saw that it had been refurbished to a high standard. The pull cord had been replaced with a light switch which could be wiped clean.

We noted during our last inspection that there was an unpleasant odour in some parts of the home, and some of the carpets had spillage stains on them which had soaked in. We saw during this inspection that the carpets in most of the rooms had been replaced with laminate flooring, and the registered manager had plans to re-carpet the entire home. The home was odour free.

During our last inspection we found that the sluice rooms were not meeting infection control standards. This was because the room could not be cleaned properly, the wallpaper was peeling of the walls and the wooden shelving made it difficult to clean splashes of contaminated waste appropriately. We also saw that commode pots were being cleaned in the laundry room every month, which meant that potentially

contaminated waste could come into contact with clean clothes. We saw during this inspection that the provider had refurbished the sluice room, and replaced everything with stainless steel for easier cleaning. They had also purchased a machine to clean the commode pots, which meant that they were no longer taken into the laundry room to be cleaned.

The registered manager had also employed a laundry assistant who was not in post during our last inspection, and they told us this had had a positive effect on the way the laundry was managed as it meant the staff were not having to do this task, therefore giving them more time to spend with people and the home, as well as reduce the risk of cross contamination.

These examples show that the provider had taken action since our last inspection and has met the warning notice. Improvements had been made we have revised the rating for this key question from 'Inadequate' to 'Requires Improvement'. To improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for 'safe' at the next comprehensive inspection.

Is the service effective?

Our findings

During the last inspection we identified concerns in relation to the use of the MCA and best interests and the provider was found to be in breach of regulations regarding this. The 'effective' domain was rated as 'requires improvement.' During this inspection we looked to see if the provider had made the improvements they told us they would make to ensure they were compliant with legislation and we found that improvements had been made.

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 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 when this is in their best interests and legally authorised under the MCA. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The DoLS provide a legal framework to protect people who need to be deprived of their liberty in their own best interests.

During our last inspection we were told by the registered manager that there was no one at the home subject to DoLS, however we observed a number of people living at the home who met this criteria due to them being under constant supervision or potentially lacking capacity to make decisions. There were no formal capacity assessments completed for people to check if a DoLS needed to be in place. We found during this inspection that the registered manager had formally assessed people living at the home who may need a DoLS. We saw the outcome of these assessments and saw that DoLS had now been appropriately applied for if people required them. The provider was no longer in breach of this regulation.

We saw during our last inspection that the registered manager had not always evidenced when a 'best interest' decision had been taken for someone who did not have capacity to understand the decision themselves. For example, at our last inspection in July 2016, we saw that one person had bed rails in place to keep them safe; however, there was no best interest process in place for this decision. We saw during this inspection that the registered manager had taken action and arranged for best interest meetings to take place which included the person's family and other professionals involved in their care. We saw the minutes of these meetings documented including how the best interest decision was reached. The provider was no longer in breach of this regulations.

While improvements had been made we have not revised the rating for this key question. To improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for 'effective' at the next comprehensive inspection.

Is the service well-led?

Our findings

At our previous inspection in July 2016, we had some concerns about the checking and auditing systems in the home as they had failed to effectively monitor key aspects of the running of the home such as the equipment which needed replacing, the fire doors and window restrictors. We also found the registered manager had not regularly checked people's care plans to determine if they needed DoLS to be in place due to changes in their capacity. We found the provider in breach of this regulation and the 'well-led' domain was rated as 'requires improvement.'

During this inspection we checked to make sure improvements to the quality assurance process had been carried out. We found improvements had been made and the general running of the home was more organised. Auditing systems had been developed to monitor safe standards, including when repairs and maintenance needed to be carried out, and when fire doors needed to be checked. General cleaning schedules for the sluice rooms and bath chairs were now implemented which the registered manager checked every week.

The registered manager also showed us a new audit tool which highlighted that they were closely monitoring people's care plans for any changes so they could take action when needed. The quality assurance systems at the home had improved and the provider was no longer in breach of this regulation.

While improvements had been made we have not revised the rating for this key question. To improve the rating to 'Good' would require a longer term track record of consistent good practice. We will review our rating for 'well-led' at the next comprehensive inspection.