

Mrs Joan Stewart

The Lawns Care Home

Inspection report

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Date of inspection visit:
08 November 2016

Date of publication:
03 March 2017

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

This comprehensive inspection was carried out by one inspector and took place on 8 November 2016. The inspection was unannounced.

The Lawns provides accommodation with personal care for up to 12 people over the age of 18 who have a diagnosis of a learning disability. People had a range of care needs and some had communication difficulties associated with their learning disability. The home is staffed 24 hours a day. At the time of the inspection, eleven people had lived at the home for a number of years. The home is a large three storey house which also has a separate self-contained two bedroomed flat in an annexe. All bedrooms were for single occupancy, two rooms on the second floor of the main house were en-suite and had a small kitchenette and sitting room. These two rooms as well as the two in the annexe allowed people to live semi-independently. At the time of inspection, 10 people were living in the main house and one person was living in the annexe.

The service was previously inspected in October 2013 when the service was found compliant with all the regulations inspected.

The home was well-run by a registered manager, who had worked in the service since it had started in 1992. They described their passion and commitment to the people at The Lawns Care Home, which was evident throughout the inspection. In October 2016, they had registered with the CQC as the manager. 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. The provider also worked at the home most days of the week. People, their families and staff were all very complimentary about the provider, the registered manager and the home. Comments included "fantastic people" and "Both of them are so wonderful." Staff were also described really positively, for example "always supporting [my relative] to get the most out of life."

The provider and registered manager had a clear vision for the home and the people who lived there. They described how they, and the staff, were committed to ensuring people were supported to live as independently as possible. The home's statement of purpose described how the main aim of the service was "to enable people with learning difficulties to lead a fulfilled life... encouraging and working with the Service User to be fully integrated into the community in which they live and to take part in its activities according to their individual needs, abilities and interests." Throughout the inspection we found evidence that these aims were lived up to. Staff followed these principles, treating people with kindness, friendliness and compassion. Staff made sure people had time to decide what they wanted to do both in the home and outside. People were then supported to do their choice of activity.

People were at the heart of the service and were involved in decisions about the home and the support they wanted. Activities were inclusive so everyone was supported to take part. People were happy and excited about what they were doing throughout the inspection. People were encouraged to be part of the local community. For example, people were involved in lots of local celebrations of festivities, including helping to make decorations for a Christmas tree as part of a local church Christmas Tree festival. The home also took an active part in the town's Goose Fair which was held each year, having a stall to sell produce they had made. People also described how they were involved in drama sessions which led to a production, as well

as planning a trip to a pantomime. People chatted to staff about these activities as well as describing other visits and trips they had done. These included holidays and day trips to local attractions. A recent newsletter which was sent to relatives had been partly written by people in the home and described how much they had enjoyed these activities. The home also arranged for entertainers and other visitors, such as Zoo lab to come to the home. People proudly showed us photos of them holding some of the animals that had been brought, including a snake and a very large snail.

People were encouraged to be independent and make decisions wherever possible. One person had been supported to achieve a personal goal of showering independently. Records showed this had been discussed with the person and monitored so that they were now able to do this with minimum staff support. People living in some areas of the home were able to live semi-independently, preparing some meals for themselves and undertaking housework such as cleaning their lounge and kitchen areas. They described how much they enjoyed having their independence whilst recognising the support was there when they needed it.

People were also supported to maintain and increase their independence outside their home. One person worked at a local hotel and some people were also able to go out on their own to the bank and shopping. People attended local clubs to enable them to maintain particular interests and hobbies as well as friendships. Although the atmosphere was lively, staff recognised that some people needed space, peace and a slower pace at times. When this happened, people were encouraged to use quieter areas of the home including the lounge and their bedrooms.

People did activities of their choice and were encouraged to try new things. Staff supported people to achieve their ambitions and potential. People undertook activities on their own and in groups, including work and social activities. These included sports, art, hobbies and social events.

The registered manager was committed to continuous improvement and had looked at ways to improve. This had included introducing a framework to support people with end of life care and bereavement. Staff had been trained to consider how to support people at their end of life with the aim to feel calm, pain-free and safe. The registered manager monitored that the changes had been effective by surveying people, their relatives, visitors and staff. Comments from everyone were very positive about the home and the staff. People were consulted about how the home was run through regular meetings. Staff had worked with people to make these meetings meaningful and inclusive. Meetings were used to support people to choose the menus for the coming days as well as agree any group activities, for example where to go for holidays. People and staff were also involved when new people were being assessed to live in the home as well as recruitment of new staff. This meant they had the opportunity to choose who lived and worked in the home.

The body language and the conversations of people living at The Lawns showed they were happy and felt well-supported in a safe, comfortable and well-maintained environment. We saw people being treated with respect and dignity, with staff supporting them to have as much independence as possible doing activities they clearly enjoyed. People laughed and joked with staff who responded in a friendly, caring manner whilst maintaining professionalism. One person said "It's my home"; another person said "I love it here." Relatives commented that "Staff are amazing."

Relatives were very complimentary about how their family member was supported and cared for. They described the home as "fantastic" and said staff were "always supporting [my relative] to get the most out of life."

People were encouraged to keep in touch with their family. Staff supported some people to visit their relatives regularly as well as contacting them by phone. Relatives described how they had also been supported by staff in the home and were welcomed as part of the "extended family." People's privacy was respected by staff.

Everyone we spoke with praised the home, the manager and staff for supporting people to meet their physical, health, social and domestic needs and aspiration. They described how staff involved them and asked their help and advice when needed. People described how they were involved in care reviews.

Records confirmed that people had signed to show care reviews had been discussed with them and that they had agreed the information recorded.

Staff were recruited safely and were provided with a comprehensive induction before they started working with people on their own. Staff were supported, through supervision and appraisal, to reflect on their work with a manager. Staff were trained to deliver care to each person and received regular updates and opportunities to develop their skills further. All the staff were very positive about working at The Lawns and praised the provider and the registered manager.

People's medicines were stored, administered and recorded safely. Staff had received training to support them in their role, both when they first started working at the home and in order to refresh their knowledge and skills.

Meals were important social occasions which people clearly enjoyed. Meals were prepared using fresh ingredients in a safe clean kitchen. People were supported to have a healthy diet of their choice. Where people prepared some meals for themselves, staff supported people to do this safely.

People had access to health and social care professionals to help them maintain good health. People's capacity to make decisions about specific aspects of their care, for example their capacity to go out on their own, was assessed. Where they were deemed not to have capacity to make a particular decision the registered manager had recorded this and taken steps to ensure they worked within the Mental Capacity Act 2005. The registered manager confirmed they had discussed Deprivation of Liberty Safeguards (DoLS) authorisations with the local authority during the inspection. This meant they had considered whether people were being restricted. Where appropriate they were taking steps to ensure applications for DoLS authorisations were made.

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.

There were sufficient staff to keep people safe and have their needs met.

People were protected from the risks of abuse by staff who understood their responsibilities.

Medicines were stored, recorded and administered safely.

Risks to people had been assessed. People were supported to remain safe whilst ensuring they maintained as much independence as possible.

Is the service effective?

Good ●

The service was effective.

Applications for Deprivation of Liberty Safeguards (DoLS) authorisations had not been made in line with the requirements of the Mental Capacity Act 2005. The registered manager contacted the local DoLS team to discuss whether these were necessary this after the inspection.

People were supported by staff who had the necessary skills and knowledge to carry out their role effectively.

Staff were provided an induction when they first joined and refresher training to update their knowledge.

People were supported to maintain a healthy, balanced diet.

People were supported to access health services.

Is the service caring?

Outstanding ☆

The service was very caring

There was a family atmosphere in the home. People showed throughout the inspection how much they liked staff and were comfortable with them. People were treated with kindness and

respect by staff who knew them really well.

All the comments from people, relatives and other visitors to the home were extremely positive. They included "This is my home"; "Unbeatable. Blooming marvellous." and "Like family...very well blessed."

People were treated with dignity and respect. Staff ensured that people had the choice to spend time on their own if they wanted as well as with others.

Staff knew people well and showed concern for their well-being and happiness.

People were involved in making decisions about their care.

People's families were welcomed into the home. Relatives and other visitors spoke about how they were seen as part of an extended family, who were cared for by the provider and staff.

Is the service responsive?

Good ●

The service was very responsive to people.

People received care that reduced the risks to them and met their physical, emotional and spiritual needs. Care records also described people's preferences and aspirations. Records showed that people had been supported to achieve these.

Care records were updated when there were changes to people.

The service routinely listened to people. Everyone spoken with described how their input was valued and acted on.

There was a complaints policy and procedure. People said they knew how to complain. There had been no complaints received. People said they had never had to complain about anything, but they knew that the registered manager would listen and take action if ever necessary.

Is the service well-led?

Good ●

The service was well-led.

The home promoted a positive culture and involved people, their relatives and staff in developing the service. The home was very much part of the local community. The registered manager understood the importance of being involved in local events and

celebrations. They encouraged people and staff to take part in fund-raising activities for charities by running stalls and coffee mornings.

Staff and people knew the registered manager and provider extremely well. They said they were very visible in the home and they were always supported by them.

Checks and audits to ensure the quality of the service were undertaken and actions were completed to make improvements where issues were identified.

The home had an annual plan which supported a pro-active, on-going approach to ensure that quality and safety was monitored and improved.

The Lawns Care Home

Detailed findings

Background to this inspection

Start this section with the following sentence:

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 8 November 2016 and was unannounced. It was carried out by one Adult Social Care inspector.

Prior to the inspection we reviewed information we held on our systems. This included statutory notifications which had been submitted to us. A notification is information about important events which the service is required to tell us about by law. We had asked the provider to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. The provider had completed this in August 2016.

We spoke with three care staff working at the home on the day of the inspection, as well as the registered manager and the provider.

At the time of this inspection, 11 people were living at The Lawns Care Home. We met everyone living in the home and spoke to 10 of them about their experiences at the home. We also spoke with a visitor to the home and a relative during the inspection.

We looked at a sample of records relating to the running of the home and to the care of people. We reviewed two care records, including risk assessments, care plans and three medicine administration records. We reviewed two staff records. We were also shown policies and procedures and quality monitoring audits which related to the running of the service.

After the inspection we contacted 11 health and social care professionals, including GPs and district nurses

at a local surgery. We received 2 responses.

Is the service safe?

Our findings

People said they felt safe and cared for living at The Lawns. Comments included "I love it here"; "I am very happy here." "It's really nice here, staff look after us and help us do things we enjoy." Our observations throughout the inspection confirmed this as people were relaxed and happy with staff. A health professional commented "I have been involved with the Lawns for some years. It is the best home I visit by far."

People at the Lawns were protected from the risks of abuse. Staff had been trained in how to safeguard vulnerable adults from the risks of abuse. Staff had a good understanding of how to keep people safe. They were able to describe their responsibilities for reporting accidents, incidents or concerns.

The registered manager described how they supported people to understand what to do in the event of an emergency such as a fire in the home. People and staff were involved in regular fire drills. Records confirmed that these had taken place. There were also personal emergency evacuation plans in each person's care record which described how to support people to remain safe. People were able to tell us what they should do if they heard the fire alarm. For example one person described what actions they would take, which included describing the nearest fire exit they would use.

Risk assessments had been undertaken to assess the individual risks to people of undertaking particular activities. People were supported to take risks to retain their independence whilst any known hazards were minimised to prevent harm. For example, on the day of inspection, two people had been together to the bank so they could withdraw their money. Staff said they had supported them to do this by helping people to understand the risks involved. For example, people understood the importance of taking care of their bankcard PIN.

People were protected against hazards such as falls, slips and trips. One person had been assessed as at increased risk of falling. To reduce the risks, they had agreed to move to a room on a lower floor which meant they did not need to use the stairs to access the dining room. Staff were able to describe how if the person wanted to use the stairs they were supported by staff. People involved in accidents and incidents were supported to stay safe and action had been taken to prevent further injury or harm.

There were sufficient staff to meet people's care and support needs. People said there were enough staff to support them to do what they wanted. The registered manager explained how they ensured there were always two staff on duty, one male and one female. They said this was because some people had expressed a preference to be supported with personal care by a particular gender. They also described how the staffing levels were increased at various times of the week to support people with particular activities outside the home. For example, some people chose to attend a drama session each week. The registered manager arranged for two staff to support these people. Another two staff were on duty in the home at this time to support people who did not wish to attend the drama group. At night there were two staff on duty, one waking and one sleeping in. Rotas confirmed the staffing levels.

Safe recruitment procedures ensured that people were supported by staff with the appropriate experience and character. The registered manager said they had 15 staff including a cleaner and handyman. They said they did not need to use agency staff as existing staff, including bank workers, would always fill gaps in the rota. They also described how they were planning to recruit an additional member of staff but wanted to ensure they employed the "right person for the job" rather than rushing. Most staff had worked at The Lawns Care Home for a number of years.

Where new staff were employed, the service followed safe recruitment practices. Checks were made to ensure staff were of good character and suitable for their role. Staff files included application forms, records of interview and appropriate references. Records showed that checks had been made with the Disclosure and Barring Service (DBS) to make sure people were suitable to work with vulnerable adults. The DBS is a criminal records check which helps employers make safer recruitment decisions and helps prevent unsuitable people from working with people who use care and support services.

Peoples' medicines were, stored, managed and administered safely. The service used a measured dosage system (MDS) for the majority of medicines. We observed a medicine round where two staff were involved in checking what medicines were to be given to each person, before they were administered. Both staff then signed the medicine administration record (MAR) to say the medicines had been taken. The MARs were completed for each person correctly.

Where medicines were administered which were not MDS, staff had systems to ensure these were given safely. For example, creams and lotions were labelled with when they were opened and when they should be discarded. There were also systems, which included advice from the person's GP, to support the person to take homely remedies.

Some people were able to self-administer their own medicines. The registered manager explained how they had supported one person to gradually take responsibility for self-administering their medicines. They also described how they did regular audit checks to ensure that the medicines had been taken.

People understood the reason and purpose of the medicines they were given. People had been given information about what medicines they were being given and were able to describe what the medicine was for. For example, one person said the medicine they took was "for my heart" while another person said their cream was "for my feet." This showed that the provider supported people to understand what they were taking, which is good practice.

The home was clean and odour-free throughout. People were encouraged to help with keeping their bedrooms and personal spaces clean. Staff supported them with this to ensure they were kept safe when using cleaning products.

Is the service effective?

Our findings

People received individualised care from staff who had the skills, knowledge and understanding needed to carry out their roles.

People said staff knew and understood how to support them. A relative spoke very positively about staff and told us "Staff are amazing" and a visitor to the home described how staff were "so good at helping people achieve their potential."

Staff said they had the training and skills they needed to meet people's needs. New staff described how they had the training they needed when they started working at the home. For example, they described how they undertook training and read care plans before shadowing more experienced staff in the home. The induction was aligned to the nationally recognised Care Certificate. The Care Certificate was developed by Skills for Care. It is a set of 15 standards that all new staff in care settings are expected to complete during their induction.

Staff were also supported to refresh their training from time to time. Records showed that most staff completed training which included safeguarding, fire safety and moving and handling. The registered manager explained that they used different types of training depending upon the subject matter. For example, they said that some training was done using a booklet which provided information and questions for staff. Once completed, these booklets were marked and the results fed back to staff. They also described courses including first aid which was delivered in face to face sessions.

People were supported by staff who had supervisions (one to one meeting) with their line manager. Staff said supervisions were carried out regularly and enabled them to discuss any training needs or concerns they had. A member of staff said they received regular supervision, but also added, "I can speak to the [registered manager] or [provider] if I have a problem and they will always help."

The registered manager said that where a member of staff had not completed the required training, this was raised with them in supervision and in staff meetings. They described how staff then did take action to address the training.

The Mental Capacity Act (MCA) 2005 provides the legal framework to assess people's capacity to make certain decisions at a certain time. When people are assessed as not having the capacity to make a decision, a best interests decision is made involving people who know the person well, such as relatives or friends, and other professionals, where relevant.

At this inspection, we found staff had an understanding of the Mental Capacity (MCA) 2005. People or their legal representatives were involved in care planning and their consent was sought to confirm they agreed with the care and support provided.

The registered manager ensured where there were concerns that a person may lack capacity to make a

specific decision, a best interest assessment was carried out. Care records showed a best interests meeting had been held to determine whether a decision was in a person's best interests. For example, one person had indicated they did not want to have a routine invasive test carried out. There was evidence in the person's care record that a best interests meeting had been held with the person as well as a health professional, where it was agreed that they had capacity to make that decision and therefore it should not be carried out.

Where people are deemed to not have capacity to make a decision about a particular issue, it may be necessary to consider whether they are being deprived of their liberty in relation to the issue. If this is found to be the case, an application for a Deprivations of Liberty Safeguards (DoLS) authorisation must be made. In these circumstances the provider must do all they can to find the least restrictive ways to meet the person's needs. DoLS provide legal protection for those vulnerable people who are, or may become, deprived of their liberty. The safeguards exist to provide a proper legal process and suitable protection in those circumstances where deprivation of liberty appears to be unavoidable and, in a person's own best interests.

We found the registered provider was not following these principles with regards to people whose liberty was restricted. They described how some people were not at liberty to go out on their own as they had assessed that it would be unsafe for them to do so. However the registered manager described how staff were always happy to support a person should they wish to go out. Our observations confirmed this, for example, when staff discussed with one person when they would like to go out.

The registered manager said they had not applied for any DoLS authorisations. We discussed this with them and they agreed to contact the local authority to discuss whether applications needed to be submitted. After the inspection, the registered manager emailed us to say they had been in contact with the local authority DoLS team who were going to visit them to discuss whether it was necessary to submit DoLS applications for anyone.

People's wishes and preferences had been followed in respect of their care and treatment. For example, staff discussed with one person which bedroom they wished to have as staff were concerned about the number of stairs the person had to climb. The person said they did not want to move rooms and staff acknowledged and supported them with this decision.

The staff were aware of people's dietary needs and preferences. Staff described what people liked to eat and were also aware of people's individual needs. People's dietary needs and preferences were also clearly recorded in their care plans.

People said how much they liked the food and were able to make choices about what they had to eat. For example, during the inspection, people were asked what they would like for lunch and were given a choice. Although most people opted for a bacon sandwich, some people said they would prefer a different sandwich filling which was provided. Menus were agreed at resident meetings. There were very positive comments on the chicken curry with accompaniments, which was freshly prepared and served as an evening meal during the inspection. These included "very good", "really nice" and "tasty!" Fresh fruit and drinks were also on offer during mealtimes and throughout the day.

People were encouraged to get involved in preparation for the meals, for example one person said they enjoyed peeling the potatoes and also laying tables. Another person said they enjoyed emptying the dishwasher and clearing up. Some people also had facilities in their bedrooms to make drinks and snack meals for themselves when they wanted. One person described how they liked to eat their main meal with

another person living in the home, although they usually prepared and ate breakfast and lunch separately. Staff sat and ate the meals with people. The registered manager said this was important for both people and staff. During lunch, people were having lots of conversations with each other and staff. These included making plans for the afternoon activities as well as discussing the morning events. Staff said that eating the same meal at the same time helped them to chat informally with people in a relaxed environment.

People were referred appropriately to the dietician and speech and language therapists if staff had concerns about their wellbeing. For example if they were at risk of choking or because they were on a blood thinning medicine which meant they needed to avoid certain foods.

People had access to health and social care professionals. Records confirmed people had access to a GP, dentist and an optician and were supported to attend appointments when required. People had annual review with their GP to support their ongoing health. Where health issues were identified, records showed relevant health and social care professionals were involved with people's care. Care plans were in place to meet people's needs in these areas and were regularly reviewed.

Some adaptations to the environment of the home had been made to meet the needs of people who lived there. There were some bedrooms which had been altered so they supported people to be semi-independent. Two of these bedrooms were in the main house, while a further two were in an annexe. The registered manager said the two bedrooms in the house were for people who needed more support than those in the annexe. Where appropriate, people living in these areas were supported to develop life skills such as cooking and cleaning. This meant that it was possible for someone to be supported to become more independent over time. Some people had been supported to become more independent as the home had four bedrooms which were self-contained. The registered manager described how some people in the past had been supported to move from The Lawns to more independent living. They also said that this was not always possible as it was dependent on a person's ability to manage their own care. There were spaces for people to use, both indoor and outdoor including a large lounge and a garden. The home was warm, comfortable, light, well-maintained and well decorated throughout.

Is the service caring?

Our findings

The registered provider and registered manager viewed the home as an extended family. Both of them had worked in the home since the service had started and were able to describe the qualities they felt were important about the care they delivered.

Everyone using the service, as well as relatives, visitors and staff spoken with, also described this ethos of being one big family who supported each other during difficult times and celebrated with each other on happy occasions. Comments included "Cannot recommend more highly"; "So glad we found it"; "Amazing staff" "Such fantastic, personalised care" and "Second to none."

Most of the people living at The Lawns had done so for many years and knew the staff very well. People told us they were happy with the care they received. Comments included "This is my home" and "I really like living here." Throughout the inspection there was banter and laughter between people and staff, clearly enjoying each other's company. For example, people joked during the mealtime with staff who were eating with them. There were also excited discussions about the events that people and staff were planning in the lead up to Christmas. This included trips to a pantomime, meals out and a party for friends and family.

Relatives and friends were seen as part of the 'home's extended family'. Every relative and visitor to the home was effusive in their praise of the home and the staff who worked there. All described it as exceptional in terms of the care and support given to people and themselves. For example one relative who had needed support described how they had been invited to share Sunday lunch each week. A relative described the care as "Like family...very well blessed." Other comments included "fantastic staff"; "Brilliant home, second to none" and "Unbeatable. Blooming marvellous." A visitor said that as they were not always able to visit the home, staff supported their relative to visit them twice weekly.

The provider, registered manager and the staff all described how they viewed each person as an individual who had strengths and ambitions. They also explained how they respected people's diversity. For example, there was a wide age range of people including people who were now pensioners as well as younger adults. They said they supported each person to maximise their strengths and achieve their ambitions taking their age, as well as other factors, into account. The registered manager explained that although they had originally set up the home for people aged 18 to 65, some people had lived in the home for such a long time they were now over 65. They said they felt it important to continue supporting people in the home and adapting to their needs as "this is their home." For example, while younger adults were supported to attend pop music concerts, older adults were supported to attend local groups which were relevant to them.

People's bedrooms and living spaces were personalised and decorated to their taste. Most people were happy to show their bedroom to inspectors and proudly talked about the contents. For example, one person collected ornaments which they kept in a display unit. Another person who did not like framed pictures on the wall, had been supported to have a mural of their home town which took up the whole of one bedroom wall. They proudly showed us the scene which included their family home. On other walls the person had chosen to have brightly coloured shapes painted. People had furniture, ornaments and bedding

of their choice. One person also chose to have a pet, which staff helped them to look after.

People's dignity was respected by staff. Staff spoke with people in a respectful way and always asked their permission before undertaking any care. Staff knocked on people's bedrooms and waited for permission to enter.

Staff knew, understood and responded to each person's diverse cultural, gender and spiritual needs in a caring and compassionate way. For example some people chose to attend the local church for services. Staff were very aware of the need to ensure that the people living at The Lawns were compatible. Therefore before any new person was invited to live there, people were given the opportunity to meet them on a number of occasions including for meals. If this was successful, the new person would be offered an opportunity to stay overnight and try living in the home before making a final decision.

Staff knew people's individual communication skills, abilities and preferences. For example one person had limited ability to speak. Staff would communicate with one person, who had limited ability to speak using simple signing as well as talking slowly and clearly. They also interacted with the person in a friendly manner, encouraging the person to do things they clearly enjoyed.

There was a number of ways used to make sure people were able to say how they felt about the caring approach of the service. People described resident meetings which were held regularly. For example, one person said they chose menus and also where to go on holiday at these meetings. Minutes of the meetings showed there had been three resident meetings in 2016, with the most recent being in September. The minutes confirmed that people had been involved in making decisions.

People, relatives and visitors views were also sought through annual surveys. The most recent survey had been completed within the last 12 months. The responses were all extremely positive, with comments which included "Very happy with [person]'s care."; "Thank you for everything you have done and making us so welcome"; "Long live the Lawns." And "I would live here myself." A survey of health and social care professionals also were very positive with comments such as "I wish all homes I visit are as good and caring as The Lawns." A survey of staff included comments such as "Lovely place to work." and "Family atmosphere."

The home was spacious and allowed people to spend time on their own if they wished. Everyone had a television and comfortable armchair of their choice in their bedroom. One person said they liked to go to their room after lunch to read a magazine and "put their feet up." Another person said they liked to spend some time in the main lounge which was quieter.

People were given the information necessary and explanations of what was happening, at the time they need them. For example, one person sometimes got agitated if they were given too much notice of something happening. Staff described how the person would become anxious and start to get ready too early as they did not fully understand timings. Staff explained that because of this, they would not let the person know something was happening too far in advance. This helped the person enjoy the activity when it did occur.

The registered manager described how there had been several deaths in the last year which had strongly impacted on people. This had included relatives of people in the home and relatives of staff a person who had lived at the home. During the previous summer, one person living in the home had also unexpectedly died. The registered manager had recognised the importance and challenges of supporting people in the home with their grief.

The registered manager described how they had adopted a nationally recognised Gold Standard Framework for end of life care which had helped people, relatives and staff with bereavement. This had involved training and support for staff to help them understand how to help people living at The Lawns Care Home deal with the subject of death.

Although people were upset by the deaths, they described how staff had supported them with their shock and grief. For example, people had been encouraged to understand that although it had been very sad for everyone, the person who had lived at the home had enjoyed life including a recent holiday. This meant that people had come to terms with this sad and unexpected event and were able to discuss this without being very upset. Staff also recognised that people dealt with grief over different time periods. Staff were also aware of the need to support people dealing with bereavement. For example, staff described how they had helped one person come to terms with the death of a relative. The registered manager explained how they had given the person opportunities to talk about the bereavement in their own time. They said they supported people to deal with bereavement in their own way and at their own pace. Staff said they respected people's right to privacy but also made sure they were given opportunities to discuss issues if they needed to.

Records showed that there had been a very positive response from both people and families when asked whether they had felt supported by staff with end of life issues.

People and their relatives were given support when making decisions about their preferences for end of life care. The registered manager also explained that some people had wanted to have discussions about what would happen in the event of their death. Care records showed that people and their families had been able to discuss advance decisions and directives.

Is the service responsive?

Our findings

People and their relatives were involved in developing their care, support and treatment plans. Care plans were personalised and each file contained information about the person's likes, dislikes and people important to them. Detailed daily routines specific to each person were described. Staff were able to explain how they supported each person individually. People had their needs assessed before they moved to the home. Information had been sought from the person, their relatives and other professionals involved in their care. Information from the assessment had informed the plan of care.

The registered manager described how people's risks, needs and aspirations were discussed with them. They described how often aspirational goals might appear small, but meant a huge amount for people to support them with their dignity and independence. For example, the registered manager showed us part of one person's care plan. In the plan dated July 2016, it described how the person had been very keen to 'be more independent with showering each day.' The goal was 'to be able to shower herself daily.' Based upon this aspiration, a plan had been developed which described how staff should support this aim. This included giving time and encouragement to the person. Each part of the plan had been signed by the member of staff and the person themselves. Daily notes for the period following this, showed that the person had needed some staff prompting initially, but was becoming increasingly independent. Staff and the person had evaluated the progress over the following weeks and described changes to the plan. This included both positive information about the progress and how they had had to adapt some areas. For example, altering how the person washed their hair to avoid getting shampoo in their eyes. A review of the plan dated August 2016, showed that staff were continuing to encourage the person who had progressed to being mostly independent.

Speaking with another person, they described how they had become more independent and now were able to get their own breakfast and lunch as well as work two days a week. They explained they looked after their personal accommodation areas including a lounge, dining room, kitchen and bedroom. They were clearly very happy with being able to be so independent, whilst also describing how they were still able to access support when they felt it was necessary.

People were also supported to maintain their independence when accessing the community. For example, two people had visited the bank together to get some money out. One of the people described how they did this each week.

People's needs were reviewed regularly and as required. Where necessary the health and social care professionals were involved. An example of this was where one person was showing some signs of dementia. Staff involved health professionals to ensure they understood how to support the person with this.

People were able to choose what activities they took part in and suggest other activities they would like to complete. People were able to choose group activities, such as attending as a craft session in the home which was run on the afternoon of the inspection. Some people chose to attend group activities in the

community, for example a drama club, going to the pantomime, cinema and a tribute band. A relative commented that their family member "has a better social life than me." People were also able to maintain their own hobbies and interests both in and outside the home, for example one person chose to go to a club each week on their own, which they said they enjoyed.

People were supported to go on holiday each year with staff if they wanted to. For example some people described how they had gone on a coach holiday to a hotel in North Wales earlier that year. People said this had been a really good holiday with lots of outings which they had chosen to do. For example one person said they had really enjoyed going to the beach and visiting a castle.

Some people, who had chosen not to go on holiday, had been supported to do day trips out while the others were away. These trips, which they had chosen, included a visit to the coast and to an air museum.

People and staff produced a regular newsletter which included photographs and articles written by people using the service. The articles described trips they had taken and events they had been involved in. These included visits by Morris dancers and Bristol-based Zoo Lab, who brought wild animals including a snake, frog, scorpion and giant millipede to the home. Other articles written by people living in the home described a summer show of 'Joseph and his Amazing Technicolour Dream Coat' put on by people living at the home with the support of a theatre company. Some people had also written about visits to Looe in Cornwall, Duchy College, Buckfast Abbey and a local donkey sanctuary.

The newsletter also introduced a new member of staff; and reminded readers of upcoming events which included a coffee morning to fund raise for a cancer charity, a French themed table at a local harvest supper, the town's Goose Fair and a Halloween party at the home with an entertainer. This showed that people were involved in the local community and how much they enjoyed activities they had done.

People were encouraged and supported to develop and maintain relationships with people that mattered to them and avoid social isolation. For example one relative described how the person was supported to visit them twice a week, with staff dropping them off and picking them up. They also said they spoke to the person each night on the phone. All the relatives we spoke with, described how although the person enjoyed visiting them, they were always keen to return to The Lawns. One relative commented "It really is [person]'s home now."

There were systems in place to deal with complaints and concerns. The registered manager said there had not been any complaints since the last inspection. They added that if there was a complaint, it would be taken seriously and investigated thoroughly. People and their relatives confirmed they knew how to complain but everyone said they had not had any reason to do so.

The service had good links with the local community. This included a community centre which people regularly visited and attended activities. People also chose to be involved with the local church. For example, on the day of inspection, two volunteers from the church were supporting people to make decorations for a Christmas tree which would be part of a Christmas tree display at the church in December. People described how they had raised money for charity by selling cakes they had made at a coffee morning they had organised. They also described how they had taken part in the Goose Fair which is an annual event in Tavistock.

Staff had also supported people who had wanted to write to Her Majesty the Queen on her 90th birthday. One person proudly described how they really liked the Queen and wanted to wish her a happy birthday. They also were very proud to show us a letter from the Queen, including her photograph, which had been

sent to them thanking them for their good wishes.

Is the service well-led?

Our findings

The provider's statement of purpose described the main aim of The Lawns 'to enable people with learning difficulties to lead a fulfilled life. This is achieved by encouraging and working with the Service User to be fully integrated into the community in which they live and to take part in its activities according to their individual needs, abilities and interests.' Throughout the inspection, it was evident that the provider and the registered manager were fully committed to ensuring this aim was lived up to. They did this by promoting a positive culture that was person-centred, open, inclusive and empowering. Both the provider and registered manager lived close to the home and said they were always available if staff should need support when they were not there.

The registered manager described how they would never rush to fill a vacancy for a person to live at the home. They described how one person had moved into the home after several months' consideration by people and staff in the home as well as the person and their family. They explained this meant that when someone did move in it was "Comfortable for everyone." They also described how they had been approached by the local authority to take a person. However, they said they had decided that there was insufficient time to ensure that the person would be compatible with other people living at the home. They had therefore decided not to offer a place to the person. This showed that the registered manager understood the importance of putting people at the heart of decisions.

Both the provider and the registered manager regularly worked alongside staff who were also committed to achieving full and interesting lives for the people living at The Lawns. People and their relatives knew the provider and registered manager well and were very positive about how they ran the service. One relative described them as "fantastic people" while another commented "Both of them are so wonderful." Other comments included "[The provider] and [registered manager] really make it feel like family, so good at helping people achieve their potential. The support is also extended to family, particularly at hard times." Many of the staff had worked at the home for many years. They also demonstrated how they shared and lived up to the service's values. A new member of staff described how they "really enjoy working here, as people are encouraged to do so many activities."

The provider information return (PIR) stated 'We review and evaluate all of our present policies and procedures on a regular basis, and constantly strive to improve, review and update these in accordance with changing legislation, research and needs of our employees and service users.' We saw evidence that this had happened, for example the provider showed us information relating to the recruitment of staff which took into account recent legislation.

The registered manager remained up to date with best practice. For example they had researched ways to support people who experienced bereavement. This had led them to introduce a nationally recognised Gold Standard Framework, which had involved training staff to understand how to support people with bereavement.

The PIR also stated 'We encourage our service users and employees to strive for all possibilities to nurture

empowerment and individual achievement. The management of The Lawns demonstrate a participative leadership style, valuing the input of employees, service users and peers. Employees, service users, friends and relatives are able to make contributions to the decision making process. When we need to implement changes within The Lawns our participative leadership style helps employees and service users accept change more easily because they play a role in the process.' Everyone we spoke with described how they felt they were involved in decision making processes and were consulted about changes before they took place. For example, people described how they were asked their opinion both formally at resident meetings and informally. Staff also commented that their opinion was valued and they were able to make suggestions for improvements and changes to the service. We observed people and staff discussing issues over lunch and feeding ideas into activities that were being planned.

The service was regularly looking for ways to improve. People and staff were involved in identifying these improvements and ways in which they could be achieved. For example, to ensure staff were easily identifiable, a board with photos and descriptions had been placed at each entrance to the home, which helped visitors recognise them.

The service also produced a regular newsletter which was distributed to people at the home and their families. The newsletter ended by asking readers to make suggestions on how future editions could be improved. The most recent newsletter was three sides of information. It included an introduction by the registered manager. This described recent events and appeals for donations for the home's bric-a-brac stall which people were running alongside a café and barbecue at the town's Goose Fair. The registered manager had also had a wall calendar produced with photos of people on trips and holidays. This calendar was sent to people's families as a memento for them.

The registered manager understood their legal duties and responsibilities. They had notified CQC about significant events and provided other information as required to do so. We used this information to monitor the service and ensure they responded appropriately to keep people safe.

Quality assurance systems were in place to monitor the quality of service being delivered and the running of the home. This included regular audits and checks including fire equipment, fire drills, the home environment and medicines. People, their families, staff and visitors were all asked to complete questionnaires each year to identify how the service was doing and what improvements could be made. The registered manager said they sat down each year with the provider and agreed the priorities for improvement in the service which were then recorded and actioned. The registered manager showed us their annual quality improvement plan which described actions that had been planned for the current year. These included replacing stair carpets which had already taken place. Actions in previous year's improvement plans had also been completed.