

## Abbey Lawns Ltd

# Abbey Lawns Care Home

## **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

Abbey Lawns Care Home is a residential care home providing personal care and nursing care for up to 61 people with a variety of mental and physical health needs. There were 44 people living at the home at the time of this inspection.

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

People told us there were enough staff at the home and staff came quickly when they needed them. One person said, "I have a buzzer and they come quickly when I press it. When I had a fall they came right away and helped me." Staff were visible around the home and available to support people when needed. Appropriate checks were carried out on new staff to ensure they were suitable to work with vulnerable adults.

People told us they felt safe living at the home and relatives also told us their loved ones were safe there. One person commented, "The staff have been brilliant since COVID. I feel extremely safe here, the staff are doing their best to ensure we are safe." Staff had received safeguarding training and understood their role in recognising and reporting safeguarding concerns.

We observed a positive and caring culture amongst staff at the home. Staff were friendly and familiar with the people they were supporting. People living at the home and relatives were complimentary about the staff. One person said, "I wouldn't want to live anywhere else; I like it very much. The care is good; they watch over me; anything I want they'll try and do for me."

People and relatives spoke positively about the manager and their communication with staff in general. One person told us, "The manager comes round fairly regularly; she's approachable as well, if there's something I'm not happy with I know they will sort it out."

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

#### Rating at last inspection

The last rating for this service was good (published 5 September 2019).

#### Why we inspected

We responded to our current risk rating of this service, which showed the service as very high risk. We undertook a focused inspection to review the key questions of safe and well-led only. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained good. This is based on the findings at this inspection. We

found no evidence during this inspection that people were at risk of harm. Please see the safe and well-led sections of this full report.

We also 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 coronavirus and other infection outbreaks effectively.

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

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection programme. If we receive any concerning information we may inspect sooner.

## 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



# Abbey Lawns 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 Care Act 2014.

#### Inspection team

This inspection was carried out by one inspector and a nurse specialist professional advisor (SPA). An Expert by Experience also assisted by carrying out telephone calls to people living at the service and relatives. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Abbey Lawns Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

The home did not have a manager registered with CQC but a manager was in post and in the process of registering. This means the provider is 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.

#### What we did before the inspection

We checked the information that we held about the service. This included statutory notifications sent to us by the provider about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send us by law. We also gathered feedback about the service from the local authority and clinical commissioning group. We used all this information to plan our inspection.

#### During the inspection

We spoke with seven people who lived at the service and five relatives about their experience of the care provided. We spoke with 10 members of staff including the manager, nurses, care workers and other staff.

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 talk with us.

We reviewed a range of records. This included five people's care records and multiple medication records. We looked at five staff files in relation to safe recruitment. 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

#### Staffing and recruitment

- There were enough staff at the home to meet people's needs. People told us there were enough staff at the home and staff came quickly when they needed them. Comments included, "There's always been someone around when I want them, they [the staff] usually come quickly when I press the buzzer" and "I have a buzzer and they come quickly when I press it. When I had a fall they came right away and helped me."
- Staff were visible around the home and available to support people when needed. People who required one-to-one support from staff received this level of support.
- There periods when the call bell system was busy, but people's call bells were generally answered promptly by staff.
- Staffing levels were monitored, reviewed and amended when needed by the manager.
- Staff were safely recruited. Appropriate checks were carried out to ensure new staff were suitable to work with vulnerable adults.

#### Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from the risk of abuse. People told us they felt safe living at the home and relatives also told us their loved ones were safe there. Comments included, "The staff have been brilliant since COVID. I feel extremely safe here, the staff are doing their best to ensure we are safe", "I've no concerns, [Relative] is completely safe and is very settled there" and "I can't fault the care; the staff have been brilliant. They're keeping [Relative] as safe as they possibly can."
- Staff had received safeguarding training and understood their role in recognising and reporting safeguarding concerns.
- Information and guidance about how to raise safeguarding concerns was accessible throughout the home and the provider had appropriate systems in place to manage concerns of a safeguarding nature.

#### Assessing risk, safety monitoring and management

- People had personalised risk assessments which gave staff the information needed to safely manage the risks associated with people's care.
- At the time of the inspection the home was working with some paper-based and some electronic care records. We discussed this with the manager as an area for improvement, as the records did not always match in terms of when they were last reviewed and updated.
- Fire safety was effectively managed.
- The environment was well-maintained and regular safety checks were carried out on utilities and equipment. Some parts of the home needed redecorating and/or upgrading. The provider had an improvement plan in place to address this, which had been delayed due to COVID-19 but was due to resume as soon as possible.

#### Using medicines safely

- Overall, medicines were safely administered, stored and recorded by staff who had the required knowledge and skills.
- We identified some minor issues which needed addressing and we discussed these with the manager. For example, temperature checks of the medication room had not been completed every day when they should have been.
- Staff supported people to take their medicines in line with best practice and treated people with dignity and respect when doing so.
- The provider had systems and checks in place to ensure the safety and quality of medicines administration was maintained.

#### 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.

#### Learning lessons when things go wrong

- Accidents and incidents were appropriately recorded and responded to by staff.
- This information was regularly reviewed by the manager to ensure lessons were learned and steps taken to prevent recurrence, when necessary.
- Relevant policies and procedures were in place to help guide staff.



## 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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; and how the provider understands and acts on their duty of candour responsibility

- We observed a positive and caring culture amongst staff at the home. Staff were friendly and familiar with the people they were supporting.
- People living at the home and relatives were complimentary about the staff. One person said, "I wouldn't want to live anywhere else; I like it very much. The care is good; they watch over me; anything I want they'll try and do for me."
- The manager was personable, knowledgeable and had good relationships with both staff and people living at the home.
- The manager understood their responsibilities regarding the duty of candour and promoted openness and transparency within the service.

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

- Ratings from the last CQC inspection were clearly displayed within the home as required. We noted the provider's website had not been updated with this information but this was rectified soon after our inspection.
- CQC had been notified of all significant events which had occurred, in line with the registered provider's legal obligations.
- There was a range of regularly reviewed policies and procedures in place to help guide staff.

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

- People living at the home and relatives were given opportunities to give their feedback about the care at the home. Regular residents' and relatives' meetings and the annual satisfaction survey had been postponed due to COVID-19. However, the manager and other staff were having regular informal conversations with people instead.
- People and relatives spoke positively about the manager and their communication with staff in general. Comments included, "The manager comes round fairly regularly; she's approachable as well, if there's something I'm not happy with I know they will sort it out", "The manager is always available to speak to me when I've wanted to talk to her; she's easily contactable" and "They [the staff] ring regularly to give me an update on [Relative]. When I ring the office the nurses always ring me back."

Working in partnership with others

- Staff at the home had developed good relationships with other relevant health and social care professionals. For example, regular multi-disciplinary team (MDT) meetings were taking place to review people's health and wellbeing and ensure they were receiving the right care at the home.
- Staff at the home had engaged with organisations and professionals who could provide them with additional support and guidance. For example, the home attended a weekly conference call with the local authority and Public Health England to share the latest information and guidance about COVID-19.

Continuous learning and improving care

- The provider had effective systems in place to monitor, assess and improve the quality and safety of service being provided.
- The provider had a wide-ranging development plan in place to continuously improve the home.