

IAC Chelsea Limited

# Loveday Kensington

## Inspection report

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### Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Outstanding 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

### About the service

Loveday Kensington is a residential care home providing nursing and personal care for up to 40 people. At the time of the inspection 23 people were living at the service, including older people, people with physical health conditions and those living with dementia. They also supported people who stayed for short periods of respite care.

Loveday Kensington accommodates people in one building across 4 floors, with each person having their own bedroom and en-suite bathroom. People also had access to communal living areas, a main dining area on the ground floor and a secure rooftop terrace area.

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

People who lived at the home were known as 'members' and the whole staff team across the service excelled at providing outstanding person-centred care, whilst in a luxury five star environment, which included fine dining and first class hospitality.

People and their relatives were overwhelmingly positive about the exceptional levels of care and support from a passionate and dedicated staff team. Comments included, "You simply cannot compare this level of care and service" and "[Family member] has always had a classy lifestyle and we wanted to continue this. They have the best care and I can assure you nothing else matches this in London."

The service had a warm and homely environment and welcomed people's friends and relatives, especially during mealtimes and organised events. This helped people maintain important relationships. Visitors told us they loved visiting the home. A relative said, "They know us well and I enjoy coming. The hospitality is amazing and it is for everybody. I feel part of the family."

People received excellent care and support to help keep them in the best possible health, with immediate referrals to the relevant healthcare professionals if their health deteriorated. People and their relatives told us they had seen significant improvements in their health since moving in.

People benefitted from an excellent variety of activities, events and trips out that were organised to help reduce social isolation and enhance their health and wellbeing. Activities were tailored towards people's likes and preferences which gave significant meaning and purpose.

People were cared for by a dedicated and compassionate staff team who felt valued and appreciated. Staff praised the working environment and the training and support they received to help provide high standards of care. One staff member said, "This is the best place I have ever worked. We make sure we go above and beyond in everything we do to give people a 5 star experience."

People and their relatives were extremely positive about the management team and told us that nothing

was too much trouble and they were always available. There were robust systems in place from the management team to ensure high standards of care were provided and maintained.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

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

Rating at last inspection

The service was registered with us on 10 February 2022 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

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 effective?

Outstanding ☆

The service was exceptionally effective.

Details are in our effective findings below.

### Is the service caring?

Outstanding ☆

The service was exceptionally caring.

Details are in our caring findings below.

### Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in our responsive findings below.

### Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-led findings below.

# Loveday Kensington

## 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 consisted of two inspectors and a nurse specialist professional advisor.

#### Service and service type

Loveday Kensington 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. Loveday Kensington is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced. The provider knew we would be returning on the second day of the inspection.

### What we did before the inspection

We reviewed information we had received about the service since their registration. This included any significant incidents that occurred at the service. We used the information the provider sent us in the provider information return (PIR) in February 2023. 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 contacted the local authority commissioning and safeguarding teams to support our planning. We used all of this information to plan our inspection.

### During the inspection

We met and had introductions with people who used the service and spoke with 6 of them in more detail. 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 observed the care and support provided to people across different parts of the day, including mealtimes. We also spoke with 6 relatives who were visiting during the inspection.

We spoke with 21 staff members. This included the registered manager, the head of care and quality, the deputy manager, the club manager, 2 nurses, a care coordinator, 4 care assistants, the physiotherapist, 2 head chefs, the head of learning and development, the maintenance person, an activities coordinator, 2 food and beverage assistants and the head of housekeeping. We also spoke with the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included 14 people's care and medicines records and 10 staff records in relation to recruitment, training and supervision. We also reviewed records related to the management of the service, which included incident reports, complaints, quality assurance records and minutes of clinical and management meetings.

We sat in and observed a staff reflective practice group session on the first day of the inspection. We carried out further observations throughout the inspection in relation to staff engagement and medicines management to understand staff awareness of best practice.

We also spoke with 3 health and social care professionals who had experience of working with the service.

We continued to seek clarification from the provider to validate evidence found after the inspection. We looked at samples of policies and procedures, further quality assurance records and a range of compliments about the service.

We provided formal feedback to the registered manager and the nominated individual via email on 12 May 2023.

# Is the service safe?

## Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- There were effective systems and policies in place to ensure people were protected from the risk of harm or abuse. Investigations had been carried out with appropriate action taken when any concerns had been identified or raised.
- Staff completed safeguarding training and had a comprehensive understanding of the processes to follow if they had any concerns. Staff were confident any concerns would be dealt with appropriately. One staff member said, "If I see bad practice, I raise it immediately with the nurse, then if nothing, I go to the manager. Then there is also the senior management team."
- Staff had regular opportunities to discuss safeguarding and there was further oversight at a senior management level with any incidents discussed and reviewed on a monthly basis to ensure all appropriate actions had been taken.
- People and their relatives told us they felt the home was safe and secure, especially as there was a gated entrance.

Assessing risk, safety monitoring and management

- The provider had systems in place to ensure risks to people's health were assessed before moving into the home, or through regular monitoring if any changes were observed in their support needs.
- People's risk assessments were detailed and personalised with information and guidance for staff to follow to help keep them safe. Staff had a good understanding of any risks associated with people's care and could explain how they minimised any risks, whilst respecting people's lifestyle choices.
- The registered manager held daily flash meetings along with clinical meetings to discuss any changes in people's health or assessed risks. This included any risk of falls, pressure sores or incidents of choking, including any skin or wound issues.
- The staff team worked closely with a range of health and social care professionals to ensure any possible risks to people's health and wellbeing were reduced. Where people could become distressed or upset, the staff team worked to understand how this could be reduced and made the necessary referrals as appropriate.

Staffing and recruitment

- There were enough staff to ensure people's needs were fully met. The provider's policy ensured staffing levels were above industry standards with a baseline of 1 care staff member for 2 people.
- Observations throughout the inspection showed there were enough staff on duty to meet people's needs in a timely manner. Further to this, with support from the food and beverage team, care staff had more time to focus on people's needs.

- One person said, "The staff are very responsive. You only have to press a button and they come." A staff member said, "We always have time for people. It is tailored this way to ensure we are not rushing and deliver the standards of care we promise."
- The provider followed safer recruitment procedures to ensure staff were suitable to work with people who used the service. Disclosure and Barring Service (DBS) checks for staff were in place along with appropriate references, right to work documents and proof of identity. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

#### Using medicines safely

- There were systems in place to ensure people's medicines were managed safely and in line with national guidance. Medicines were stored safely and securely in people's rooms, which helped to minimise any errors. Observations during the inspection showed staff were aware of the correct procedures to follow.
- Staff responsible for administering medicines had received the relevant training and had annual competency assessments to support them in their role. Staff had a good understanding of their responsibilities and were aware of potential side effects or if further monitoring was needed.
- Medicine Administration Records (MAR) were detailed and completed accurately. There were regular checks in place to identify any issues, with systems in place for reporting any errors. Staff could also discuss any issues or concerns during flash meetings.

#### Learning lessons when things go wrong

- There were procedures in place for the reporting of any incidents and accidents across the service. We observed a reflective practice session on the first day of the inspection where staff discussed incidents and what could be done to support people further, including sharing best practice.
- We saw accidents and incidents were also discussed in supervision and clinical meetings to identify any areas of improvement. Staff told us there was a supportive culture around reporting errors which helped their learning.

#### 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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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

- We saw the provider was facilitating visits for people living in the home in accordance with the current guidance. Although it was not in use at the time of the inspection, we saw the provider had been proactive and had invested in rapid PCR COVID-19 testing equipment, to ensure visiting could take place during more challenging periods of the pandemic.

# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection of this newly registered service. This key question has been rated outstanding. This meant people's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People were well supported to live healthier lives and had access to a wide range of healthcare support on site to help manage their health and wellbeing which improved their quality of life. Staff were committed to working with healthcare professionals where people had more complex needs to ensure people experienced excellent health outcomes.
- People's GPs visited weekly and sometimes more regularly if needed. People also benefitted from in-house physiotherapy and psychotherapy sessions. We observed a physiotherapist session which included a number of physical and cognitive exercises, where people were engaged and kept focused and motivated.
- People and their relatives told us how this support had an incredibly positive impact on their health and wellbeing. One person said, "They arranged a personal trainer for me to get me fit again and the physio lady got me walking again. I now regularly attend the exercise class which keeps me moving."
- A relative showed us videos of their family member that had been sent to them highlighting the positive progress made with the physiotherapy sessions. They added, "Before, they didn't get out of bed. I couldn't believe the change seeing them walking. They are even doing Thai Chi now. I feel this is the best place in the world for [family member]."
- Samples of clinical meetings also discussed any changes in people's needs and appropriate referrals for intervention and support had been made when required. Feedback from healthcare professionals was very positive and all felt people had excellent support from staff who worked to identify ways their health could be improved. A professional said, "There is continuity across the home with the staff, they know people really well. I have seen the positive impact this has had."

Supporting people to eat and drink enough to maintain a balanced diet

- People had access to an excellent standard of food and drink across the home, with the support of highly skilled executive chefs and a dedicated food and beverage team. There was an excellent variety of healthy and nutritious options, along with food that could be ordered on request. The inspection team sampled the food during the inspection and it was very high quality and of an excellent standard.
- People and their relatives had been fully involved with their food preferences and the staff team had an excellent understanding of any nutritional risks or likes. People were able to eat at times that suited them and order specific items on request. There was a strong emphasis on the importance of mealtimes which helped improve people's health and wellbeing.
- For example, one person told us they thought it might be an issue having kippers, but confirmed they could have them whenever they wanted. They added, "The food is fantastic and brilliantly cooked. The chefs

have a magic touch."

- People and their relatives also had access to private dining options, such as Sunday roasts or afternoon teas for special events, along with canapes and champagne for parties. Feedback was overwhelmingly positive. One relative said, "As they can have guests, they really look forward to the food. [Family member] lives for their breakfast and I have to say it is first class."
- Along with this, there was a dedicated food and beverage team responsible for ordering and serving people during the dining experience. This ensured care staff had time to sit with people and provide support and encouragement, which we observed throughout the inspection.

#### Staff support: induction, training, skills and experience

- People were supported by staff who completed a robust and detailed induction and training programme when they started, which including shadowing opportunities and a range of competency assessments.
- Along with mandatory training, staff also had access to specialist training modules related to people's specific conditions. This included a specific 'Dementia Interpreter' course, which was a requirement for all staff. This helped staff develop knowledge and understanding to support people living with dementia.
- Our observations during the inspection showed staff had an excellent understanding of supporting people when they became distressed, upset, confused or agitated. One relative said, "Even though they have advanced dementia, they don't like to be treated like a child and staff understand this. They understand their needs and treat [family member] as an equal, which is important to us."
- Further to this, there was a clear commitment from the provider to ensure staff across all departments were aware of the standards expected which enabled people to receive a high level of care and support, which included training modules in 'Excellence in service'.
- Staff were very positive about the supportive environment related to training and supervision which helped them develop their skills and experience. A staff member said, "The training is amazing. Everything is explained to us, with observations, practical tasks and our competencies checked to ensure we are providing 5-star person centred care. The best thing is that this knowledge has a big impact on the members lives."

#### Adapting service, design, decoration to meet people's needs

- The home was purpose built and fully accessible, being designed to support people living with a range of health conditions, including those living with dementia. People and their relatives were fully involved with decisions related to decoration and furnishings.
- Innovative equipment and technology had been researched and used to support the delivery of high-quality care and independence. This included a circadian lighting system and acoustic monitoring technology, which helped staff monitor people in a less intrusive manner. A relative told us the benefit of having sensor lighting in the room helped to reduce any falls as it enabled their family member to be more independent. They added, "The quality of the rooms and facilities are second to none." Relatives also told us how this technology provided them with extra reassurances about their care.
- Where some people had to move from one of the provider's other nearby homes due to renovation work, there was significant consultation with people and their relatives about how this process was managed, to ensure it had minimal impact. A relative told us how they had been initially anxious about this process, but their family member had settled in well and had been involved in the precise decoration and layout of their room.
- For example, we saw the provider had worked to recreate the layout of the home to ensure familiarity for people and to reduce any confusion. There were meetings with the property team to ensure people and their relatives agreed what furniture could be moved, including matching paint and other items such as artwork and curtains to further create a familiar environment. People and their relatives praised how they were involved and how the smooth transition reduced any fears or anxiety of moving home.

- Due to the layout of the building, there were different areas for people to use, which included space for activities, events, along with quieter and private areas. All areas were well maintained and decorated to a high standard, which promoted people's independence. For example, a person told us how much they enjoyed using the roof terrace, especially when the sun was out. A relative also told us how they had access to private dining areas to celebrate special moments with their friends and family.
- The home had also been shortlisted for 'The Best for Architecture and Interior Design' award from the Care Home Awards 2023.

Ensuring consent to care and treatment in line with law and guidance

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

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The provider followed best practice in how they recorded people's consent to the care and treatment they received. Mental capacity and best interests assessments had been considered and put in place where people lacked capacity.
- There were systems in place for the monitoring of DoLS and staff responsible liaised with the relevant health and social care professionals when applications were made to deprive people of their liberty. This was also reviewed during monthly management meetings to ensure staff were aware and any necessary actions had been completed.
- Staff had an excellent understanding of the key principles of the MCA. Staff explained how their training increased their knowledge and how they put their learning into practice. A staff member said, "We know to give people options, choices and work in their best interests. We can't force them to do anything. They may have dementia, but can still live the life they want with our support."

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People were assessed before they started using the service, either in hospital or their own homes. A range of assessments were in place to ensure effective care was planned and delivered.
- The provider had best practice guidance in place, which included assessments from an NHS Trust community neurology team and input from a range of healthcare professionals, including speech and language therapists.
- Along with the involvement of the in-house physiotherapist, mobility assessments included details on equipment and safer moving practices to ensure staff had all the relevant information needed. We saw the physiotherapist also had input into guidelines around moving and handling and wheelchair assessments if required.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection of this newly registered service. This key question has been rated outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- People were supported by a dedicated staff team that was committed to providing exceptionally kind and compassionate care. Observations throughout the inspection showed staff treated people with the utmost kindness and respect, including an excellent awareness when emotional support was needed. It was clear there was an excellent caring and person-centred culture across the home that exceeded expectations and led to positive outcomes for people.
- Feedback from people and their relatives was overwhelmingly positive. Comments included, "The staff are really fond of [family member] and it shows in how they are with them", "All of the staff are first class, absolutely off the Richter scale. You could not get nicer people" and "I am very grateful, the staff have a great rapport and they are always in good spirits."
- A person who had recently stayed during a period of respite due to surgery praised the caring nature of the support that enabled their recovery back home. They said, "The kindness and care shown by all the nurses and carers couldn't have been better. They comforted me when I was feeling most dreadful, cheered me during the days and sustained me over this difficult period."
- A relative told us how the level of care and compassion had an extremely positive impact on their family member in how this improved their wellbeing. They added, "Everybody is so attentive, they notice everything and are so kind. Even the small things they do make such a big difference. You can't teach kindness and this is in their heart, in all of them."
- Staff showed true empathy for people, especially when they became distressed or upset. We saw there were detailed records for emotional support and staff discussed and explored ways they could better engage with people to reduce any distress. Our observations showed staff had an excellent understanding of when people needed emotional support and were able to provide this in a compassionate and sensitive manner that displayed true empathy for people.
- For example, we saw how staff interacted with a person and how they involved them in the day to day running of the home when they became distressed, as they had previously worked in the hotel industry. Supporting this person to feel part of the team helped them to feel in a secure, known environment which reduced their anxiety. Staff also discussed ways in which they could reduce any distress and highlighted techniques for staff to be mindful of and use real life stories to help diffuse any emotion. This individualised approach helped staff provide the person with consistent compassionate reassurance.
- We saw there was a strong focus on understanding people's personal histories in order to enable many aspects of their lives to continue despite moving into the service. A keyworker system matched staff to people based on similar interests, experiences, personalities and backgrounds. This aided staff to have an excellent in-depth knowledge of people and recognise any changes in their needs.

- For example, a relative told us how their family member was a keen sports fan and a member of staff regularly supported them to watch their favourite sports and keep them engaged, which was very important to them. We observed this staff member sitting with the person during lunch and initiating meaningful conversation about their shared interests.
- We saw staff respected and understood people's equality and diversity, protected characteristics and spent time to celebrate their cultural backgrounds. We saw examples of themed cultural events for people's birthdays and other religious and cultural events, including where people had travelled or lived, and also to embrace new cultures and menus. Examples included a Chanukah festival and an Indian themed birthday event, involving a renowned Indian chef, music and Bollywood dancers. We also saw a person had been involved in a cultural event where they were supported to sing in their first language as part of the event.

#### Respecting and promoting people's privacy, dignity and independence

- Staff had an excellent understanding of the importance of respecting people's privacy and dignity and it was clear this was an embedded culture across the home. We observed positive interactions throughout the inspection that showed respect for people's privacy and dignity was at the heart of the service's values. People were involved in who supported them with their care and when and could decide when and where they wanted to have their meals, or when going out into the community. We saw people could request meals in their rooms, in certain areas of the home or to be served later in the day when it was more suited to them.
- Staff told us this was a main focus from the induction and was regularly discussed during training and supervision as being a key area of the service's values. A staff member said, "The vision is clear. We make sure people are always treated with dignity and respect. We all know the standards and what our members expectations are."
- People and their relatives also told us how the support had a positive impact on their levels of independence. We saw examples where people's mobility had improved and where people could do more things for themselves or be more involved in activities and interests.
- Staff had dedicated time with people to ensure they were with them for however long was needed, which increased their levels of independence. A relative told us their family member had been in the home for a few months and the change in their health and wellbeing had almost been a miracle and how staff had worked tirelessly to bring back some of their independence. They said, "They had lost the ability to do everything. They can now drink on their own, cut up their own food and their mobility is getting better. It has given [family member] a new lease of life."
- We also saw how the innovative equipment and technology within people's rooms had helped people to promote their independence and have a positive impact on their health and wellbeing. This monitoring technology enabled people to have a restful night without the need for staff to disturb them with welfare checks and opening their doors. This ensured people's privacy and dignity was held in the highest regards.
- Staff had an excellent understanding of people's individual choices and wishes and ensured they were always respected. A relative told us how staff respected their family member's privacy and dignity, especially in how they provided personal care but also ensuring they were always well presented. They added, "This has always been really important to [family member] and is what they would have wanted if their health was better." Another relative told us this was an area that staff excelled in and were incredibly happy with how their family member's privacy and dignity was respected and staff were fully aware of the importance of this.

#### Supporting people to express their views and be involved in making decisions about their care

- People and their relatives confirmed they were fully involved in making decisions about their care and support. Lifestyle assessments were carried out before members moved into the service and significant time was spent getting a true picture of a person and how they could replicate areas of their previous lifestyle

that was truly important to them. This ethos gave staff the information to be able to provide excellent person-centred care.

- The registered manager told us this helped them to ensure people had an excellent experience from the moment they moved in. This allowed the service to support people to continue living their life as they had as far as was possible. For example, a person was matched with staff member from the sales team who had similar interests and who was also a member of a club the person had been a member of. They had regular lunches back at the club where the person was able to meet new people with similar interests.
- A welcome gift was presented to people on their arrival based around their preferences. People's favourite drinks, snacks and a welcome meal were also provided for their arrival to allow people to feel cared for before they had moved in. The provider also discussed how people wanted to be welcomed when moving in. For example, one person had a small welcoming party in the garden for their arrival. The lifestyle assessment had found out their favourite flowers and planted them in the courtyard before they moved in so they were there for their arrival. This immediately made the person feel welcome and made them feel at home.
- There was a significant focus on creating a tailored service to each person and staff spent time communicating with people and their relatives to ensure they understood their needs. This was done via a 'Member Spotlight' system, which was a detailed monthly review which involved discussions with all departments, including the chef, activities coordinator and club manager. This allowed staff to gather feedback to find out how their service and experience in the home could be improved and that it was exceeding expectations, along with focusing on goals and ambitions.
- For example, staff identified a person who wanted to lose some weight. Staff initiated and supported them with a walking challenge and the chef incorporated a healthy food programme. This person told us it had helped them improve their health and the diet plan had helped them to lose weight. Other positive outcomes from these meetings included bespoke menus being created and the arrangement of people's pets to come to the home for a visit.
- The provider also used the member spotlight review to identify where people's relatives were finding it difficult to process their family member's health deterioration. The provider worked closely with them and went the extra mile to provide reassurance and compassionate support, including the involvement of healthcare professionals to reduce any uncertainty and anxiety. Feedback from all relatives praised the service and how nothing was too much trouble for them and always went above and beyond in their duty.
- A relative told us how impressed they were with the initial process, including the level of detail and patience to help understand their views and wishes. They said, "They took the time to understand us and I felt [registered manager] gave us the attention we needed. I was amazed how smoothly it went and how easily they fitted into the home. This was a huge sigh of relief for us."
- Staff had an excellent understanding of communicating with people who were living with dementia and used innovative and creative ways to ensure people could fully express their views if they had trouble communicating. Examples included the use of therapeutic art workshops, music therapy, visual images to help make decisions around day-to-day decisions and having a detailed understanding of people's lifestyles, histories and what was important to them.
- The provider worked actively with advocates where appropriate if people had no family/relevant persons involved in their care or if decisions were needed in a person's best interests. Advocates are trained professionals who support, enable and empower people to speak up. The provider also ensured staff received the necessary training and support to help them manage any sensitive or difficult conversations with people and their families. This gave staff the confidence to ensure people and their relatives were supported to explore additional help and advice in a compassionate and sensitive manner.



# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection of this newly registered service. This key question has been rated outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Care planning started before people moved in, which was based around a 'Lifestyle Assessment', where people and their relatives were fully involved to understand what people wanted. This ensured people experienced a first-class service from the very start and contributed towards an excellent quality of life.
- Care was tailored around people's individual needs, which included preferred drinks, dining preferences, activities and interests along with the décor of their room. The management team spent significant time with people and their relatives to find out what was truly important to them. For example, each person's door had a bespoke piece of art designed by the in-house artist which meant something unique to that person. For example, one person had a piece of art inspired from an old Valentines card that had significant sentimental value to them.
- People also benefitted from knowledgeable staff that had specific support and guidance in understanding dementia to help support and have a better awareness of people living with dementia. We saw staff had an excellent understanding of how to engage and provide person-centred care. We saw this helped staff meet people's preferences, including reflective meetings where staff discussed additional ideas and techniques to ensure their needs were fully met.
- Staff complimented this level of training in how it helped them to have a better understanding of people and tailor their support accordingly. A staff member said, "It changed the way I supported people. It exposed my mind to how we see people and I'm putting myself in their shoes so I can feel what they feel. This made a big impact on how I support people."
- People and their relatives praised the level of attention and care provided that had a positive impact and improved their quality of life. A relative said, "I've seen an amazing change and have to say I have cried with joy. In their previous place, there was no light in their life, but they have awakened them since moving here. They have done this by making [family member] a human being. The staff have an excellent quality and would do anything for us."
- Another relative told us the care their family member received was very individualised and staff really understood their preferences. They added, "I notice how patient they are with [family member], including the other residents. They really benefit from the one to one care and staff really understand this."
- The provider had also been very innovative for a person who was known to be anxious around groups of people. Through consultation, staff had been able to turn a spare room into a private lounge area for them so they had more space and did not have to worry about attending communal areas.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them



- There was an exceptional range of resources and events that allowed people to take part in activities and interests that had been tailored to their individual needs and were socially and culturally relevant. The provider spent dedicated time with people and their relatives to find out what was important to them so they could ensure it had positive outcomes for people.
- The provider had gone above and beyond and had created individual bespoke programmes called 'Extraordinary Days'. This gave people the opportunity to experience special events that were very important to them, had significant meaning to them and helped them live as full a life as possible. People and their relatives told us how this had been designed around them.
- For example, we saw a person had a bespoke tour of the London Transport Museum, escorted there by a vintage London Routemaster bus, as they had been involved in the transport industry for many years. This was followed by afternoon tea at the Ritz. This had been chosen by the person as they had regularly dined there and hosted parties and events over the years which was very significant and personal to them.
- Another person, who had been a Porsche owner for many years previously, had a bespoke VIP Porsche experience day in the London showroom. This had been arranged as the person had highlighted they always got a tear in their eye when they saw a Porsche. They were also supported to design their own Porsche using artificial intelligence software in the showroom, before being chauffeured home in one of the cars.
- Along with this, there were regular visits from performers and entertainers, including famous pianists and opera singers. Along with the physiotherapist who organised exercise classes, there were Thai chi classes and also an in-house artist. A person highlighted the positive impact of one of these such events. They said, "The activities organiser gave me my best memory with the private performance of the Italian tenor."
- People also had the opportunity to go out for regular events, such as museum trips and private cinema outings, whilst the chef team held weekly cooking masterclass sessions which was based around people's preferences and cultural needs. We saw there were regular religious and cultural events held at the home, which included visits from religious ministers. A person also highlighted the home had organised a TV subscription service during their stay so they were able to watch a tennis tournament. Another person was taken to their lifelong supported football team to watch a home game. This was their wish as the person's eyesight was deteriorating and could have been the final time they were able to see them play live.
- We observed a range of activities during the inspection where people were fully engaged and told us they were looking forward to them. There was a private cinema outing on the first day of the inspection, where staff supported people there and went for lunch afterwards. One person told us they really enjoyed the film club and had watched some of their favourite films recently. A relative told us they were incredibly happy their family member was given these opportunities as it had a very positive impact on their health and wellbeing and doing things they had previously enjoyed before their health deteriorated.
- Feedback about the social life and range of activities within the home was exceptionally outstanding. A relative told us how the provider had arranged swimming lessons for their family member by booking out a local pool so it was a more relaxing experience, which had a positive impact on their health and wellbeing. This had resulted in two other people getting involved and it becoming a regular social occasion for the people involved. The relative added, "They consulted me about my [family member's] needs. I told them they like swimming and they just organised it. That's the best thing, they do what they say and provide an excellent service."
- A relative told us how the positive environment of the home had improved their family member's quality of life, especially the regular classical music events. They added, "Before, they were isolated, but here, there is so much socialising, the classical music they play for them. They were going downhill but since moving here, they have a wonderful life."
- Another relative told us staff made sure their family member still had opportunities to be involved via tailored one to one support, even though they were sensitive to noise and did not enjoy communal activities. They said, "They really understand people's preferences and benefits from this. There are so many staff they can really accommodate [family member]."

## End of life care and support

- The provider worked closely with the local hospice and other healthcare professionals to ensure people received excellent care at the end stage of their life in a dignified and sensitive way. Staff attended sessions on advanced care planning to support them to feel more confident in having sensitive discussions with people and their families about death and dying.
- Staff had access to training, including specialist training for nurses in end of life care. Feedback from the GP was overwhelmingly positive in how staff provide excellent care in line with best practice. The GP highlighted a person had told them the home was their preferred place to pass. The GP added, "This is really positive as it shows this is a place of comfort with staff they know."
- Staff also benefitted from awareness of best practice with training from the Gold Standard Framework and sessions around advanced care planning. The Gold Standards Framework is a framework to help deliver a gold standard of care for all people as they near the end of their lives. It helps staff to identify the needs of people at each stage of their life, assess their needs, wishes and preferences, and to plan care on that basis, enabling them to live and die well with dignity when they choose.
- The provider had also been proactive in developing an end of life framework in close partnership with the local hospice, which included close working with other professionals, along with arranging and hosting an event on palliative care with specialist consultants in the field. The provider told us this helped them to share knowledge and best practice within the sector and to improve the care they can offer.
- From feedback and testimonials, we saw people's preferences, wishes and religious needs were met at the end of their life. Staff also had an excellent understanding of how to meet the needs of people and their families in relation to emotional support and the practical assistance they needed at this sensitive time. A relative said, "They are nursed so well here, the nursing care is second to none and they are fantastic. We want [family member] to stay here, amongst people who love them and to be with them in their final hours. We are very confident with this."
- We saw the service was incredibly responsive to enable people to engage with their religious beliefs and individual preferences at the end of their life. The provider had arranged for an opera singer to perform at a person's bedside with their family, the song that was played on their wedding day which was important to them. A local Irish Roman Catholic priest organised regular mass with the family, along with the provider sourcing a bottle of their favourite whiskey from where the person was born to enjoy before they passed.
- The testimonial from the family stated, "Your staff were exemplary, attending to them and the family, providing accommodation, having the dog stay and generally caring for us. It was a very special time those last days with us together for the last time. They were in such good hands and thank you isn't really big enough to say to you all the carers. We are indebted."

## Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs were assessed and there were detailed communication strategies and advice for staff about the level of support needed. This included visual impairments or where people's health conditions impacted their communication.
- Staff had a good understanding of how to effectively communicate with people and we observed positive interactions throughout the inspection. A person also had personalised visual menus and illustrations specifically designed for them to support their communication.
- We also saw a psychotherapist provided weekly sessions to 3 people which was a tailored programme to promote wellbeing for people who may be anxious or distressed. They said, "Some people have little verbal

communication so require input around expression. This tailored intervention has given them the space to find ways to express themselves."

#### Improving care quality in response to complaints or concerns

- There were clear procedures in place which gave people and their relatives numerous opportunities to feedback about the care they received. This was through informal discussions along with more formal processes.
- People and their relatives knew how to raise any concerns and told us they were confident if they had any concerns, they would be dealt with in a professional manner and as a matter of priority. Relatives told us the registered manager was very approachable and they could also contact the nominated individual if needed.
- A person told us they once had a small issue but the registered manager dealt with it within a few hours. They added, "I am happy with everything and if I wasn't, I wouldn't be here."
- The registered manager told us due to the standards and level of service, they built close relationships with people and their families so they felt relaxed raising anything. A relative confirmed this and added, "They always take on board any feedback. They understand the standards they set and they do all they can to resolve anything."

# 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.

This is the first inspection of this newly registered service. This key question has been rated outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The provider's vision and values made sure people's health and wellbeing was put first and everything was tailored towards them to ensure they received an excellent level of care in a five-star service environment.
- People and their relatives praised the service, the openness of the staff and management team, which ensured people lived an excellent quality of life. Comments included, "They are unbelievable and do a wonderful job. I have no hesitation in recommending this service", "I cannot find any faults. It is absolutely excellent" and "Their prime focus is [family member]. Being here, they get the best chance of getting the best quality of care they deserve."
- A relative told us how the level of care and support their family member received had a very positive outcome for both of them. They said, "From how they were before, just sitting around, to now where they are happy and active when they want to be, singing and dancing because of the personalised care."
- Staff praised the open culture of the service and were extremely passionate and dedicated in carrying out their roles and making sure people received excellent person-centred care. Staff were fully aware of the standards and expectations that people and their relatives had been promised.
- Comments from staff included, "The vision is clear and the foundation is going above and beyond from the very start", "It has to be 5 star as a minimum, and I'm proud we do that every day" and "For the members, everything is tailored around them, from the wine list, what to eat, what they want to do. We make sure they love it here, and this is the best thing about the home."
- The provider had also been externally recognised as providing an outstanding service. Loveday Kensington had been nominated as a finalist in the Luxury Care Home Awards 2023.

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

- The registered manager had a good understanding of their responsibilities regarding notifiable incidents and had a good understanding of when notifications had to be submitted. There was further support and oversight from the senior management team as these were discussed in management meetings.
- Staff were aware of their responsibilities through a range of daily handovers, staff meetings and supervision. These identified if any further training needs were required to ensure staff were following best practice.
- Staff were also further supported with specific training around the CQC inspection process, which helped give staff an understanding of delivering outstanding care and confidence in understanding CQC requirements.

- We spoke with a staff member who had recently started who told us they had been allocated a more senior staff member who acted as a coach/mentor as part of the induction. They said, "He has been very helpful, supporting me with what I need. I have been supported well in this team and it has been a good experience so far."
- Staff were also trained by hospitality experts to ensure staff across all levels maintained a five-star service. A care assistant said, "Although we have the food and beverage team and club manager, I've had training in how to approach people, how to serve people. I want to give people a gold service as they have had this all their life."

#### Continuous learning and improving care

- The senior management team had a strong focus on monitoring performance and risk which ensured staff were always looking to learn and improve their standards of care. There were detailed and robust governance systems in place to monitor the service closely to ensure people received an excellent level of care and support.
- There were a wide range of audits across the service which included health and safety, mealtime experiences, infection control and accidents and incidents. Themed audits had also been carried out where areas of improvement were identified which helped to raise standards and staff awareness.
- Monthly clinical meetings discussed people's health and wellbeing and analysed any incidents across the service, such as falls, hospital admissions or unexplained bruising. There was further quality assurance and senior management oversight as the internal governance framework was based around the CQC inspection methodology.
- Audits identified where the service could make improvements to ensure people continued to receive a high standard of care. For example, dining experience observations and reflective discussions enabled staff to support a person more effectively during mealtimes. It was highlighted a change of environment that was less distracting and specific encouragement techniques helped a person to eat their food in a safer way
  - The provider had been proactive and had carried out a themed MCA audit where they felt staff would benefit from further support and training to develop their approach and understanding on the MCA. This resulted in group supervisions and sessions around capacity assessments to further their learning, which staff confirmed.
- The provider had a commitment to investment and innovation across the service to ensure high standards of care and support for staff. This included the home environment, staffing levels and resources to ensure people received a personalised first class service.

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

- The provider gave people and their relatives regular opportunities to obtain their views about the service and involve them in decisions across the home. Where people had stayed as part of a respite visit, we saw samples of guest surveys. One person had stated, 'The level of care was excellent and the food was delicious. The nursing care was excellent and really helped me to transition back home.'
- We saw the provider had involved people and their relatives when a number of people had to move over from the provider's other home. There was close working with people and families, which included meetings, videos and visits to the home to ensure there was a smooth transition into the home.
- Staff told us they felt appreciated and valued as part of the organisation and spoke positively about the level of support they received. Comments included, "They always listen to us and look after our welfare", "If we are taken care of, we can give the best service to the members" and "They encourage all of us to improve wherever we can and recognise this when we do."
- Staff also told us they had been able to develop their skills and attributes. A staff member said, "I love working here as it has given me an opportunity to grow and develop. I experience things I'm not used to and

meeting people from different walks of life. I come to work and I'm happy, it makes a big difference to me."

- There were also daily meetings where staff had opportunities to discuss any issues or concerns across the service. Staff told us the registered manager had an open-door policy and listened to their concerns. A staff member said, "She makes herself available and tells us the door is always open. She's the best manager and will always listen to us." Another staff member added, "They listen to our plight and what we can change. She also notices if anything is up."

#### Working in partnership with others

- The provider had created strong links with a wide range of local organisations and charities which helped create opportunities for people and improve their care outcomes. This included collaborations with local universities in relation to art and music therapy to see if it had a positive impact on people living with dementia. There were also links with universities related to nursing associate programmes, which benefitted the home.
- People were also involved with numerous local community events and benefitted from links with local amenities, theatres and restaurants. These were places that people and their relatives had highlighted had important and significant meaning to them. The provider also had links with another local care home and people had been involved in donating artwork to their arts programme.
- Along with their own on-site health care professionals, the provider had good relationships with a range of health and social care professionals. They had developed a partnership with a local pharmacy to supply end of life medicines, including a 24/7 cover with a team of private physicians in case of urgent prescriptions or medical visits.

#### 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

- The provider understood their responsibilities and the importance of making sure they were open and honest with people when they needed to be.
- People and their relatives had positive relationships with the senior management team and told us they were reassured they would be open and honest with them. A relative said, "They are incredibly open, keen to help, listen and put things right."