

Care UK Community Partnerships Ltd

Lennox House

Inspection report

75 Durham Road
London
N7 7DS

Tel: 02072726562

Website: www.lennoxhouseislinton.co.uk

Date of inspection visit:
30 June 2016

Date of publication:
15 July 2016

Ratings

Overall rating for this service

Good ●

Is the service effective?

Good ●

Summary of findings

Overall summary

At our previous inspection of this service on 28 July and 10 August 2015, the provider was in breach of Regulation 18 (2) (a) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Staff appraisals were not occurring which meant that staff performance and development was not being effectively reviewed. The provider sent us an action plan after the inspection detailing how they would address the breach. At this inspection we found that progress had been made, staff appraisals had all been completed and the provider was no longer in breach of this regulation.

This inspection took place on 30 June 2016 and was unannounced. This inspection was carried out by a single inspector. This report only covers our findings in relation to staff appraisals within the effective section. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Lennox House on our website at www.cqc.org.uk

Lennox House provides accommodation for up to 87 older people, some of whom are also living with dementia. On the day of the inspection there were 82 people residing at the home. The home is divided over four floors. On the ground floor intermediate care is provided for a maximum of twelve people. Residential care for people using the service who do not require nursing care is provided on the first floor. Nursing care is provided on the other two floors.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

We were assisted during our inspection by the registered manager and deputy manager.

We spoke in passing with three people using the service and a visiting relative. We did not ask these people about the specific area we were visiting to look at but had brief conversations about what they thought of the home. The responses we received did not raise any cause for concern. We noted that when a relative raised a suggestion to improve the storage of their own relative's clothing the registered manager responded immediately and informed the person what they would do. The relative told us that they appreciated the response and action promised.

The issues we had found regarding staff appraisals at the last inspection had been addressed. The records of all staff appraisals showed that the entire staff team had undergone an appraisal within the last year and for newer staff the service highlighted when this was due.

The provider was no longer in breach of Regulation 18 (2) (a) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in respect of staff appraisals.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service effective?

Good ●

The service was effective. Staff received regular training and supervision and staff appraisals had taken place.

Lennox House

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked 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.

We undertook an unannounced focused inspection of Lennox House on 30 June 2016. This inspection was carried out in order to check that improvements to address the previous breach of regulation, planned by the provider after our last inspection on 28 July and 10 August 2015, had been made.

We inspected the service against one of the five questions we ask about services: is the service effective? This is because the service was not meeting one of the requirements. The inspection was carried out by a single inspector.

Prior to the inspection we checked the action plan that the provider sent us following the inspection in July and August 2015. We also looked at notifications the provider had sent us that are required by law under the Health and Social Care Act 2008. During the inspection we looked in detail at records relating to the performance appraisals for staff and also training and supervision records.

Is the service effective?

Our findings

At our previous inspection of the service on 28 July and 10 August 2015, we found that the provider was in breach of the regulation relating to staffing with particular reference to carrying out staff appraisals. At that time, in discussion with the registered manager and area manager for the provider, it was accepted that the staff appraisal system was not effective or up to date.

The provider sent us an improvement plan, setting out how they would address the breach.

At this inspection we found that all of the issues relating to staff appraisals we had reported on our last inspection had been rectified. All staff, meaning those who had worked at the service for a year or more, had participated in a review and appraisal of their performance.

Records also showed that staff continued to participate in regular training. Staff attended regular training which included health and safety, infection control, safeguarding adults from abuse, dementia care, moving and handling and fire safety. The provider had systems in place to ensure that staff training was kept current and up to date. Where staff were about to, or had exceeded, the necessary timescale for refresher training this was flagged up on the provider's training database and action was taken to ensure that staff attended the required courses. We were told by the registered manager and deputy manager that staff received supervision every two months. Staff supervision records showed this was happening consistently for all staff.

Therefore the issues noted at the last inspection had been addressed, and the provider was no longer in breach of the staffing regulation, Regulation 18 (2) (a) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 in respect of staff appraisals.