

Dove Care Limited

Lifestyles

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance the Care Quality Commission (CQC) follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

Lifestyles is a residential care home providing personal care for up to 19 people. The service can support people with mental health needs, a learning disability and autistic people and people with a sensory impairment. At the time of the inspection, 18 people were using the service.

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

The service demonstrated how they were meeting the underpinning principles of Right support, right care, right culture.

Right Support

People achieved their goals and positive outcomes through accessing a wide variety of opportunities and activities with the support of dedicated staff.

People's independence was promoted as staff encouraged choice, control and inclusion in the local community.

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.

The home was clean and regularly maintained. Staff wore personal protective equipment (PPE) appropriately which helped to protect people from the risk of infection.

Right Care

Staff maintained professional boundaries and kept people safe, as they understood how to protect people from harm and abuse.

People were protected by the provider's recruitment processes as appropriate checks were completed; ensuring staff were suitable to work with people who used the service.

Risks to people's safety and wellbeing were well managed by staff and clearly recorded in people's care plans. People's independence was promoted through appropriate support for people to take positive risks. People took part in a wide range of activities and interests in the local community.

Right culture

The service was well-led and the registered manager promoted a positive culture and effective working relationships within the team and with relevant professionals which helped people to achieve good outcomes.

The registered manager valued their staff and supported them to maintain their wellbeing which meant they were more able to support people.

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 17 July 2018).

Why we inspected

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.

We received a concern in relation to restrictions for people. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained the same based on the findings of this inspection.

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

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

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Lifestyles

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

The inspection was completed by one inspector.

Service and service type

Lifestyles 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. Lifestyles is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

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

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We requested feedback from the local authority contract team. We also looked at information sent to us since the service registered such as notifications about accidents, incidents and safeguarding alerts. We used the information the provider sent us in the provider information return (PIR). 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 used all this information to plan our inspection.

During the inspection

We spoke with six members of staff including the registered manager, deputy manager, three support workers and one personal assistant to the registered manager. We also spoke with three people who used the service and two relatives. We received feedback from two health and social care professionals who had recently worked with the service.

We looked around the home to review the facilities available for people and the infection prevention and control procedures in place. We also looked at a range of documentation including care files and daily records for three people and medication administration records for four people. We looked at two staff recruitment files and reviewed documentation relating to the management and running of the service such as audits, service safety records, and policies.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from the risk of harm and abuse. People told us they felt safe and people's relatives were confident their family members were kept safe. One person said, "Staff are very helpful, very supportive, if I have any issues I could go and speak to them as they always have time to help me." A relative told us, "[Person's name] would be able to tell me if anyone did or said anything. They would know if something was wrong. [Person's name] tells me about all the staff and the funny things they say. I can see how they must get impatient, but they never do."
- Staff were trained in safeguarding and were able to identify signs and types of abuse. Staff understood processes to report concerns internally and externally and were confident any concerns would be promptly addressed.
- Positive boundaries were promoted. We observed staff following professional boundaries when working with people and helped people to understand why boundaries were in place.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's health, safety and wellbeing had been appropriately identified, recorded, managed and monitored to help keep people safe.
- People were supported to take positive risks. Positive risk-taking included people accessing jobs, hobbies and the local community independently or with the appropriate amount of support which kept people safe but maximised their independence.
- Staff were able to describe how they managed risks to people's safety and kept them safe from harm.
- Accidents and incidents had been appropriately responded to. Staff were kept informed of any changes to people's needs or the support they required to reduce the risk of them happening again.

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

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS

authorisations were being met.

Staffing and recruitment

- Staffing levels were safe. Processes were in place to monitor and adjust the number of staff needed to keep people safe.
- People got support when they needed it as staff met people's needs in a timely manner. We saw staff changed their planned work to take people out into the community to ease their anxiety.
- Safe recruitment processes were in place. Appropriate employment checks were completed to ensure staff were suitable to work with vulnerable people.

Using medicines safely

- People's medicines were administered safely. Staff were trained in administering medicines and their competency had been assessed to ensure they had the required skills and knowledge.
- Guidance was in place to support staff to administer 'as and when required' medicines.
- Medicines were stored appropriately.
- Staff knew how people liked to take their medicines and when they needed them.

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.
- People were supported to have visits from their families and friends. Processes were in place to enable visits to take place safely and alternative arrangements were in place in the event of an outbreak of COVID-19.

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 our last inspection we rated this key question good. The rating for this key question has remained good. 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

- People were empowered to have control of their lives and live a full a life as possible. One person told us, "I am happy here because of my independence. If it hadn't been for all the help and support I receive, I would not be the person I am today."
- People accomplished their goals and were proud of their achievements. People had achieved their goals of having a job, completing voluntary work and improving their health. One person told us, "My health has improved. Physically and mentally I feel stronger."
- People achieved positive outcomes with staff support. A relative told us, "Staff have been so supportive and taught me a lot and now I have a much better understanding. [Person's name] now understands the condition better and is learning how to manage it. To me the miraculous thing is I can see the progress they have made."
- People were respected and valued as individuals. One person told us, "Staff uphold our rights and choices. I make all the decisions for myself." A health and social care professional told us, "[Registered manager's name] and their staff have taken the time to get to know [Person's names] very complex needs. Talking with them several times a day on a 1-1 level, never criticising their mistakes, showing [Person's name] nothing but honesty and respect, encouraging their independence, building their self-esteem and trusting them."
- The registered manager valued their staff and supported them to maintain their wellbeing.

Working in partnership with others; Continuous learning and improving care

- We received positive feedback from a health and social care professional. They told us, "The support [Person's name] has received at Lifestyles over the last few months since admission has been outstanding. I could not have asked for more than has been delivered within this care home."
- The management team and staff worked closely with relevant professionals and sought advice to ensure people got the support they needed. A health and social care professional told us, "The management team of the service appear to be passion lead, with the clients in the home a priority and their needs appear to be met quickly. I have seen the management team search for and ask for information when they have not known the answers. Management have asked me for guidance and I have also seen management ask for support from the social works for their knowledge. I have also seen good team leadership with their staff."
- The registered manager made positive improvements to the environment, care plans and medicines records following feedback during the inspection.

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

characteristics

- People and staff were included in the development of the service. Feedback systems included regular group and individual meetings which focused on different areas of the service. People's views were respected and changes to the service were made following people's feedback.
- People's relatives were sent yearly questionnaires to gather their feedback which was used to improve the service if required.
- The service regularly received positive feedback from people who used the service and their relatives.

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

- Systems continued to be effectively operated and had maintained the quality and safety of the service.
- The registered manager understood the regulatory requirements and reported information appropriately.
- Processes were in place to ensure their duty of candour was upheld if something went wrong.