

Leeds City Council

# Spring Gardens

## Inspection report

Westbourne Grove  
Otley  
Leeds  
West Yorkshire  
LS21 3LJ

Tel: 01943464497

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### Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

### About the service

Spring Gardens is a care home. It provides personal care and support for up to 30 older people. The home is situated in the Otley area of Leeds. There are two floors with lift access and there are several communal lounge areas. There is car parking to the front of the home and an enclosed garden area to the rear. At the time of the inspection there were 28 people using the service.

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

Overall, medicines were managed safely. Action was taken at the time of the inspection to improve medicines records and storage. Staff kept the home clean and tidy. Risks were managed well, and people had plans for staff to follow to reduce risk and keep people safe. The provider had systems to protect people from the risk of abuse and improper treatment.

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. People were cared for by staff who were well supported and had the right skills and knowledge to meet their needs effectively. Staff followed good practice guidance. Staff supported people with their healthcare needs and worked well with external healthcare professionals. People's nutritional needs were met. People said they enjoyed the meals and there was enough choice.

People were treated well, with kindness and compassion by staff who respected their privacy and dignity and promoted equality and diversity. People were supported to be as independent as possible. We received very positive feedback about the caring approach of staff and the management team.

There was a programme of activities that were tailored to people's individual preferences. People told us they enjoyed these. People were asked for their views and their suggestions were used to continuously improve the service. People knew how to raise concerns should they have any.

The service was led by registered managers and a management team who everyone described as approachable, well organised and caring. The culture at the service was open and inclusive. A range of systems were used to monitor the quality of the service. Where areas of improvement were identified these were acted upon.

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 last rating for this service was Good. (report published 8 February 2017)

### Why we inspected

This was a planned inspection based on the previous rating.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection 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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

# Spring Gardens

## **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 undertaken by one inspector and a specialist advisor in governance.

#### Service and service type

Spring Gardens is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had two managers registered with the Care Quality Commission. 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.

#### Notice of inspection

This inspection was unannounced.

#### What we did before inspection

We reviewed all the information we held about the service. We contacted relevant agencies such as the local Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all this information to plan our inspection.

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

During the inspection

We spoke with seven people who used the service and three relatives. We also spoke with four staff, a senior support worker, the deputy manager and the registered managers.

We reviewed four people's care records, policies and procedures, records relating to the management of the service, including training records and quality audits.

After the inspection

We received feedback from health care professionals who regularly visit the service.

# 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.

### Using medicines safely

- People received their medicines when they should. Overall practice was safe. Instructions for two variable dose medicine were not clear and arrangements were made for this to be reviewed with the person's GP. The medicines had not been used for some time.
- In the main, medicines were safely received, stored, administered and returned to the pharmacy when they were no longer required. However, there had been occasions when the medicine room temperature had exceeded the recommended temperature for safe storage of medicines and no action had been taken. Following the inspection, we were informed an air conditioning unit had been ordered.
- Staff had been trained to administer medicines safely and their competency was checked.

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

- Risk was assessed and managed to keep people safe. There were risk assessments within care plans to guide staff on safe working practices and to keep people safe from avoidable harm. For example, risks around people's mobility had been identified and appropriate actions were taken to help reduce these risks.
- Accidents and incidents were recorded and responded to appropriately to ensure outcomes could be achieved and lessons learned. The registered manager monitored these to reduce the risk of reoccurrence.
- Fire systems and equipment were monitored and checked to ensure they were in good working order. Each person had a personal emergency evacuation plan which detailed the support they required to leave the service in an emergency.
- The premises and equipment were safely maintained.

### Preventing and controlling infection

- People were protected against the risk of infection. The home was visibly clean, and people said they thought the home was kept clean.
- We observed staff used personal protective equipment (PPE), when providing care and support to people. Staff confirmed there was enough PPE, such as disposable gloves, hand gels and aprons to maintain good standards of infection prevention and control.

### Staffing and recruitment

- There were enough staff to ensure people received support in line with their assessed needs. When people requested support from staff, the staff responded to these requests promptly. One person said, "I've never had to wait long for anything."
- The provider operated a safe recruitment process.

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

- People were protected from the risk of abuse and unsafe care.
- People told us they felt safe and had confidence in the service. Comments included, "I feel very safe here. Its brilliant, lovely, no concerns at all."
- Staff received training on safeguarding and were knowledgeable about the procedures to follow if concerns arose. They knew what action to take if they suspected or witnessed abuse and felt confident to 'whistle blow'. They knew which outside agencies to involve if needed.



# 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.

At the last inspection this key question was rated as Good. At this inspection this key question remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's needs were assessed before they moved into or stayed at the service for respite care to ensure they could be met.
- Up to date patient summaries were obtained from health professionals to ensure all current needs were covered.
- Care was managed and delivered within lawful guidance and standards. We saw up-to-date information related to hydration, skin care and oral health were included within care plans.

Staff support: induction, training, skills and experience

- People were supported by trained staff who had a good understanding of their needs.
- All new staff received a thorough induction on their appointment to ensure they had the appropriate skills to support people with their care. Induction training included a session with a user of services to enable staff to gain understanding on what it is like to receive services.
- Training was refreshed and updated regularly. Where any updates were overdue, plans were in place to ensure completion.
- Staff told us they received regular supervision which included feedback about their performance and enabled them to discuss any concerns, training and development.

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

- People had access to a varied and balanced diet. They were offered a choice of food and drink and were positive about the meals they received. People's comments included; "Food is fine it suits me" and "There is always a choice I like."
- People were supported effectively with their meals and drinks. The mealtime experience was positive.
- People's weight and nutritional intake were monitored, and appropriate action was taken if there were any concerns.

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

- Access to the building and attractive gardens was suitable for people with reduced mobility and wheelchairs. A passenger lift was available for people with limited mobility to make the building accessible.
- The service was tidy, well-lit and free from trip hazards. People's rooms were highly personalised, and they were able to bring in their own belongings. Décor was modern and ensured the environment was welcoming.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other

agencies to provide consistent, effective, timely care

- Staff monitored people's health and sought medical support when needed. People told us they received healthcare support when they needed it. A relative said, "They are so good at picking up health issues. They notice if [name of family member] is under the weather before we do." A health professional told us, "All the residents appear well cared for."
- Care records showed people had been referred to healthcare professionals. We saw advice given by healthcare professionals was acted upon and included in people's care records.

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.

- Staff sought people's consent and supported them to have choice and control over all aspects of their support.
- Appropriate applications had been made to deprive people of their liberty.
- Staff had received training and were knowledgeable about the principles of the MCA.

# 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.

At the last inspection this key question was rated as Good. At this inspection this key question remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- Staff treated people well and respected each person as an individual. People told us they valued the support they received. One person commented, "Nothing is too much trouble."
- People's care records contained detailed information about people's background and preferences, and staff were knowledgeable about these.
- People were comfortable in the company of staff and actively engaged in conversations. There was laughter and people had clearly developed valued relationships with staff.
- Staff showed genuine concern for people and were keen to ensure people's rights were upheld and they were not discriminated against in any way.

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

- The service supported people with decision making. Care records contained evidence the person who received care or a family member, if appropriate, were at the centre of developing their care plans.
- Staff had a good awareness of people's individual needs, preferences and interests.
- People told us they were able to make choices in their daily lives. One person said, "I do what I want when I want. There is no pressure."
- Information on advocacy services was available in the service. An advocate is an independent person who supports someone so that their views are heard, and their rights are upheld. We were told of one person who had recently used this service to assist them in decision making.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected. People were supported with their needs in private, and staff were discreet when asking people if they needed support. One person said, "I have no concerns about my privacy. Total respect is what you get." A relative told us; "Staff show great respect for people; so polite, nice and kind."
- There was a strong emphasis on respecting people's dignity. Dignity audits had been completed to promote this. The registered managers had also introduced 'dignity packs'. These contained information on the service and some toiletries and supplies to ensure people were never in the undignified position of running out or being without the basics.
- People were supported to be as independent as possible. Staff encouraged people to do what they could for themselves and assisted when they needed it.
- Staff spoke of the importance of maintaining people's independence. One member of staff said, "It is good for people's well-being to keep going."

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question remained the same. This meant people's needs were met through good organisation and delivery.

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

- People were provided with care and support that was focused on individual needs, preferences and routines. People told us they got the support they needed. Comments included; "Everything you need is covered."
- Overall, care plans provided staff with detailed information about people, their likes, dislikes, histories and preferences. Some records were not as detailed and used vague terms such as 'full support'. The deputy manager agreed to review these to ensure detailed descriptions of people's care needs were included.
- People said they were happy, and staff knew them well. Comments included, "It's lovely here; I am very happy" and "It's magnificent here; the best thing I've ever done deciding to come here. Everyone is lovely."
- People and their representatives were involved in reviews of their care.

End of life care and support

- The registered managers ensured people received compassionate support at the end of their lives. They had developed strong links with health professionals to ensure this. They also supported staff well when they were providing end of life care.
- Staff told us they had training on how to provide sensitive and compassionate end of life care. They were aware to respect people's choices and beliefs.
- The service had received a written compliment about end of life care provided. The relative had thanked the staff team for the provision of caring, compassionate and dignified care for their family member.
- The registered managers made sure relatives and friends were supported when people were at the end of their lives. They had introduced a comfort basket that was placed in people's rooms. The basket had snacks, drinks, toiletries, hand creams and lip balms for people to help themselves to. One of the registered managers said, "It's nice to provide the creams so people can sit with their loved one and perhaps give them a hand massage. It may make people feel they are doing something at such a difficult time."

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 identified and recorded in their care plans. These were shared appropriately with others, including professionals.
- Staff understood people's communication needs and how best to communicate with people. For example,

staff did not rush people when speaking with them and allowed them plenty of time to respond.

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

- People were happy with the activities provided. Their comments included; "There's always something on" and "I really enjoy the discussion groups."
- Activities were based on what people wanted and were interested in. Activities included; exercise classes, visiting musicians, church services and holy communion.
- People also enjoyed spending time in the garden where there was plenty of seating and shade. We saw this was well used during our visit.
- Relatives told us they could visit whenever they wanted and that they always felt welcomed.

Improving care quality in response to complaints or concerns

- The provider had systems to analyse complaints and concerns to make improvements to the service. Information relating to how to make a complaint was readily available throughout the service.
- People told us they felt comfortable to raise concerns and were encouraged to 'speak up'.
- At the time of our inspection there were no ongoing complaints. Historic complaints showed the registered managers took appropriate action to address the issues raised.
- Everyone we spoke with said they were very confident if they ever had any concerns these would be dealt with professionally.

## 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; 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 registered managers had created a positive culture that was open, inclusive and put people at the centre of the service. There was a friendly and relaxed atmosphere in the home.
- People we spoke with, relatives and staff all told us the registered managers and management team were approachable and available when they needed them. One person commented, "They are good managers; no danger. Very approachable." A staff member said, "We are blessed to have two great managers here."
- The registered managers and staff team told us information was shared through good communication systems to learn when things may have gone wrong. One staff member said, "We are kept informed if things need to change to make things better." The management team knew how to share information with relevant parties, when appropriate.
- The registered managers understood their role in terms of regulatory requirements. For example, the provider notified CQC of events, such as serious incidents as required by law.

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

- The registered provider had systems and procedures to monitor and assess the quality and safety of the service. Audits were used to assess standards and drive improvements. These were regularly completed and reviewed.
- Staff were knowledgeable and enthusiastic about their roles. They had a good understanding of their job roles and how to provide safe, responsive and effective care. One staff member told us, "Good support means we give good care. Managers are really on the ball here; they show good leadership."

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

- The service engaged with people, others acting on their behalf and staff in an inclusive way.
- Face to face meetings, and satisfaction questionnaires were used to gain feedback about the service. We saw various topics about the service were discussed. For example, menus and activities. Feedback was very positive which demonstrated people's satisfaction with the service.
- The registered managers had developed links with the community. These included; a local choir who came in to sing and a masonic lodge who were planning an afternoon tea with people who used the service.

### Working in partnership with others

- People received safe and coordinated care. The service worked in partnership with other organisations to make sure they followed current practice and the people in their care were safe. These included health and social care professionals.
- Healthcare professionals gave us positive feedback about how the service worked with them to achieve good outcomes for people. One told us "The staff appear very friendly and caring and are quick to phone the team if they want a resident visiting or to raise a problem that has occurred."