

# Orchard Care Homes.Com (2) Limited

## St Helen's Hall and Lodge

### Inspection report

Elephant Lane  
St Helens  
Merseyside  
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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: St Helens Hall and Lodge provides residential care for older people; some of which are living with the dementia. The home has two units, The Lodge and The Hall, both of which are based over two floors. At the time of our inspection 83 people were receiving support.

People's experience of using this service:

The management team and staff at St Helens Hall and Lodge created a warm, calm and friendly atmosphere for people and visitors. Positive comments were received regarding the caring approach of the staff team and how well they knew the people's needs. Strong, familiar and positive relationships had been developed between staff and people living in the home and their family members.

Staff were motivated to deliver care that was person-centred and based on people's needs and preferences. People were treated with kindness, compassion and respect and staff interacted well with people. Techniques were used by staff to help relax people with positive outcomes. People were encouraged and supported to be as independent as possible.

People told us they felt safe living in the home and family members were confident their loved ones were well looked after and safe. Family members told us they had peace of mind knowing they did not need to worry about their relatives. Risks people faced were assessed and those identified were safely managed. Medicines were managed safely. People told us they received their medication at the right time. Staff showed a good understanding of their roles and responsibilities of keeping people safe from harm. The environment was safe and people had access to appropriate equipment where needed.

Enough suitably qualified and skilled staff were deployed to meet people's needs. Staff received a range of training and support appropriate to their role and people's needs. Staff told us they received a good level of support from the management team and were encouraged to develop within their roles.

People's needs and choices had been assessed and planned for and care plans identified intended outcomes for people and how they were to be met in a way they preferred. People told us they received the right care and support and felt staff were well trained and competent. People received personalised care and support which reflected their care plan. People were encouraged and supported to eat and drink well and supported to access health care when needed. People were offered choice and control and where able consented to their care and support. Where people lacked capacity to make their own decisions they were made in their best interests in line with the Mental Capacity Act.

The leadership of the service promoted a positive culture that was person-centred and inclusive. People, family members and staff all described the registered manager as approachable, supportive and always visible around the home. The passion, knowledge and experience held by the management team helped to create a relaxed environment for everyone. The management team showed a desire to improve on the

service and were continuously looking at ways to do this. Effective systems were in place to check the quality and safety of the service and improvements were made when required.

Rating at last inspection: This was the first inspection of the service since being newly registered with the Care Quality Commission (CQC) in February 2018.

Why we inspected: This was a planned comprehensive inspection.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received we may inspect sooner.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good ●

This service was safe.

Details are in our Safe findings below.

### Is the service effective?

Good ●

This service was effective.

Details are in our Effective findings below.

### Is the service caring?

Good ●

This service was caring.

Details are in our Caring findings below.

### Is the service responsive?

Good ●

This service was responsive.

Details are in our Responsive findings below.

### Is the service well-led?

Good ●

This service was well-led.

Details are in our Well-led findings below.

# St Helen's Hall and Lodge

## 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: Day one of this inspection was conducted by one adult social care inspector and two Expert by Experience. Day two was conducted by one adult social care inspector. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service.

The service had a manager registered with CQC. This means 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: Day one of this inspection was unannounced whilst day two was announced.

What we did: Our plan took into account information the provider had sent us since the last inspection. We considered information about incidents the provider must notify us about, such as abuse; and we looked at issues raised in complaints and how the service responded to them. We assessed information we require the provider to send to us at least annually within their provider information return (PIR). This provides key information about the service, what the service does well and the improvements they plan to make. We also obtained information from the local authority commissioners and safeguarding team. We used all this information to plan our inspection.

During the inspection we spoke with 15 people using the service and three family members to ask about their experience of care. We also spoke with the registered manager, care manager, administrative assistant and four care staff.

We looked at four people's care records and a selection of other records including those related to medicine administration, recruitment and the safety and quality monitoring of this service.

Details are in our Key Questions below. This report includes information provided by both expert by

experience.

# Is the service safe?

## Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- Staff received safeguarding training and had access to relevant information and guidance about protecting people from harm. Staff understood what was meant by abuse and were confident about how to report safeguarding concerns.
- A whistleblowing policy was also in place and staff were aware of the procedures to follow with regards to this.
- The registered manager kept a record of safeguarding incidents that had occurred. Incidents were dealt with appropriately and action was taken to minimise further occurrences.
- Personal emergency evacuation plans (PEEPs) provided guidance for staff to safely evacuate people in an emergency.
- Contingency plans were in place to manage situations such as spread of infection to ensure people continued to receive safe care.

Assessing risk, safety monitoring and management

- Individual risks to people had been assessed with the involvement of the person and their family members where appropriate. Electronic care records provided detailed information around people's individual risks in order for staff to keep people safe from avoidable harm.
- Risks to people were regularly reviewed and records updated to reflect any changes in identified risks to ensure people received the right support in the least restrictive way possible.
- People told us they felt safe, comments included "I do feel safe here as no-one causes me any harm or bother" and "I am safe here." Family members told us "It allows me and my family to relax knowing this" and "Yes [relative] is safe everything is done properly I'm happy."
- Regular safety checks were completed on the environment and equipment people used to ensure it remained safe.

Using medicines safely

- Medicines were stored and managed safely by appropriately trained staff.
- The service had implemented the use of electronic medicine administration records (MARs). Staff told us they were much easier to use and helped to reduce errors in recording when medicines had been administered.
- Staff had access to information and guidance about how to safely administer people's prescribed medication. Guidance was also in place for the use of medication to be given 'as required' (PRN) and the application of creams and ointments.
- Records were completed when medication was received into the service, destroyed and returned to the supplying pharmacy.

- People told us they received support from staff with their medication when needed and always received it at the right time.

#### Staffing and recruitment

- Enough suitably qualified and trained staff were deployed to meet people's needs and keep them safe. Staff were proactive at providing support when needed.
- The registered manager had recently reviewed staffing deployment to ensure each shift contained a balance of skill mix in staff.
- Safe recruitment processes were being followed.

#### Preventing and controlling infection

- Staff had received training around preventing and controlling the spread of infection and had access to relevant guidance and information about good infection prevention and control.
- Staff used personal protective equipment (PPE) and followed correct guidance in relation to disposal of PPE and other waste products.
- All areas of the home were clean and well-maintained.

#### Learning lessons when things go wrong

- A record of any incidents or accidents that occurred were kept and reviewed monthly to identify any patterns or trends so that lessons could be learnt when things went wrong.
- The provider shared information when incidents had occurred at other services so that learning could be taken and help prevent similar incidents occurring.



# 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

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; Staff working with other agencies to provide consistent, effective, timely care

- Assessments were completed prior to people moving into the home to ensure staff were able to meet their needs.
- Assessments were obtained from other health and social care professionals prior to people receiving support and used to help plan effective care.
- Assessments of people's care needs were completed in good detail and included expected outcomes based on their needs and choices.
- Further assessments were completed both by staff and other health and social care professionals where changes in care needs had been identified.
- Staff knew people well and how best to meet their needs. Staff used the training and experience they had received to support people and provide good outcomes and a good quality of life.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and skilled and carried out their roles effectively. Newly recruited staff had completed a comprehensive induction and continued to receive training relevant to their roles and people's needs to maintain up-to-date skills and knowledge.
- Staff were supported and encouraged to develop within the service apply for senior or management roles.
- Staff felt supported in their role and received regular one-to-one supervision. They told us the on-going support enabled them to discuss their work concerns or learning and development when needed.

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

- People were supported to maintain a healthy balanced diet and they were provided with regular food and drink throughout the day and night. Staff provided people with the appropriate support and encouragement to eat and drink and where required.
- Hydration stations were located throughout the home to encourage people to drink more.
- Food 'taster' sessions were introduced as part of activities to encourage people to eat more. The registered manager told us they identified when people had lost weight it was as a result of other underlying health conditions rather than lack of sufficient food intake.
- People were protected from risks associated with poor nutrition, hydration and swallowing difficulties.

Supporting people to live healthier lives, access healthcare services and support

- Where people required support from healthcare professionals this was arranged and staff followed guidance provided by such professionals.

- Where staff identified changes in people's needs, referrals to appropriate healthcare professionals were completed in a timely manner and records were maintained to evidence such referrals and any advice given.

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

- There was signage around the home to help people with their orientation and finding their way.
- Technology and equipment was used effectively to meet people's care and support needs. People had access to call bells to alert staff to when they required support. Those unable to use a call bell had sensor mats in place.
- Staff had developed a sensory room within the home to help provide a calming and relaxing environment for people. This room had helped to reduce incidents of distressed and anxious behaviours. The registered manager told us one person's medication had been reduced as a result of the positive impact this room had had.
- People's rooms were designed and decorated to meet their needs and contained items personal to them.
- There were some items around the home to provide stimulation for people living with dementia. The registered manager told us there were plans in place to further develop the environment so that it better met the needs of people living with dementia.

#### 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 with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Where people were deprived of their liberty, the registered manager worked with the local authority to seek authorisation to ensure decisions made on behalf of people were lawful.
- Where people lacked capacity to make particular decisions, they were supported to have maximum choice and control over their lives and were supported by staff in the least restrictive way possible.
- Where decisions needed to be made in people's best interests, relevant people were involved and appropriate records had been completed.
- Staff had good knowledge and experience in relation to MCA and how this works in practice when supporting people.

# 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

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People received good care and support.
- People were treated with kindness and were positive about the caring attitudes of staff. Comments included, "I like being here, it's my home, staff are nice they are lovely to me," "Yes[staff are nice, they know my name and they know who I am," "Staff are kind and caring to me always, they are honestly fantastic, you don't know how much I love it here" and "Staff are lovely, they say good morning to me I'm not isolated here I can't find fault." One relative told us "Staff are very caring I can't find fault with them, they are always cheerful."
- Staff knew people well and displayed positive, warm and familiar relationships when interacting with them. Interactions between staff and people were genuinely kind and compassionate.
- Staff understood and supported people's communications needs and choices. They maintained eye contact and listened patiently and carefully when speaking with people.
- Staff created a warm and happy environment that made people and visitors feel relaxed and welcome. Appropriate banter took place amongst staff and people.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect and provided compassionate support in an individualised way; people felt listened to. Comments included, "Staff are respectful, they use the name I prefer and know me really well" and "I stay in my room a lot as I get embarrassed as my hands shake a lot and I don't feel comfortable, staff respect this and say it's fine."
- Staff provided support and comfort to people who were upset or anxious to help relax them.
- Staff ensured people were kept clean and well-presented after meals and when providing support with personal care.
- Staff ensured they delivered personal care to people in private; they knocked on doors and waited for a response before entering bedrooms, bathrooms and toilets.
- Records relating to people's care were stored electronically; staff had their own log-in details to ensure information was kept secure and confidential.
- People were given choice and control over how they spent their day and were supported to be as independent wherever possible. One person told us "I get to choose my clothes every day, they hold out items for me from my wardrobe and then I pick what I want, they do me options."
- People were supported to maintain and develop relationships with those close to them, social networks and the community.

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

- People, along with family members, were encouraged to share their views about the care provided with regular care plan reviews and general meetings.

# Is the service responsive?

## Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People received person-centred care that was based on their individual needs. Staff knew people's likes, dislikes and preferences and provided care and support in the way people wanted.
- People, and their family members where appropriate, were involved in care planning.
- Care plans were developed and stored on an electronic system and contained detailed and person centred information that was relevant and up-to-date.
- Staff used hand-held devices that gave them access to relevant up-to-date information about people's needs and how they were to be met.
- People told us staff knew them well and provided them with the right support. Comments included, "Staff come quickly if I press my buzzer and they always know what I need," "Staff always ask before they dress me, they are so nice to me and they bring a doctor when I need them" and "I need care at night, staff come when I press my bell."
- The service recognised and met the communication needs of people with a disability or sensory loss. Audio books were provided for people with sight difficulties and staff used gestures to communicate with people who had hearing difficulties.
- People were supported to access a range of activities on a regular basis. People told us they enjoyed the activities that were provided; their comments included "We go out to the rugby in the bus which is nice," "I'm happy to get involved with the activities they are good," "We go out sometimes which is nice" and "I love doing word searches staff always make sure I have a new one to do everyday. I have quite a collection."
- Staff respected the wishes of those who did not want to get involved in group activities. One person told us "I can do activities if I want to but sometimes I'm a bit funny and don't always want to which is fine and staff just let me do what I want."
- There was a church within the service for people to access whenever they wished to and catered for various religions.

Improving care quality in response to complaints or concerns

- People knew how to provide feedback about their experiences of care. The service provided a range of accessible ways to do this through care review meetings, regular surveys and meetings held for people and their family members.
- People and family members were given information about how to make a complaint. They were confident about making a complaint and felt they would be listened to. Comments they made included, "I can say if I'm not happy, they can't do enough for me" and "Oh yes I did need to make a complaint about night staff talking too loud, the manager mentioned it straight away and it's been a lot better."

End of life care and support

- At the time of the inspection no-one using the service was in receipt of end-of-life care.
- People were supported to make decisions about their preferences for end-of-life care.
- Staff had completed end of life care training and were confident in their ability to provide care when it was needed.
- Facilities were available to family members to enable them to spend time with their relatives at the end of their life.

# 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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- Managers promoted a culture of person centred care by engaging with everyone using the service and family members.
- Family members spoke positively about the service and the management team. Comments included "The care is good for [relative] I'm really pleased, a great atmosphere," "We were struck by the genuine friendly atmosphere you can't invent that it's just here, it's natural" and "Before [relative] came here to live permanently, [manager] drove all the way down to London to visit and do an assessment to see if it would be suitable to her."
- Staff were positive about the management team and the leadership of the service. Staff described the home as 'their second home' and enjoyed their work.
- Staff understood the registered manager's vision to provide the best care that people deserved and were keen to implement this within the home.

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

- The service was well run with a clear management structure in place. The registered manager was supported by a care manager, deputy managers and night managers who all worked well together and had a clear understanding of each other's role and responsibility.
- Staff were well supported by the registered manager and actively encouraged to develop within service; been supported to progress into more senior roles.
- The registered manager was aware of their legal requirement to notify CQC about certain events and submitted notifications when required.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; working in partnership with others

- The service involved people and family members through meaningful discussions about the care. Their views were obtained through regular surveys and meetings and information obtained was used to improve the service.
- The management team and staff worked closely with other agencies and community groups to achieve good outcomes for people. People had regular access to dementia and reminiscence cafés; the registered manager told us they planned to develop a dementia café within the home to encourage members of the public to attend.
- The management team and staff extended their support to people in the local community; One person

who visited the home daily to see a friend had become unwell on several occasions, the registered manager supported them with access to health and social care support.

#### Continuous learning and improving care

- Quality assurance systems were in place and used effectively to monitor key aspects of the service. Audits and checks were completed on a regular basis by the management team and registered provider to identify areas of improvement.
- Regular meetings were held with the registered manager and quality team to discuss any issues regarding the service and to develop improvement plans to address these.
- Systems were in place to ensure regular reviews and analysis of key aspects of the service were completed. Information gathered was used to provide more relevant and person-centred care.
- The registered manager attended various forums on a regular basis to keep up-to-date with current guidance and best practice.
- The service had been recognised and awarded for their work in relation to falls prevention and continued to work with professionals to further improve this.