

# The Thorns Retirement Home Limited

# The Thorns Retirement Home

## Inspection report

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Date of inspection visit:  
03 October 2019  
07 October 2019

Date of publication:  
22 October 2019

## 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

The Thorns Retirement home is a residential care home providing accommodation and personal care to older people. The service can support up to 15 people. At the time of the inspection the service was providing support to 11 people. The Thorns Retirement Home is an adapted building which has been extended. It has one communal living area, a dining area, a conservatory and an unsecured garden. Accommodation is based over two floors and there is a passenger lift in between floors for people with mobility needs.

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

People and relatives told us safety was considered and promoted. One person said, "Of course I feel safe, it is a very safe environment." The provider was aware of the need to monitor and address risk in a timely manner. People and relatives told us they were happy with staffing arrangements at the home. Staff were aware of the importance of keeping people safe and responding to the risk of abuse. Medicines were managed safely. However, we found documentation relating to medicines was not always consistently maintained in line with good practice we have made a recommendation about this.

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. Staff had received training to enable them to understand the principles of the Mental Capacity Act 2005.

People's health needs were monitored and addressed and there was evidence of working closely with other health and social care professionals. Everyone we spoke with agreed the staff had the appropriate skills and training required. People told us they were happy with the quality of the food provided. One person said, "They [the meals] are very good and they are not mean with the food."

People and relatives told us there was an emphasis on providing person centred care within the home. Activities had been developed in line with people's expressed wishes and there was great emphasis on providing varied and interesting activities to promote health and well-being. Staff had been trained to support people at the end of their lives. People and relatives praised the responsiveness of the management team and their commitment to listening and responding to feedback.

Care and support was flexible and tailored to people's needs. People were able to have control over their preferred routines. Relatives told us they were always welcomed at the home. People and relatives repeatedly told us staff were kind and caring. Observations made during the inspection confirmed this.

People, relatives, staff and health professionals repeatedly told us the service was well-led. They praised the skills and approachability of the registered manager. We saw evidence of multi-disciplinary working to ensure care was delivered in line with good practice. The registered manager was aware of their role and

responsibilities and the importance of continuous improvement.

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 (published 14 March 2017).

#### Why we inspected

This was a planned and scheduled inspection.

#### 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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Thorns Retirement Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

## 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?

Good ●

The service was effective.

Details are in our safe findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our safe findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our safe findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our safe findings below.

# The Thorns Retirement Home

## **Detailed findings**

## Background to this inspection

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

One inspector and one Expert by Experience visited the home to carry out the inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

The Thorns Retirement Home 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 a manager 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 the inspection

Before the inspection we reviewed information we had received about the service since registration. This

included looking at information held on our database about the service. Due to technical problems, the provider was not able to complete a Provider Information Return. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We sought feedback from the local authority contracts and commissioning teams and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. This information helps support our inspections. We used all this information to plan our inspection.

#### During the inspection

We spoke with six people who lived at the home and five relatives. We spoke with the registered manager and two carers. To gather information, we looked at a variety of records. This included care records related to three people and information related to the management of the service. This included training records, accidents and incident reports and written feedback about the service. We did this to ensure the management team had oversight of the service and to ensure the service could be appropriately managed. We walked around the home and carried out a visual inspection and observed care interactions between people and staff.

#### After the inspection

We continued to communicate with the provider to verify our findings. We spoke with one relative about their personal experience of 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 told us they were happy with the support they received with their medicines.
- Although people were happy with the support provided, we reviewed medicines processes at the home and found medicines were not always managed safely and in line with good practice guidance.
- We found the registered manager did not have a system for checking medicines stocks against records. Medicines were not checked in and carried forward on each medicines cycle. Stock checks and stock balances provide a way to ensure medicines have been given as prescribed.
- Documentation was not always appropriately maintained to reflect good practice guidance. For example, medicines administration records did not include peoples allergies or an up to date photograph.
- We highlighted these concerns to the registered manager and they took immediate action to resolve the matter discussed.

We recommend the registered manager implements good practice guidance to ensure medicines are safely managed at all times.

### Preventing and controlling infection

- Systems and processes continued to be carried out to prevent the spread of infection.
- Everyone we spoke with commended the home on its standard of cleanliness. One person said, "My room is excellent, it is lovely and light, and someone comes in everyday to clean."
- A visiting health professional praised the consistent high standard of cleanliness within the home.

### Staffing and recruitment

- Systems and processes continued to be effective to ensure staffing levels met peoples' needs. People told us, "There is plenty of staff, more than adequate! If I want anything it is done straight away " and "There is plenty of staff. They are good kind carers."

Staff told us they were happy with staffing levels and said they had time to complete all their tasks. They praised the registered manager and said the registered manager would help if there was an increased need within the home.

- People told us staff responded to call bells in a timely manner. Feedback included, "They come in seconds, they are very prompt."
- We spoke with a staff member who was recently employed at the home. They confirmed suitable recruitment checks continued to take place. They told us they were unable to work at the home until the provider had completed all the necessary employment and character checks.

### Assessing risk, safety monitoring and management

- Risks to people's health, safety and welfare were assessed, monitored and managed. Feedback included, "I am very safe! I am very well looked after" and "[Relative] is absolutely safe! There was concern about them at home but here they are perfectly safe. They are well cared for and monitored."
- Staff confirmed they had access to risk assessments and could contribute to the reviewing and updating of risk assessments.
- Records continued to be maintained by the provider to show risk was assessed and reviewed in a timely manner. Health professionals were consulted with to ensure risk was appropriately managed.

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

- Systems continued to be implemented to protect people from the risk of abuse. People were empowered to speak up and raise any concerns.
- People and relatives told us The Thorns Retirement Home was a safe and happy place to live. One person said, "I am very safe, the girls are wonderful."
- The provider had a designated champion for ensuring staff knowledge of safeguarding was up to date and relevant. The registered manager confirmed the principles of safeguarding was high on the agenda at residents meetings, team meetings and staff supervisions. Staff were able to identify abuse and understood their responsibilities for keeping people safe.

#### Learning lessons when things go wrong

- The registered manager understood the importance of learning from incidents when things had gone wrong. They told us they reflected after incidents had taken place which had resulted in an unexpected outcome and looked at implementing changes to prevent any re-occurrence.
- Records were maintained for all accidents and incidents which had taken place. The registered manager reviewed these. This allowed the opportunity for accidents and incidents to be analysed and reviewed trends and themes.



# 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 has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People were supported to access health care and support. Care needs were routinely assessed and monitored. Care records were regularly reviewed and updated by staff when people's needs changed. Good practice guidance was referred to.
- People and relatives told us the care was effective. We viewed written feedback left by one person. They had written, 'I am returning home today. I've benefitted greatly from the care. I'm feeling much better than when I first arrived.' We spoke with a health professional, they commended the way in which people's healthcare needs were monitored and met by the provider. Two relatives' told us they had seen a marked improvement in their family members health and well-being since moving into the home.
- Staff worked proactively to maintain people's health. The registered manager told us one staff member had spent a morning with a specialist nurse to develop their own skills and practice. This had had a positive effect on one person who lived at the home, as staff had been able to enable the person to develop key skills to manage their own medical regime. This meant district nursing teams no longer needed to visit daily to see this person.

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

- The staff managed people's nutritional needs to ensure they received a balanced diet and enough fluids to keep them hydrated. Consideration had been taken to ensure the dining experience was pleasant for people. The registered manager said they hoped to provide a five-star experience like people would receive in a hotel.
- People told us they were happy with the quality and standard of the food provided. Feedback included, "The food is good. They would make me something else if I was not keen" and, "I have no complaints. It is nicely cooked."
- People were consulted with about the choice of menus and food available.

Staff support: induction, training, skills and experience

- Training continued to be provided to staff to ensure they had suitable skills and knowledge. Everyone we spoke with commended the skills of the staff team. One person said, "They are very well trained."
- We spoke with the registered manager about training. They confirmed training was provided in a variety of formats including competency-based e-learning and hands on training. They told us they were working hard to develop more practical training as they believed staff learned more effectively by this.
- Staff confirmed they were provided with support. They said they completed an induction process to allow them time to learn new skills and give them confidence to work safely with people. Staff received regular

supervision. Supervision is a one to one discussion held between a staff member and a more experienced member of staff. Supervisions allow staff to discuss performance and training needs.

#### 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.

- People's consent for care and treatment was gained in line with the law and good practice. At the time of the inspection, everyone who lived at the home had been assessed as having capacity to make their own decisions.
- People's consent to care and treatment was routinely sought.
- Staff told us they had received training in MCA and DoLS. They knew how to support people in making decisions and how to offer choice with day to day decisions and activities.

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

- The registered provider continued to make improvements throughout the home to ensure it met people's needs and was appropriately decorated.
- Rooms were personalised and homely. People were encouraged to bring in furniture and belongings from home.
- One relative told us their family member had been an avid gardener for most of their life. They had been provided with a plot of land within the communal garden, so they could continue this hobby when they moved in.

# 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 has 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

- Feedback received from people, relatives and health professionals confirmed people continued to be treated with kindness and compassion. The registered manager had introduced a booklet and consulted with people to ask them what terms of endearment they liked to be referred to. We observed positive interactions between people and staff. There was a light-hearted atmosphere where people laughed and joked with staff.
- Everyone we spoke with told us staff were kind and caring. Feedback included "They are amazing", "They are friends rather than carers" and "They are absolutely amazing, and so kind! I can only praise them."
- Staff often went the extra mile to ensure people were happy and content. We reviewed cards sent to staff to thank them for their kindness. Two people had sent cards to thank staff for their efforts in helping them celebrate their birthday. Both people agreed the birthday parties laid on for them were the best parties they had ever had. One person had written, 'Thank you for the most loveliest and most memorable 90th birthday yesterday. I thought last years was the best I ever had but yesterday was an absolute corker.'
- The registered manager understood the importance of protecting people's human rights and ensuring equality and diversity was promoted and maintained. They confirmed equality and diversity training was included within staff training.

Respecting and promoting people's privacy, dignity and independence

- People and relatives told us independence, privacy and respect were always considered. One person told us, "They never barge in, they are very good like that."
- Independence was promoted throughout the home. When people had expressed wishes to retain their independence this had been respected. We saw evidence of people managing their own medicines and carrying out tasks for themselves. People told us, "You are well cared for and someone is on hand if you need them, they will help" and "They don't take over but if I want help I will get it."
- Relatives told us they were welcomed and encouraged at the home. Feedback included, "They are all really friendly, you feel like part of the home not like an outsider" and, "We can eat with [family member]. They are very accommodating, they don't have appointments, no visiting times. We are absolutely made to feel welcome."

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

- People and relatives where appropriate, were encouraged to express their views and be involved in making decisions about their care.
- People and relatives confirmed the registered manager was approachable and said they were able to

express their views directly to them. One relative told us they had made some suggestions as to how the care provided to their family member could be improved. They praised the way in which the suggestions were taken and acted upon.

- The registered manager was aware of the importance of accessing as advocates when people did not have help from families to express their views. Advocates are independent people who can support people express their views and make decisions about their care.

# 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 has 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; 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

- Personalised care was promoted. Staff could tell us about people's likes, dislikes and personal routines. Care plans were individualised and identified key information about the person. We reviewed written feedback left by a health professional, they had commended the home on how staff focussed on attention to detail.
- People were encouraged to make choices and have control within their lives. Support was flexible, according to people's needs and wishes.
- The registered manager had worked hard to develop a lively and active home. Feedback from people included, "We have singers, a cellist, quizzes, choir at Christmas, and concerts. We even do Tai Chi, which I instigated" and "I think the activities are brilliant. They have varying types and they can socialise. They stimulate them, physically and mentally. [Family member] has really come out of their shell."
- People and relatives told us the service was extremely responsive. The provider had listened to the views of people and relatives and developed activities according to people's preferences. One person told us, "I like cactus growing. One of the staff will take me to the nursery to get seeds, compost and anything else I need. I have even got some of the staffs children growing cacti and one of them rang me last night to let me know it was growing."
- Links had been developed with community groups. A nursery had started visiting the home to combat isolation. People had been asked to reflect on this activity. One person had written, 'It was nice to see the comradeship between the children and the grownups. I think it was a learning programme for me too because I didn't really work with young children.' Additionally, people had been encouraged to be part of their community. The home had taken part in a community initiative to raise awareness and fundraise for a specific community activity.

### End of life care and support

- The service provided end of life care when necessary, in response to people's preferences and changing needs. Staff had received training to equip them with the required skills and knowledge. In addition, the registered manager and staff worked with other agencies as appropriate, to support people at the end of their life.
- The registered manager told us they openly encouraged people within the home to reflect on people's lives after people had passed away. They said, "We always have a sherry and a toast to celebrate people." People and staff were encouraged and supported to attend people's funerals if they expressed a wish to do so.

#### 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.

- The registered manager was aware of the standard and ensured people received information in a way they understood.

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

- The provider worked proactively to ensure concerns and complaints were acted upon in a timely manner.
- Everyone we spoke with commended the attitude of the senior management team and their responsive attitude. They told us any concerns relayed were effectively dealt with in a timely manner.

# 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;

- People, relatives, staff and professionals all agreed the home was well-managed. One person said, "[Registered manager] sets a high standard." Everyone told us they had confidence in the registered manager. Feedback included, "They have lots of things to offer. They are very clever" and "They are very thoughtful and kind. They are also very experienced and diplomatic and has a good team behind them." One staff member said, "I can hold my head up high when I tell people I work at The Thorns [Retirement Home.] Its well run. We have a good team and we work well together."
- The registered manager was committed to developing a high-quality person-centred service where both people experienced positive outcomes. People were empowered to be involved in how they continued to live their lives. This promoted positive outcomes for people. We saw evidence of staff developing people's skills and building confidence. One person had been supported to do a presentation on their life experiences to other people living at the home.
- Relatives and professionals praised the attitude of staff and their commitment to the service. One person said, "I never wanted to go into a home, but I am really glad I am here. Thank you one and all for this kind, caring and beautiful place that I now call home."

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

- People and relatives confirmed they were consulted with about the management of the home. People were encouraged to be involved in how the home was managed this included the recruitment of staff and planning activities within the home.
- Staff told us communication was good and said they could contribute to discussions and make suggestions about the service. Daily handovers and daily team meetings took place to keep staff updated and to plan tasks. Staff told us the home was a good place to work. One staff member said, "I love working here, I am very impressed at the quality of care and the general atmosphere. I feel very well supported."
- The registered manager was aware of the importance of partnership working with other health and social care professionals to promote good outcomes for people.

Continuous learning and improving care;

- The registered manager understood and was committed to continuous learning and improving care. This was achieved through providing staff with training; as well as consulting with people, relatives and staff to

understand their experiences of living at The Thorns Retirement Home.

- Since the last inspection the registered manager had had strengthened networks by developing champion roles within the home. Champions are staff members with specific skills and interests in chosen topics. Champions keep up to date with good practice and cascade their skills and knowledge to the rest of the staff team.
- The registered manager understood their roles and responsibilities in relation to the duty of candour.

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

- The registered manager was clear about their responsibilities and had a good understanding of quality performance. As part of their role, they ensured regular quality audits took place. This included reviewing the quality of care plans and health and safety processes within the home.
- Staff were knowledgeable about their working roles and responsibilities. They said the service was well-managed. Staff turnover in the home was low. This meant people were supported by staff who knew them well.