

Heatherwood Nursing Home Ltd

Lloyd Park Nursing Home

Inspection report

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30 June 2023

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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 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

Lloyd Park Nursing Home is a residential care home providing personal and nursing care to up to 17 people. The service provides support to older people, people with disabilities, people living with dementia and people with a learning disability and/or autism. At the time of our inspection there were 17 people using the service.

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

The service was able to demonstrate how they were meeting the underpinning principles of right support, right care, right culture.

Right Support

Staff supported people to have the maximum possible choice, control and independence and people had control over their own lives. Staff focused on people's strengths and promoted what they could do. Staff supported people to achieve their aspirations and goals. The service worked with people to plan for when they experienced periods of distress, so that their freedoms were restricted only if there was no alternative.

The service gave people care and support in a safe, clean, well equipped, well-furnished and well-maintained environment. People had a choice about their living environment and were able to personalise their rooms. People benefited from an interactive and stimulating environment. The service made reasonable adjustments for people so they could be fully involved in discussions about how they received support. Staff enabled people to access specialist health and social care support in the community.

Staff supported people to make decisions following best practice in decision-making. Staff communicated with people in ways that met their needs. Staff supported people with their medicines in a way that achieved the best possible health outcome. Staff supported people to play an active role in maintaining their own health and wellbeing.

Right Care

Staff and people cooperated to assess risks people might face. Staff promoted equality and diversity in their support for people. They understood people's cultural needs and provided culturally appropriate care. People received kind and compassionate care. Staff protected and respected people's privacy and dignity and they understood and responded to people's individual needs. Staff had training on how to recognise and report abuse, they understood how to protect people from poor care and abuse and the service worked

well with other agencies to do so. The service had enough appropriately skilled staff to meet people's needs and keep them safe. People's care, treatment and support plans reflected their range of needs, promoted their wellbeing and aspirations and followed best practice.

Right Culture

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the management and staff. People were supported by staff who understood best practice in relation to the wide range of strengths, impairments or sensitivities people with a learning disability and/or autistic people may have. This meant people received compassionate and empowering care that was tailored to their needs.

Staff knew and understood people well and were responsive to people's wishes. Staff turnover was very low, which supported people to receive consistent care from staff who knew them well. Staff placed people's wishes, needs and rights at the heart of everything they did. People and those important to them, including advocates, were involved in planning their care. Staff evaluated the quality of support provided to people, involving the person, their families and other professionals as appropriate. The service enabled people and those important to them to work with staff to develop the service. Staff valued and acted upon people's views. People's quality of life was enhanced by the service's culture of improvement and inclusivity. Staff ensured risks of a closed culture were minimised so that people received support based on transparency, respect and inclusivity.

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 (16 March 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service. We undertook a focused inspection to look at the key questions Safe and Well-led. 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 good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Lloyd Park Nursing Home 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.

Lloyd Park Nursing Home

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.

Inspection team

This inspection was carried out by one inspector and one Expert by Experience. 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

This service is a residential care home providing personal and nursing care.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

Notice of inspection

The inspection was unannounced.

Inspection activity started on 30 June 2023 and ended on 10 July 2023. We visited the location on 30 June 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection, including feedback from local authorities that commissioned care packages with the service. We also 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 1 person who used the service and 5 relatives of people who use the service. We also spoke with 5 staff, including the registered manager, compliance manager, a nurse and care workers. We reviewed a range of records. This included 9 people's care records and 3 staff records. A variety of records relating to the management of the service were also reviewed.

Following our visit to the service, we reviewed more records relating to the management 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 our last inspection we rated this key question good. At this inspection 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

- There were systems and processes in place to safeguard people from the risk of abuse and improper treatment.
- Staff received safeguarding training and knew how to recognise and report abuse.
- A person told us, "I definitely feel safe here". One person's relative said, "We have no reason to believe our relative is not safe. [He/she] is not in any danger. When we visit [he/she] isn't distressed".

Assessing risk, safety monitoring and management

- There were systems and processes in place to assess, monitor and manage risks to people.
- People's care records contained detailed and personalised information for staff to safely manage risks to people. People's risk assessments and care plans were reviewed and kept up to date.
- One person's relative reported staff always accompanied their relative when they walked anywhere because they were at risk of falls. They said, "[Name of person] is still mobile but [he/she] can't use the stairs. [He/she] goes downstairs in the lift with a carer". Another person's relative told us, "I maintain regular contact with the registered manager. I have been notified by her of things very promptly. I'm confident [name of person] is being watched very carefully".

Using medicines safely

- Medicines were used safely and in line with guidance.
- There was detailed information for staff in people's care records about how to give them their prescribed daily medicines. There were specific and personalised instructions in place for staff about how to give people their 'when required' medicines. People were given their medicines by trained, registered nurses and care staff received medicines awareness training.
- The provider carried out regular medicines audits to ensure medicines were being used safely and in line with 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 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. Conditions related to DoLS authorisations were being met.

Staffing and recruitment

- The provider deployed enough suitably qualified staff to meet people's needs safely.
- Recruitment of new staff followed safer recruitment procedures and included Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Preventing and controlling infection

- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was responding effectively to risks and signs of infection.
- We were assured the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- There were systems and processes in place to learn lessons when things went wrong.
- Staff knew how to report accidents and incidents and they were recorded and dealt with appropriately. Managers audited accidents and incidents to identify patterns and themes. This meant the provider was able to identify why something had gone wrong and take action to improve the service.

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. At this inspection 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

- There was a positive, person-centred culture that was open, inclusive and empowering, which achieved good outcomes for people.
- Staff interactions with people were caring, kind and friendly. The provider and managers valued staff and provided them with a good level of support. A variety of celebrations were held each year and people and staff did fun activities together and sometimes had meals together because they felt it was a nice thing to do.
- One person told us, "There is an element of trust throughout the home. Staff are friendly and kind, I would say people get on well with each other". They added, "If you had seen me a year ago you wouldn't recognise me. I came here for palliative care. I have made a lot of progress and in another six months my care needs will be different again, and I will probably be living independently".
- A person's relative said, "[Name of person] had found it very difficult at the previous nursing home. It was very difficult for both her and the staff. The change at Lloyd Park Nursing Home has been achieved by working with [him/her], as well as in [his/her] best interests". Another person's relative told us, "The staff stay because the team of staff they have are passionate about their work and the managers are very caring for their staff".

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 provider understood their duty of candour and managers had communicated openly and honestly with people and their families when something had gone wrong.

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

- There were systems and processes in place to assess, monitor and improve the quality and safety of the service and mitigate risks relating to people's health, safety and welfare.
- Staff were given a set of values and received clear and up to date information and instructions regarding their roles. This meant staff understood what they needed to do and how to do it and the level of performance expected of them.
- The provider carried out audits of the service. This helped them identify issues and they took action to

resolve and improve things when they found something had gone wrong. Managers understood regulatory requirements and notifications were submitted correctly and in a timely manner.

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

- The provider involved people, their families and staff in people's care and the development of the service.
- People's individual preferences and their equality and protected characteristics were assessed, valued and respected. People and their families were included in reviews of their care and they could contact the service at any time to raise issues and share their views. Staff spoke with families to get their feedback when they visited the home.
- The provider sent questionnaires to people, their families, and staff to gather their feedback and any ideas they had to improve the service. Staff were also able to share their thoughts in supervision, staff meetings and informal chats. People and their families could also use a website to leave feedback and reviews of the service.
- One person told us, "I can contribute to the service. For example, I came up with a plan to support staff to help one resident when they did not want to eat at times". A person's relative said, "The registered manager is very prompt at responding to emails, even in the evening and at weekends." Another person's relative told us, "If you raise any concern, they deal with it quickly, within twenty-four to forty-eight hours and they don't ignore you. The registered manager will go out of her way to sort things out".

Continuous learning and improving care

- There were systems and processes in place to support continuous learning and improvement of the care provided.
- Managers received updates to guidance and practice and shared learning by attending a variety of forums, groups and meetings. These included an information sharing forum with a local authority, NHS meetings, a Skills for Care group for registered managers and meetings with St Christopher's Hospice. Skills for Care is an organisation that helps create a well-led, skilled and valued adult social care workforce.
- The compliance manager also attended meetings specifically set up to learn about outstanding services and how to become an outstanding service.

Working in partnership with others

- The service worked well with other services, professionals and community organisations, including doctors, specialist healthcare services, local authorities and St Christopher's Hospice, which is a charity providing end of life care and support. This helped ensure people received the right care when they needed it.
- A local church provided a Sunday service in the home and music and pet therapy organisations provided activities in the home.
- The service had agreed with the Nursing and Midwifery Council to start providing nurse training to student nurses in September 2023.