

Avery at Loxley Park (Homecare) Limited

Loxley Park Assisted Living Residency

Inspection report

Loxley Park
8 Loxley Road
Sheffield
South Yorkshire
S6 4TF

Tel: 01142321583

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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?	Outstanding ☆
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service:

Loxley Park Assisted Living Residency is a domiciliary care service which provides personal care to people living in their own homes within the Loxley Park assisted living complex in Sheffield. The service is known as Loxley Park and is run from an office in the assisted living complex. Care and support is available over a 24-hour period.

People either rented or owned apartments in the Loxley Park complex. There are 75 flats within Loxley Park. At the time of this inspection, the service was providing personal care to 40 people. People had access to shared communal spaces such as lounge areas, a restaurant, a hair salon and garden areas within the grounds.

Not everyone using Loxley Park receives the regulated activity of personal care. CQC only inspects the service being received by people provided with 'personal care'; help with tasks related to personal hygiene and eating. Where they do receive personal care, we also take into account any wider social care provided.

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

The service received exceptionally positive compliments, praising staff for being truly caring. Staff knew people extremely well and developed positive bonds and relationships with them. People and their relatives said staff treated them with the utmost dignity and respect. Respect for privacy and dignity was embedded in the service. Without exception, people told us they enjoyed living at Loxley Park.

People received a comprehensive assessment of their care needs prior to using the service. People's care was personalised and flexible, so each person's support reflected their preferences. People had true ownership of their care plans and were fully involved in making decisions about their care. They told us they felt in control of the care and support they received.

People were encouraged to attend a range of groups and activities. The range of activities on offer was extensive and varied. This supported people to live meaningful, active and fulfilling lives. People were supported and encouraged to remain as independent as possible.

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 using the service felt safe. Staff received training to enable them to recognise signs of abuse. They felt confident in reporting any concerns.

The service was well-led by an experienced provider and registered manager. They planned and promoted person-centred, high-quality care. There was a very open and transparent culture at the service and people

were empowered to voice their opinions. Without exception, people told us the service was well-managed. Staff morale was positive and they told us they would recommend the service to their loved ones.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection:

The last rating for this service was good (published on 8 December 2016).

Why we inspected:

This was a planned inspection based on the previous rating.

Follow up:

We will continue to monitor information we receive about this 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 exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

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 ●

Loxley Park Assisted Living Residency

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 completed by one inspector and one assistant inspector.

Service and service type:

This service is a domiciliary care agency. It provides personal care to people living in their own apartments within the complex of Loxley Park.

Loxley Park contains adapted single household accommodation on a shared site. The apartments are bought or rented as the occupant's own home. People's care and housing are provided under separate contractual agreements. The Care Quality Commission (CQC) does not regulate the premises. This inspection looked at people's personal care and support service.

The service had a manager registered with CQC. 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:

We gave the service 24 hours' notice of the inspection as we needed to be sure staff would be available during the office visit and we wanted to arrange visits to people in their own homes.

Inspection activity started and ended on 6 June 2019. We visited the office location to see the registered

manager and office staff; and to review care records and policies and procedures. We also visited people in their homes to obtain their feedback about the service.

What we did before the inspection:

We reviewed information we had received about the service since the last 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. We used all of this information to plan our inspection.

During the inspection:

We spoke with five people who used the service and two relatives about their experience of the care provided. Another relative provided written feedback for us to consider. We spoke with eight members of staff including the registered manager, a team leader, five care assistants and the chef.

We reviewed a range of records. This included four people's care records, several medication records and a range of staff files in relation to recruitment, supervision and training. We checked a variety of records relating to the management of the service, including policies and procedures.

After the inspection:

We sought some more information from the registered manager. This was provided in a timely manner and was used to inform our judgements.

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; good. This meant people were safe and protected from avoidable harm.

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

- People told us they felt very safe using the service. People's relatives told us they were confident their family member's safety was promoted. One relative commented, "We can rely on the care team and feel comfortable taking holidays and being away from home, knowing [our relative] is in safe hands."
- The provider had appropriate systems in place to safeguard people from abuse.
- The registered manager had a comprehensive understanding of local safeguarding procedures and all staff were trained in their responsibility to safeguard people from abuse. Staff told us the registered manager responded proactively to any concerns they raised.

Assessing risk, safety monitoring and management:

- The registered manager assessed the risks involved in the delivery of care to people when they started using the service. People's care records contained risk assessments detailing the specific risks posed to them. Risk assessments were reviewed at appropriate intervals to check risk levels had not changed.
- The provider had plans for dealing with emergency situations. For example, personal emergency evacuation plans described how each person should be supported in an emergency.

Staffing and recruitment:

- There were enough staff available to ensure people received personalised care and support.
- People said staff turned up on time and were available to support them at other times, if they needed extra help. One person commented, "They're always there when I need them."
- The registered manager monitored staffing levels to check they remained appropriate.
- The provider continued to follow safe recruitment procedures. They completed suitable pre-employment checks to ensure new staff were suitable.

Using medicines safely:

- Medicines continued to be managed in a safe way. People received their medicines as prescribed and staff kept accurate records about what medicines they had supported people to take and when.
- People were happy with the support they received with their medicines. One person commented, "They make no mistakes with medicines. They are very rigorous."
- Staff were trained in medicines management and their competency to administer medicines safely was regularly checked.
- People were encouraged to manage their own medicines if there were willing and able to do so. The service promoted and encouraged people's independence in this area.

Preventing and controlling infection:

- People were protected from the spread of infection.
- The provider had a policy which staff were required to follow to promote effective infection control practices and all care workers received training in infection control.
- People using the service said staff always wore personal protective equipment when delivering personal care.

Learning lessons when things go wrong:

- Incidents and accidents were recorded, logged and actions were taken to reduce the risk of re-occurrence.
- The registered manager analysed accidents and incidents every month, to try to identify any themes or trends. This information was used to help reduce the risk of further incidents.

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; good. 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:

- The registered manager completed a comprehensive assessment of people's needs before they started using the service. A personalised care plan was then created, which included information about the person's preferences, backgrounds and personal histories. This enabled staff to get to know people very well and how they wanted to be cared for.
- Care was delivered in accordance with people's preferences and it supported them to achieve positive outcomes.
- Without exception, people told us the care provided met their needs and was dictated by their own choices and preferences. A recent compliment from a relative stated, "The care provided to my [relatives] has been exemplary. Following illness, they have needed extra support and the numerous carers have all been great. At a very difficult time, the team here have done everything they can and always with a smile."

Staff support: induction, training, skills and experience:

- Staff were well-trained and had suitable skills and knowledge which supported them to meet people's needs effectively.
- Staff were happy with the range of training they received and people and their relatives told us they thought staff knew what they were doing. One person commented, "I'm very confident in what the staff do."
- There were effective systems in place to support staff in their roles. Staff received regular supervision and appraisal to enable them to identify any training and development needs.

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

- There was an on-site restaurant which provided a variety of high-quality meals. People were able to visit the restaurant each day and staff could deliver meals to people's apartments. The provider was committed to providing excellent quality meals. The chef at Loxley Park had won a national award in 2018 for their culinary skills within a care setting.
- When people were supported with their nutrition and hydration, their care plans contained clear guidance about what staff needed to do, to effectively support them in this area.

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

- People were supported to maintain their health and well-being. Staff supported people to seek advice from health professionals and to attend appointments.
- The service had developed links with community health professionals such as GPs, falls prevention

professionals and social workers. The registered manager requested referrals to other agencies when they identified people may benefit from their input.

- We received positive feedback from people and their relatives about the support they received to access healthcare services.

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. Where people may need to be deprived of their liberty in order to receive care and treatment in their own homes, an application should be made to the Court of Protection which can authorise deprivations of liberty.

We checked whether the service was working within the principles of the MCA.

- Staff received training in the MCA. They actively involved people in decisions about their care.
- People were asked to provide written consent to the care in their care plan. People told us staff always asked for consent before delivering any care.
- People were asked if they had authorised any other person to make decisions on their behalf, for example by making a Lasting Power of Attorney. Where they had, the service obtained copies of such documents to ensure staff had clear information about which decisions people were authorised to make.
- We were satisfied the service was working within 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 has now improved to outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- The service had received exceptional compliments, praising the registered manager and staff for the excellent quality of care. For example, "Life changing. These two words summarise everything about Loxley Park. I never thought I would find somewhere that truly cares as much as I do for [my relative]. I sleep easy knowing they are perfectly cared for. The Loxley team are amazing" and "Outstanding! The team at Loxley have been superb. They've made [my relative] feel very welcome and special. If all care was like this, the world would be a better place for the elderly. The food, events and accommodation are second to none!"
- There was an exceptionally strong and visible person-centred culture, with staff going out of their way to ensure people were treated well. A person using the service told us, "The staff really are first class. They're very caring. It's proper Yorkshire hospitality. They are genuine." A relative commented, "[The registered manager] has always been there, whether it be in person, email or phone. They have helped me through a very worrying and stressful time. Their patience and dedication is commendable. Their work ethic continues through to the staff, who all work so hard, while being caring and compassionate."
- Staff demonstrated a real empathy for people and were particularly sensitive to times when people needed compassionate support. People and relatives described how staff went the 'extra mile'. For example, staff supported people to care for their pets if they were unwell as they recognised the impact of this on people's emotional well-being. Staff supported people to write 'pet care plans' so people were reassured their animals would be well cared for. Relatives told us staff went out of their way to spend time with people; they socialised and chatted with people about things they were interested in. A relative told us the excellent engagement of staff was part of the "experience" of Loxley Park which their relative found so beneficial. Another relative complimented the service for the outstanding care delivered to their loved one during a period where they had experienced a lot of falls. They said staff had also provided outstanding care to them as a concerned family member during a very difficult time, commenting, "[The registered manager] and their team are all a credit to [the provider], not only to be appreciated for their outstanding care to my [relative] but also to myself."
- Staff had developed exceptionally strong relationships with people and knew people very well. This supported them to deliver highly personalised care, which promoted people's well-being. One person commented, "They know me and they're marvellous to me." We observed an exceptional level of detail in people's care plans to guide staff in how to deliver highly personalised care to people. This was achieved through staff's knowledge of people which was gained through developing positive, trusting relationships with them. Staff continued to maintain friendships with people after they moved out of Loxley Park, due to the strong bonds they had developed whilst they were using the service.
- Staff were highly motivated to provide excellent care to people. They commented, "I'm proud to say I work

at Loxley Park", "I don't think people could receive a better quality of care than what we deliver here" and "It's a wonderful place. I would recommend it to my family members and friends." Staff were committed to delivering an especially good service to people by supporting them with things that really mattered to them. For example, staff had given their time to support a person to travel to and attend an important family occasion as they appreciated how significant the event was to the person.

- The promotion of equality and diversity was embedded in the service. Care and support was delivered in a non-discriminatory way and the rights of people with a protected characteristic were respected and promoted. Protected characteristics are a set of nine characteristics that are protected by law to prevent discrimination. For example, discrimination based on age, disability, race, religion or belief and sexuality.

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

- People had true ownership of their care and support plans. They were fully involved in making decisions about their care. The registered manager went the extra mile to ensure people were provided with the information they needed to make effective decisions about their care. This included completing a comprehensive assessment of people's needs and preferences. This took place within people's own homes, ensuring people were fully involved in the process. The registered manager ensured information was provided in a format which supported people to make effective decisions.
- Staff had an especially good understanding of people's communication needs and the differing levels of support they may need day to day. They used this knowledge to support people to make choices each day, whilst promoting their independence.
- The provider and staff placed people at the heart of the service. The provider engaged effectively with people to ensure their views were considered when developing the service. For example, the provider had actively involved people when planning the new design and decoration of the premises during a planned refurbishment. The provider also arranged regular meetings with people living at Loxley Park so they could consult with them about the service, for example to discuss the restaurant service and activity provision.
- People's relatives told us the registered manager and staff engaged extremely well with them. People's relatives were welcomed into the service. They told us staff knew them exceptionally well and they had been able to get to know the staff very well too. Staff ensured people's families were informed of any developments in their care, where they had permission to do so. Staff balanced respecting people's privacy and confidentiality with maintaining open and honest relationships with people and their families.
- The registered manager had links with local advocacy organisations. They understood the benefits an advocate could offer when supporting people to make arrangements and decisions about their care.

Respecting and promoting people's privacy, dignity and independence:

- People and their relatives said staff treated them with the utmost dignity and respect. Without exception, people told us they felt respected and listened to.
- Respect for people's privacy and dignity was embedded in the service. All staff could comprehensively describe how they promoted people's dignity when delivering personal care and how respect for people's privacy was instilled into the staff team. The provider had purchased a piece of equipment to assist people who had fallen to get back up safely, whilst preserving their dignity. The registered manager told us people felt far safer and more dignified using this equipment.
- Staff actively promoted people's independence, so they could lead meaningful and fulfilling lives. People's feedback consistently confirmed this. A person told us their care had been reduced since moving into the service, as they regained their independent living skills. They told us they had achieved this due to the staff's "kind care and attention". They commented, "I'm delighted with everything. I thank my lucky stars I am here."
- The registered manager and staff ran a small shop within Loxley Park, in their own time. This gave people living at Loxley Park easy access to items such as snacks, drinks, toiletries and seasonal items such as Christmas decorations. This meant people who struggled to access the community could still "shop" for

these items and take part in decorating their apartments at Christmas. This enabled people to retain independence in this area, whereas otherwise they may have required additional support from staff or their families to shop for these items in the community. The registered manager told us people loved having access to the "Little Shop" and it provided an additional daily opportunity for people and staff to socialise.

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; good. 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:

- Without exception, people told us they were happy with the care they received at Loxley Park. A relative commented, "[My relative] has lived at Loxley Park for almost six years. During this time, they have received consistent, professional and excellent care from the care team."
- People were involved in the development of their care plans via a thorough assessment and review process. This allowed the service to create person-centred care plans which supported staff to provide personalised care to people.
- Staff knew people very well and delivered care in accordance with people's preferences. People's care plans contained detailed information about their life history and interests; this supported staff to build positive relationships and bonds with them.
- People's care plans contained detailed information to ensure staff knew exactly what care and support each person needed and how they liked to receive it. They were well-written and easy to follow.
- Staff were responsive to people's changing needs and offered additional support when people needed this. A recent compliment stated, "All the carers are very kind and helpful. I would mention [name of carer] who came with me on visits to the doctors. It gives me a wonderful feeling of security to know that these carers, who have become friends, are always there to help in times of need."

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.

- Although the service was not providing publicly funded care at the time of this inspection, it continued to comply with the AIS.
- People's communication needs were assessed, clearly recorded and met. For example, staff had established effective communication with a person via a whiteboard and written information was made available to people in large print.
- Information about people's communication needs was shared with other organisations, when necessary and appropriate, with people's consent.

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:

- The range of activities on offer to people living at Loxley Park was extensive and varied. This supported people to live meaningful, active and fulfilling lives. The wide range of activities led to numerous social

opportunities between people living at Loxley Park. This encouraged the development of new relationships with others.

- People's relatives told us they were always made to feel welcome when they visited Loxley Park. Staff were described as "very accommodating". Relatives told us staff communicated very well with them.
- People continued to engage in activities and events in the local community whilst living at Loxley Park. Staff were available to support people to access the local community each week, for example to visit local shops, or to visit local areas of interest.

Improving care quality in response to complaints or concerns:

- People said they were happy with the care provided but they would not hesitate to approach the registered manager with any concerns. People and their relatives were provided with information about how to complain if they needed to.
- The provider had a complaints policy which described how people could complain and how their complaint would be dealt with.
- The registered manager used any complaints or concerns to make improvements to the quality of the service and the care people received.

End of life care and support:

- The service was not providing end of life care to anyone at the time of this inspection.
- People's wishes about how they would like to be cared for at the end of their life were discussed during the assessment process and were kept under review. This enabled the service to provide care to people at the end of their lives, in accordance with their previously expressed wishes.

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; 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; 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, registered manager and staff were all keen to provide high-quality, person-centred care. They were committed to ensuring people received especially good care. There were systems and processes in place to check staff provided a high-quality service to people.
- The service had an open culture and staff at all levels were committed to improving the care provided and learning from any incidents or complaints. Staff commented, "We're an open house." All staff told us they felt well supported by their line managers; they were confident any concerns they raised would be dealt with appropriately.
- The provider maintained an overview of the service by requiring the registered manager to provide them with regular information about different aspects of the service. Senior management employed by the provider also visited the service to undertake their own checks on the quality of the care provided.

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

- Staff morale was positive and they all told us they enjoyed their jobs. Staff at all levels were clear about their roles and responsibilities and staff worked effectively as a team. The service had a stable staff team, the majority of whom had worked at the service for a long time and knew the needs of people using the service well. The continuity of staff had led to people developing meaningful relationships with staff.
- The registered manager was supportive and approachable. They had a visible daily presence in the service and led, very much, by example. A staff member commented, "[The registered manager] listens to you. They listen to [people using the service] as well. They make time for everyone."
- Without exception, people, their relatives and staff told us the service was well-run by the registered manager. Comments included, "The registered manager is really good. If I have any problems, they do all the right things to address them" and "The registered manager couldn't do any more than they already do."
- The registered manager maintained oversight of the quality and safety of the service by completing a range of checks each month. This supported them to identify any areas for improvement, to ensure the service remained safe and of a high-quality.
- The registered manager understood the regulatory requirements and pro-actively provided information to CQC following significant events at the service.

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

characteristics:

- People, relatives and staff had good opportunities to give feedback about the service. For example, they could do this via meetings, annual surveys, a suggestion box, the complaints and compliments process and during reviews of people's care.
- The registered manager and senior staff also made themselves easily available to people using the service, their relatives and staff on a day to day basis.
- Staff were able to share feedback about the service during supervision meetings and staff meetings. The registered manager operated an 'open-door' policy and staff could speak with them about any ideas or concerns whenever they wanted to.
- The registered manager had plans to develop people's engagement with the service even further, by arranging regular group meetings with people and their relatives and developing a newsletter.

Working in partnership with others:

- The service worked closely with relevant health and social care professionals. This supported them to deliver effective care to people.
- The service had established links with other organisations in the community, such as local schools, various religious organisations who visited Loxley Park to provide regular church services and a toddler group called the 'wiggle-tots' who attended Loxley Park for dance classes.