

Burlington Care Limited

The Lawns Care Home

Inspection report

Ridsdale Street
Darlington
County Durham
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

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 Lawns Care Home is a care home providing accommodation and personal care for up to 63 people aged 65 and over. At the time of the inspection there were 53 people using the service.

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

The registered manager and the registered provider needed to improve medicines management practices to ensure medicines were handled and stored safely by competent staff. We made a recommendation about this.

People were protected from the risk of abuse and avoidable harm by staff who understood how to recognise, respond and report concerns. Allegations of abuse had been dealt with in a robust manner to assure people about their safety. People and their relatives told us they were safe. Risk assessments had been developed to minimise the potential risk of avoidable harm to people during the delivery of their care. The registered manager had robust and safe recruitment procedures and monitored the safety of the premises.

People received person-centred care, which was responsive to their needs. Care records were well written and contained important details about people's needs. Staff supported people with meaningful day time activities inside the home and in the local community. People's individual communication needs had been assessed and staff had tools to assist their interactions with people. The registered manager dealt with people's concerns and complaints appropriately.

People's care and support had been planned in partnership with them and their relatives. Staff had received regular training and supervision to support them in their roles. Improvements were required to ensure all staff were trained in the safe handling of medicines. 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.

People were positive about the service and said staff were kind and caring. People were treated with dignity and respect and their right to privacy was upheld. The registered manager worked in partnership with people and their advocates.

The service was well-led. People, their relatives and staff spoke positively about the registered manager and management team. The registered manager regularly checked the quality of the care provided and people's experiences. There was a positive culture throughout the service which focused on providing care that was individualised and promoted independence.

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 27 June 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

The Lawns Care 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 Care Act 2014.

Inspection team

Two inspectors and an Expert by Experience carried 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 Lawns Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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

We reviewed information we had received about the service since the last inspection, including information from the provider about important events that had taken place at the service, which they are required to send us. We sought feedback from the local authority. The provider was not asked to complete a provider information return prior to this inspection. 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.

During the inspection

We spoke with 15 people who lived at the home and six relatives about their experience of the care provided. We spoke with five members of staff including the registered manager, deputy manager, care workers and housekeeping staff and the handyperson. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We had a walk around the home to ensure the environment was a safe and homely place for people to live.

We reviewed a range of records. This included five people's care records, multiple medication records, two staff recruitment records and we looked at a variety of records relating to the management of the service.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at training data and quality assurance records and read feedback from two health professionals.

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 requires improvement. At this inspection this key question remains the same. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Preventing and controlling infection

At our last inspection the provider needed to improve their practices in relation to infection control and prevention practices. Enough improvements have been made at this inspection.

- Staff protected people against the risk of infection. We completed a tour of the home and found the environment to be clean. The registered manager had worked with external professionals to monitor the cleanliness of the home in line with national guidance.
- Staff had access to personal protective equipment (PPE), such as gloves and aprons. We saw staff used PPE when appropriate. Staff confirmed there was enough PPE, such as disposable gloves, hand gels and aprons to maintain good standards of infection control.
- The home had been awarded a five-star rating following their last inspection by the 'Food Standards Agency'. This graded the service as 'very good' in relation to meeting food safety standards about cleanliness, food preparation and associated record keeping. Regular audit on infection control had been carried out by the staff.

Using medicines safely

- The registered manager and the provider needed to improve medicines administration practices. People told us they received their medicines when they should. However, the registered manager needed to improve the medicines management practices. Not all staff who handled medicines had received training in medicines management such as topical creams and rescue medicines. In addition, the registered manager needed to ensure that all controlled drugs were in date and labelled to identify who they belonged to.
- Staff carried out regular medicine audits however, the audits had not identified the shortfalls above.

We recommend the provider consider current guidance on medicines management and take action to update their practice.

Systems and processes to safeguard people from the risk of abuse

- People were safe and protected from abuse and their human rights were respected and upheld. People told us they felt safe and any concerns were raised with the registered manager and dealt with. One person told us, "I feel safe here and staff's attitude is pretty good, I can't complain."
- Relatives we spoke with told us they thought the service was safe and felt secure. Comments included, "Yes she gets good care, she's had falls the ambulance is always called. If you walk out of the room you always find someone it's no different at the weekends."

- Staff had received training in safeguarding people. Staff were spoke with were confident to report concerns and satisfied that action would be taken to investigate the concerns. The registered manager investigated concerns raised by people about staff and took action to assure people of their safety.

Assessing risk, safety monitoring and management

- The registered manager had assessed and managed risks to keep people safe. There were risk assessments to guide staff on safe working practices and to keep people safe from avoidable harm during care delivery. However, staff had not always reviewed the risk assessments regularly in line with changes to people's needs.
- Staff knew how to support people in an emergency and had sought medical assistance where necessary. The registered manager analysed accidents and incidents for themes and followed the local reporting protocols.
- The premises and equipment had been maintained to protect people from risks. People had personal emergency evacuation plans which ensured in case of a fire staff had guidance on how to support people out of the building.

Staffing and recruitment

- The registered manager followed safe staff recruitment procedures. All the necessary background checks were carried out. This ensured only suitable staff were employed to support people.
- People's relatives and staff told us staffing levels were enough to keep people safe. We observed the service had appropriate staffing levels to keep people safe.

Learning lessons when things go wrong

- There was a process that ensured when accidents and incidents occurred these were appropriately recorded, investigated and areas for improvement identified and acted on. The registered manager followed good practice guidelines. They carried out monthly accident and incident analysis and discussed ways to minimise them.
- We discussed the need to consider lessons learnt were carried out for individual incidents and at the time of the incidents. This was because we found cases where lessons learnt did not address personal incidents on each person, how they have been impacted and how to reduce repeat incidents and factors that cause them.

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.

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

- People's needs were assessed and their choices were considered before they came to live at The Lawns Care Home. Information gathered during assessment was used to create people's care plans and risk assessments.
- The registered manager and their staff referred to current legislation, standards and best practice guidance to achieve effective outcomes. This ensured people received effective, safe and appropriate care which met their needs and protected their rights. Staff knew the importance of incorporating physical exercises and movements to reduce the risks of falls and to improve mobility.

Staff support: induction, training, skills and experience

- Staff had skills and knowledge to carry out their roles effectively. Staff told us they regularly updated their training. In addition, staff told us induction training was provided and supported them to get to know people well and provide the right support for them. The registered manager made arrangements to address shortfalls in medicines administration training.
- People told us they had confidence in staff's skills and knowledge. One person told us; "Yes they are skilled for what they have to do to support us."
- Staff told us they felt supported by the registered manager to maintain their competence and skill. In addition, they had access to specialist professionals. One staff said; "We can request any training that we feel is needed and we can be assured to get it."

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

- Staff supported people to maintain a balanced diet. Records, when appropriate documented any associated risks with eating and drinking. We observed people receiving support with their eating and drinking and being offered choice and alternatives. The atmosphere was pleasant and meals were appetising. People told us; "They ask how you are doing, there's lots of choice with the food."
- Food, drink and snacks were available throughout the day and some people were encouraged to make their own drinks to promote independence. Guidance from professionals was requested when needed.

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

- The registered manager worked effectively with healthcare professionals to ensure people's healthcare needs were met. They worked with services including GPs, dentists and community-based health professionals. The registered manager had an arrangement with a local community matron who visited regularly to review people's medical needs and prevent hospital admissions. We received positive feedback

regarding the staff and their caring approach. People told us; "If I want to see the nurse they let her know, she comes on a Thursday, if I want to see my own GP they make the appointment."

- Staff had a good understanding about the current medical and health conditions of people they supported. The registered manager was working together with other providers to enhance people's ability to have access to dental care.

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

- People's individual needs were met by the adaptation, design and decoration of premises. There were adequate spaces for people to spend their time on their own or to share with others. Access to the building was suitable for people with reduced mobility and wheelchairs.
- The registered manager had made significant efforts to ensure the environment was safe and suited to support people and maintain their safety. There were ongoing renovations
- Communal areas were provided where people could relax and spend time with others. Corridors were free from clutter, which promoted people's independence. Refurbishments were ongoing in some parts of the home to improve people's living space and make the environment dementia friendly.

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.

- The registered manager took the required action to protect people's rights and ensure people received the care and support they needed. Appropriate applications had been made to the local authority for DoLS assessments. Staff knew how to support people in making decisions and how to offer choice with day to day decisions and activities. From records viewed, we saw consent to care and treatment was routinely sought and best interest decisions had been recorded.
- Staff carried out mental capacity assessments where possible. We observed them seeking people's consent and giving them choice. One person told us; "They always ask what do you want doing and they treat you like a human."

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

- People were supported by caring and respectful staff who treated them with dignity. People we spoke with gave positive feedback and were complimentary to the caring nature of the staff team. Comments included; "The staff are respectful, yes they have a bit of a chat, I know all the carers, I've never lost anything here. They are trustworthy." And; "They are very helpful and sociable, they will do anything for you, they couldn't be nicer. They are very very good."
- We observed people were comfortable in the company of staff and actively sought them out. People were included within conversations taking place. We saw staff redirecting people in a gentle and sensitive manner.
- Staff we spoke with showed awareness of people's human rights and their diverse needs. They supported people to have equal access to service and their local community. One person commented; "The staff keep a good eye on me, if you don't go for breakfast they come and ask how you are. There's always staff about."

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

- People and relatives were consulted about care and decisions for their wellbeing and support they required. While some people's needs impacted on their ability to make decisions, staff made every effort and encouraged people to make daily choices and involved them in doing so. One person said; "They always ask what you want doing. I take tablets and eye drops, I know what they are for, they would explain if I'm not sure'. They are always respectful."
- The culture at the home was caring, calm, kind and compassionate. This reflected the attitude of staff and the management team.

Respecting and promoting people's privacy, dignity and independence

- The home provided support that ensured people's privacy, dignity and independence were maintained. We saw staff knocked on people's bedroom doors before entering. One person told us; "When they are helping me, the door is closed, I'm covered up a chap came I said I'd prefer a lady, he didn't mind." People's personal private information was stored securely. There was no personal information left visible for visitors to read.
- The registered manager was responsive to any concerns about people's dignity or treatment. Staff had received training related to dignity and respect.
- People were supported to project a positive image of themselves through the clothes they wore and the personal care they received. Staff addressed people by their preferred name, they were polite, very friendly and cheerful when supporting people.

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

- The registered manager and staff completed an assessment of people's needs before they moved into the home. This ensured the home was right for the person and they could meet the person's needs. Care records contained important details about people and had been written in a person-centred manner. Staff knew people's likes, dislikes and preferences and used this information to care for people in the way they wanted.
- We observed staff being responsive to people's needs including seeking guidance from external professionals. We discussed with the registered manager the need to ensure care plans were reviewed immediately after any changes in people's needs. This was because three of the care records we reviewed had not been reviewed following significant events in people's care. In addition, we discussed the need to ensure care plans were comprehensive where people's needs had become complex. This would provide clear guidance on how best to support people and what works for them.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure that was shared with people's relatives when they started using service. All the people we spoke with knew how to raise concerns. One person said; "I know how to complain, I would go to the manager if I wanted to complain. I've never had a problem with the staff."
- We saw that complaints had been dealt with in line with regulations and measures had been put in place to address the complaint satisfactorily. The registered manager told us all complaints are used as part of learning and to improve staff practices.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's communication needs had been assessed as required by the Accessible Information Standard. People could be provided information and reading materials in a format that suited their communications needs. People's communication needs were assessed, and staff were aware of each person's needs and how were to be met.
- Signage in the home was designed to suit the needs of people who may live with a sight impairment. This was complimented by adequate lighting.

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

- There was a strong emphasis on keeping people active, improving their mental and physical well-being through meaningful activities. We observed people being involved in activities. Activities were provided by an activities co-ordinator who showed passion and commitment in their involvement with people. They told us; "We have arts and crafts, bingo and quizzes. I spend one to one time with residents who don't join in the sessions."
- The staff team had put a significant amount of thought and effort to ensure people had high quality activities inside and outside the home to enhance their well-being. The coordinator told us "We are part of Darlington Activities Fund raising team."
- People were made welcome and people were encouraged to maintain relationships outside of the home. People's relatives could visit whenever they wanted.
- People were supported to meet their spiritual needs including attending church services, and local clergy would visit those who preferred home visits. One person told us; "The Methodist minister comes the first Tuesday of the month."
- People took part in a weekly physical activity exercise programme. We observed all joining in and enjoying it. Activities varied from individual to group activities. They were aimed at improving people's physical and mental well-being.

End of life care and support

- People's end of life wishes including their resuscitation status had been recorded in their care plans.
- There was no one receiving end of life care. There was a policy on supporting people to discuss their end of life wishes, people and their relatives had been given the opportunity to share their 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. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager and the provider had sustained a governance system which monitored the quality of the care delivered and ensured compliance with regulations. They had used audits and internal compliance inspections to assess standards and drive up improvements. Staff and the registered manager had a shared understanding of risk and how to reduce them. Improvements were required to the medicines audits to ensure they identified the shortfalls we found.
- There was a system to monitor and provide oversight on the service with regular involvement from the regional manager. They visited regularly to monitor the care delivered and people's experiences.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager and the provider had policies and procedures around the duty of candour responsibility if something was to go wrong. They had notified CQC and the local safeguarding authority of significant events and incidents in the home.
- People and their relatives told us the management team shared information with them when changes occurred, or incidents occurred.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager promoted a positive culture which empowered people and staff. People and relatives said there was a friendly and relaxed atmosphere at the home. Our observations and conversations from people confirmed this.
- People, their relatives and professionals gave us positive feedback regarding the management team at the home. One professional told us, staff engage with external professionals appropriately and supported visiting professionals to engage with people.

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

- People were engaged and consulted about the running of the home and the quality of care provided. The provider maintained an open culture and encouraged people to provide their views about the care. The service had sought the views of people they support and family members through questionnaires and residents' meetings. One person told us; "I've been to a couple of the residents' meetings I think they are

helpful. If you have any complaints you tell them."

- People were positive about the care and the running of the service. One person said, "The manager is brilliant, she's around a lot, 'I've filled three or four surveys."
- Staff told us they could contribute to the way the home was run. Staff meetings were organised for all staff to give them an opportunity to discuss any changes to the organisation and working practices and raise any suggestions.

Continuous learning and improving care

- The registered manager and the provider were committed to ensuring continuous improvement. The provider's representatives and the registered manager met regularly to review the running of the service. Any learning points were shared with staff.
- The registered provider and their staff had a clear vision in how the service could continue to improve. This included a business plan and a contingency plan.
- The provider sought innovative ways to meet people's needs through investment in technology. People were provided with sensors to monitor their safety and alert staff in the event of an emergency such as a fall. They had introduced electronic care records to improve efficiency and record keeping.

Working in partnership with others

- The registered manager worked in partnership with other care providers and local commissioners to ensure people could receive safe and coordinated care. They regularly met with other organisations to share current practice. These included local registered managers, healthcare professionals such as GPs, district nurses and other health professionals.