

Prospects for People with Learning Disabilities

Lynton House

Inspection report

60 Stone Road
Broadstairs
Kent
CT10 1EB

Tel: 01843861645
Website: www.prospects.org.uk

Date of inspection visit:
27 March 2017

Date of publication:
27 April 2017

Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Care service description

Lynton House is registered to provide accommodation and personal care for up to eight people. People living at the service had a range of learning disabilities. Some people had physical disabilities and occasionally required support with behaviours which challenged. The service is situated in a residential area of Broadstairs. There were eight people living at the service at the time of the inspection. Downstairs there was a kitchen, dining room and lounge. The eight bedrooms were split over three floors and there were several bathrooms.

Rating at last inspection

At the last inspection, the service was rated good and requires improvement in the 'well-led' domain.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 27 June 2016. A breach of legal requirements was found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach of Regulation 17 of the Health and Social Care Act Regulated Activities Regulations 2014, Good governance. We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Lynton House on our website at www.cqc.org.uk

At this inspection we found the service remained good and is now rated good in the 'well-led' domain.

Why the service is rated Good

The service had improved since the last inspection.

There was now a registered manager in post. They were skilled and experienced in providing person-centred care and worked alongside staff to offer support and guidance. The CQC had been informed of any important events that occurred at the service, in line with current legislation.

The registered manager regularly carried out audits to identify any shortfalls and ensure consistent, high quality, personalised care. People's relatives, staff and other stakeholders had been surveyed to gain their thoughts on the service. These were collated and analysed. Relatives had stated that a new registered manager should be appointed as there was a vacancy and this had occurred.

There was an inclusive, person-centred culture and people were involved in the running of the service. People helped to prepare their own meals and helped with the upkeep of the service. The registered manager told us they wanted to introduce more pictorial forms of communication to involve people further.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

We found that action had been taken to improve well-led.

People and staff told us that the service was well managed.

The Care Quality Commission (CQC) had been notified of important events within the service, in line with current legislation.

Staff were aware of the provider's values to provide person centred care.

The registered manager undertook regular audits to ensure consistent, high quality, personalised care. They regularly surveyed staff, relatives and other stakeholders to gain feedback and the results were analysed and displayed within the service.

Good ●

Lynton House

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook an announced focused inspection of Lynton House on 27 March 2017. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our 27 June 2016 inspection had been made. The team inspected the service against one of the five questions we ask about services: is the service well-led? This was because the service was previously not meeting some legal requirements. This inspection was carried out by one inspector.

The provider had not completed a Provider Information Return (PIR), because we had not requested one before this focused inspection. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. Before the inspection we reviewed all the information we held about the service, we looked at previous inspection reports and any notifications received by the Care Quality Commission. A notification is information about important events, which the provider is required to tell us about by law.

We spoke with the registered manager and two members of staff. We spoke with four people who lived at the service. We observed how people were supported and the activities they were engaged in. We looked at three people's care plans and the associated risk assessments and guidance. We looked at a range of other records including questionnaires, minutes of residents and staff meetings, and a range of audits and checks completed by the registered manager.

We last inspected this service on 27 June 2016. Breaches in the regulations were identified at this inspection.

Is the service well-led?

Our findings

People spoke positively about the service and told us that they felt it was well-led. One person told us, "The registered manager 'cracks me up' sometimes. They are funny." Another person said, "The registered manager is good, very good. I was upset and they cheered me up." Relatives commented, 'Since [my relative] has been living at Lynton House I have seen a vast improvement in their capabilities and they are very content. I put that down to the excellent care and attention that they have received. The staff have been kind and helpful to both myself and my wife.'

At the previous inspection there was no registered manager in place. The practice team leader (deputy manager) was acting up and there was a lack of visible management presence. The deputy manager told us they did not want the manager's role. Audits relating to people's care and documentation to support this had not been completed. Some people's care plans were out of date and a best interest meeting had not been documented. People, their relatives and other stakeholders had not been asked their views on the service since 2014.

At this inspection improvements had been made. A new registered manager had been appointed and staff told us they felt well supported and felt comfortable asking the registered manager for help and advice when they needed it.

People and their relatives, staff and other stakeholders had been asked for their feedback in the form of questionnaires. These had been collated and analysed by staff at the provider's head office but not yet shared with the registered manager. The registered manager requested the results of the surveys on the day of the inspection and then shared them with us. Feedback had been mostly positive, including, 'The support staff at Lynton House work very well with clients. They really have the best interests of clients at heart. Sometimes they have gone over and beyond to make them feel comfortable and happy in the home.' Some relatives had commented on the lack of registered manager. This had now been rectified as the registered manager was in post, and they said they would speak to all relatives to check they were happy now the new management was in place.

The registered manager carried out regular monthly checks on the service. These covered a range of areas such as medicines administration, the quality of completed paperwork, including daily notes and incident forms and whether relevant health and safety checks were carried out. The deputy manager checked people's finances monthly. A senior manager also regularly checked aspects of the service. An action plan was produced, with any areas of improvement highlighted and dates for completion assigned.

The registered manager worked alongside staff so they could observe and support them. Staff understood their roles and knew what was expected of them. Staff were supported by the registered manager who was skilled and experienced in providing person centred care. The registered manager had worked with people with learning disabilities for over 10 years.

The registered manager understood relevant legislation and the importance of keeping their skills and

knowledge up to date. They held a level 5 vocational qualification in leadership and management of social care. The registered manager told us they planned to access local registered manager's networks to share best practice. Documents and records were up to date and readily available and were stored securely. Staff meetings were held monthly at the service. Minutes demonstrated that staff were kept up to date with changes to the service and were also able to add their own agenda items and ask questions. Staff regularly discussed incidents that had occurred within the service, and better ways of responding to ensure they did not happen again.

There were links with the local and wider community and people had friends in the local area. People were supported to use public transport and regularly ate out in local restaurants and cafes. People regularly attended local churches and social groups and lead full and active lives.

There was a culture of openness and honesty; staff spoke with each other and with people in a respectful and kind way. Staff knew about the vision and values of the service which was based on equality and mutual respect. The registered manager told us, "I want this service to be as person-centred as possible. I'm making small changes where I can to involve people further." They told us they planned to introduce more pictorial communication to assist people with making decisions.

People were involved, in a meaningful way, in developing and shaping the service. There was a culture of openness and inclusion with everyone taking a role in the running of the service. Everyone took part in some way in the cooking, cleaning and in regular resident's meetings.

Services that provide health and social care to people are required to inform the Care Quality Commission, (CQC), of important events that happen in the service. CQC check that appropriate action had been taken. Notifications had been submitted to CQC in an appropriate and timely manner in line with CQC guidelines.