Leonard Cheshire Disability

Lavender Fields - Care Home with Nursing

Inspection report

No 1 Lavender Fields
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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?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

This inspection took place on 25 October 2018.

At our last inspection on 25 November 2015 we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

Lavender Fields - Care Home with Nursing is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen." Registering the Right Support CQC policy

The registered manager was registered for two locations both these locations were on the same site. Service users, used both facilities for socialising and activities. Each location had a deputy manager in place.

Lavender fields design enabled good access for wheelchair users. Communal areas included: Lounge, kitchen dinner, study/activity room and a sensory bathroom. All bedrooms were of a good size and decorated to people's taste. All bedrooms had an en-suite facility.

The service was safe. Staff received training about safeguarding and were competent to report any concerns they had. Safe recruitment practices were in place to employ suitable staff. There were enough staff to deliver support at a time people wanted. Care plans contained good risk assessments with appropriate guidance for staff. People were supported to take their medicines safely by competent staff. Staff understood the importance of good infection control.

The service was effective. New staff completed induction and training to meet people's needs effectively. Staff had access to regular supervision and meetings. The registered manager, deputy manager and staff worked in line with the Mental Capacity Act 2005 (MCA) principles, staff understood the importance of promoting people's choice. People's care needs were assessed and supported people's preferences. Staff supported people with their nutrition and hydration needs. People were encouraged to cook and be involved in their daily support.

The service was caring. Staff knew people well and staff cared for them in a compassionate way. Staff respected people's privacy and dignity and supported people to maintain relationships. Staff delivered care

that was supportive, kind and caring. People were involved in deciding how their care was provided.

The service was responsive. People`s needs were assessed to ensure people received the support they required. Staff used a variety of techniques to communicate and support people's independence and ensure people had a voice. People were supported to raise concerns and complaints if required. People and relatives where appropriate, confirmed they were involved with care reviews.

The service was well-led. Staff understood their roles and responsibilities. The registered manager was clear about their vision and values for the service and what they wanted to achieve. There were effective systems to monitor the quality of the service, identified issues were actioned. Regular surveys and quality checks were completed to ensure people's views were sought.

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 remained Good.	**Good**
Is the service effective? The service remained Good.	**Good**
Is the service caring? The service remained Good.	**Good**
Is the service responsive? The service remained Good.	**Good**
Is the service well-led? The service remained Good.	**Good**

Lavender Fields - Care Home with Nursing

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.

This inspection took place on 25 October 2018 and was unannounced. One inspector undertook the inspection.

Before our inspection we reviewed information, we held about the service including statutory notifications relating to the service. This included the Provider Information Return (PIR). This is a form that requires them to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection we observed staff support people who used the service, we spoke with five people, five staff, the deputy manager and the registered manager. We telephoned two relatives to obtain their feedback on how people were supported to live their lives.

We looked at two care plans, three employment files, quality monitoring records' and other relevant documents relating to how the service operated.

Good

Is the service safe?

Our findings

People told us they felt safe and supported by the staff from Lavender Fields. One person said, "I am safe here, it's a good place to live."

Staff were knowledgeable about signs and symptoms of abuse and how to report and escalate their concerns. Staff received training about safeguarding people from the risks of harm and abuse. One staff member commented, "We have risk assessments in place and good training, we report any concerns we have."

Risks to people`s well-being were identified and discussed, measures were in place to mitigate these risks. Care plans contained risk assessments with good guidance for staff on how to keep people safe.

The registered manager and deputy manager reviewed accidents and incidents to ensure people's changing needs were identified and measures put in place to keep people safe.

There were enough staff to meet people's needs. People had regular staff provide their support. Staff supported people with appointments and daily living. One person said, "I have the support to go out when I need."

Safe and effective recruitment practices were followed to make sure that all staff were of good character, physically and mentally fit for the role. Appropriate checks were in place to ensure people receive safe care.

People were supported to take their medicines safely by trained staff who had their competencies assessed to ensure they followed best practice. Audits were completed to check people received their medicines as intended by the prescriber. Staff confirmed that the electronic system used for medicines made it easier to identify any issues.

People were protected from the risk of infections There were cleaning schedules in place and staff received appropriate infection control training. Staff wore appropriate protection when supporting people with personal care and used a colour coded system to reduce risks of cross contamination.

Good

Is the service effective?

Our findings

Some people who lived at Lavender Fields were unable to communicate verbally, staff demonstrated they knew people and their individual communication needs well. We saw a variety of both verbal and non-verbal techniques used to communicate, to establish people's wishes and obtain consent before any care and support was provided One person told us, "Staff are good to me, they help." One relative commented "The communication is great."

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS)

We found managers and staff were working within the principles of the MCA where necessary and appropriate to the needs of the people they supported. Staff told us they obtained people`s consent before they offered any support. One staff member said, "Always assume people have capacity. Always ask what people want." We observed during the inspection people were offered choices throughout the day.

Newly employed staff completed an induction programme during which they received training relevant to their role and achieved a nationally recognised `Care Certificate'. The Care Certificate identifies a set of care standards and introductory skills that health and social care workers should consistently adhere to and includes assessments of competence.

One staff member said, "I had an induction and have done all my training. I have done behaviour training, British Sign Language (BSL). I have also completed my care certificate training." We found staff received the appropriate training to meet people's needs. Staff were also supported by a qualified nurse on each shift.

Staff received supervisions to review and discuss their performance. One staff member told us, "We have supervisions every eight weeks, I feel supported." Staff attended meetings, one staff member commented, "We have a very good team here. I like working here, we are a bit like an extended family."

People's care needs were assessed, these assessments supported people's choices and preferences and were reviewed regularly to ensure people received the care and support they wanted. For example, Dieticians and speech and language therapists were involved with people's support to ensure their dietary and physical needs were met. We noted adaptive cutlery was used to promote people's independence.

Staff supported and encouraged people to eat a healthy balanced diet. Menu choices were discussed with people and there were two options available daily. However, people could always choose other alternatives if they wanted. People were involved with cooking if they wanted to be. One person commented, "I get to choose the food I want."

Good

Is the service caring?

Our findings

People and relatives confirmed staff provided support in a kind, compassionate and caring way. One person said, "Happy with the staff, we have a laugh. It's a fun place to live." One relative said, "[Name] always wants to go back, they love living there."

Staff promoted people's independence and treated them with respect. One person commented, "Staff are caring." We observed staff knocking on people's rooms for permission to enter. Staff interaction was kind, caring and supportive.

Staff and people used a variety of techniques to communicate. For example, one person used a system of facial expressions and their arms to signal yes and no. Another person used an adapted computer and a picture book to communicate their needs. Staff supported people to have a voice. For example, we observed during a service user's meeting, staff interpreted for people to enable their views to be heard.

People were supported with regular meetings where their views were sought to ensure people had a voice. People also had a keyworker who took time to talk with people about their lives and supported people with achieving their goals. One relative said, "[Name] is supported to grow and they have come on leaps and bounds. It's a great home."

People and where appropriate their relatives, were involved in the planning and reviews of their care and support. People confirmed they were involved with the reviews of their care. One person told us, they knew what was in their care plan and was regularly involved with decisions about their care. Care plans contained good guidance for staff about support people needed.

Records were stored securely, staff understood the importance of respecting confidential information. They only disclosed it to people such as health and social care professionals on a need to know basis.

Good

Is the service responsive?

Our findings

People's identified needs were documented and reviewed to ensure they received appropriate care. Staff had access to good guidance on how to deliver the care and support people wanted. One person said, "I was introduced to people to see if I felt it would be a good place to live. I got to choose the colours in my bedroom."

People received regular reviews of their care and support. People confirmed they were involved with and contributed to their assessments. One relative confirmed they were involved with the care plan reviews. They commented, "We go up every so often and go through care plans and [name] is involved in all aspects of their care."

We found people's views were listened to and people were supported to follow their interests and maintain relationships. One person attended singing groups, another person went to see live wrestling events. Their relative said, "They have loved wrestling since they were three years old." We found people were supported to access the community and develop interests. One relative commented, "[Name] can't wait to share everything they have been up to. They do so much." One person had started an internship at college, they also liked to umpire Hockey matches.

At the time of our inspection service users were not provided with end of life care due to the service users ages. Lavender Fields provide care and support to younger adults up to the age of 25. However, the deputy manager confirmed that should a person require support with end of life care this would be discussed and incorporated into their care plan.

There was a complaints procedure in place. People were aware of how to make a complaint should they need to. People we spoke with told us that they were very happy with the care and support they received. We noted complaints received had been appropriately dealt with in line with the provider's complaints policy One relative who told us there had been a couple of issues, confirmed that these were resolved, and they were happy with the response from the managers. Another relative said, "[Deputy manager] is really good and listens to any issues."

Good

Is the service well-led?

Our findings

People who used the service told us that the service was well led, they felt listened to. One person said, "Happy with staff, very professional."

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

There were systems to monitor the quality of the service. The registered manager completed audits in areas such as: care plans, medicines and infection control, to identify where improvements were needed. Audits were completed electronically and monitored by the quality team and issues flagged where actions were required. The quality team completed routine checks and audits to ensure best practice.

The registered manager and deputy manager were knowledgeable about people who received support. They ensured that staff had the tools, resources and training necessary to meet people`s needs. The managers were clear about the values and the purpose of the services provided One staff member said, "The managers are very approachable, it's a good place to work."

The registered manager and deputy manager both felt supported. They confirmed they had daily contact and discussed any relevant issues. The registered manager completed daily walks about the home and was aware of people's changing needs.

There were links with the local authority that supported with training and best practice. We saw that the registered manager and deputy manager worked with other professionals such as GP's, dieticians and social workers to ensure good outcomes for people.