

Ivy Lodge Care Limited

Ivy Lodge Retirement Home

Inspection report

Briergate
Haxby
York
North Yorkshire
YO32 3YP

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Ivy Lodge retirement home is a residential care home providing accommodation and personal care to up to 33 people. The service provides support to older adults. At the time of our inspection there were 28 people using the service.

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

The provider had systems in place to monitor the service. Some audits had not been completed in the time frame indicated and some did not have robust action plans. We have made a recommendation about monitoring systems.

People told us they felt safe. Staff understood their responsibilities to report any safeguarding concerns. People and relatives spoke positively about the caring nature of the staff team. People and staff had developed positive relationships resulting in staff knowing them well and supporting them in line with their preferences.

People's medicines were administered as prescribed by trained staff. Risks to people had been assessed and action taken to mitigate any risks. Accident and incidents were monitored by the registered manager.

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.

The provider worked in partnership with people, their relatives and professionals to obtain feedback about the service. We received positive feedback about the management team and the hands-on approach to supporting people and the staff.

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

Rating at last inspection

The last rating for this service was good (published 7 November 2018)

Why we inspected

We undertook this inspection as part of a random selection of services rated Good and Outstanding.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

We undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Ivy Lodge Retirement Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Ivy Lodge Retirement Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

Two inspectors carried out this inspection. An Expert by Experience made phone calls to people's relatives. 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

Ivy Lodge Retirement Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Ivy Lodge Retirement Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

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

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. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used information gathered as part of monitoring activity that took place on 09 March 2022 to help plan the inspection and inform our judgements. We used all this information to plan our inspection.

During the inspection

We spoke with four people who used the service and made telephone calls to thirteen relatives/advocates to gather feedback about their experience of the care provided. We spoke with 10 members of staff including the nominated individual, the registered manager, the deputy manager, the housekeeper and five care staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe at the service. One relative told us; "Yes [name] is safe, they have been there for a few months and it's the best thing that ever happened to them."
- Staff understood their responsibilities to report any signs of potential abuse.

Staffing and recruitment

- Safe recruitment procedures were in place and followed to ensure staff employed were of suitable character.
- People told us there was sufficient staff on duty to meet their needs.
- The provider had been trying different incentives to recruit staff. The registered manager and deputy manager were working shifts to ensure people received the care they required.

Using medicines safely

- People received their medicines as prescribed.
- Staff received medicines training and had competency assessments to ensure they had the appropriate knowledge and skills to administer medicines safely.
- People's medicines care plan's and risk assessment required further detail such as when people were on flammable creams or unable to have specific food and drinks. These were updated during the inspection.

Assessing risk, safety monitoring and management

- Risk assessments were carried out to review and mitigate any risks to people.
- Personal Emergency Evacuation Plans [PEEPs] were in place to guide staff about how people should be evacuated in the event of an emergency.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Preventing and controlling infection

- We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. Some carpets and bins required attention. The provider replaced the bins and sent us an action plan following the inspection for refurbishments.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- People were supported to have visits from family and friends in line with government guidance.

Learning lessons when things go wrong

- The registered manager reviewed accident and incidents to identify any lessons learnt.

Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Quality systems were in place, but they were not always carried out in line with the time frames. For example, audits that were titled 'monthly' had not always been conducted monthly.
- Auditing systems were in place to identify areas for improvement, but they did not always have robust action plans or record areas that needed addressing. For example, some carpets required replacing due to being worn and ensure medicines records were up to date.

We recommend the provider review their systems for oversight to ensure areas for improvement are recorded and actioned in a timely manner.

- The provider completed an action plan for improvements to the environment following our inspection.
- The registered manager had been working shifts on the floor but told us they had recently recruited additional staff and would be getting audits back up to date.
- The registered manager felt well supported by the provider.

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

- The provider and management team worked directly with people. They were knowledgeable about people's needs and developed positive relationships. One staff member told us; "I have never seen owners and managers who are so on the ball and heavily involved. They always support us on the floor, they are visible all the time. It's a really good team."
- People were positive about the service. Feedback included "I like it here, everyone is friendly, staff are good, no complaints." And "I am very happy here. The staff are wonderful and very considerate."
- Care plans contained person-centred information, including people's preferences and how they want to be supported.

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 was aware of their responsibilities under the duty of candour.
- The management team were open and honest throughout the inspection.

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

characteristics; Working in partnership with others

- People, staff and their relatives were engaged in the service.
- Satisfaction surveys were carried out with people, their relatives, staff and visiting professionals. The service had received very positive feedback from visiting professionals.
- The management team held meetings with staff and people to ensure they were involved in the service. They had regularly sent communication to relatives throughout the pandemic to keep them up to date and ensure effective communication.