

LVNH Limited

Lakeside View Nursing Home

Inspection report

68-69A Promenade
Southport
Merseyside
PR9 0JB

Tel: 01704545054

Date of inspection visit:
06 August 2019

Date of publication:
14 August 2019

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

Lakeside View is a care home. The home is registered to provide personal and nursing care for a maximum of 45 people. At the time of this inspection 35 people were receiving care at the home.

People's experience of using this service

Improvements had been made in accordance with the provider's action plan and the breach of regulation found at the last inspection had been met. Risk in relation to; the administration of medicines, management of the environment and completion of records had been reduced. Staff understood their responsibility to report abuse and neglect. Staff were recruited safely and deployed in sufficient numbers to provide safe, effective care. Lakeside View was bright, homely and clean.

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.

Quality and safety audits had improved since the last inspection and were effective in identifying issues and reducing risk. The registered manager and provider completed regular safety and quality audits. The manager and the staff that we spoke with demonstrated their commitment to providing high-quality, person-centred care. This commitment was reflected in records and in their interactions with people. People living at Lakeside View, relatives and staff were informed of any changes and encouraged to contribute to discussions.

Rating at last inspection and update

The last rating for this service was requires improvement (published 11 June 2019) and there was a breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 8 May 2019. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those Key Questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has

changed from Requires Improvement to Good. This is based on the findings at this inspection.

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

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.

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

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.

Lakeside View Nursing 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team

The inspection was conducted by one inspector.

Service and service type

The service is a 'care home'. People in care homes receive accommodation and nursing or personal care. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection. The home had a manager registered with CQC. This means that they, and the provider, are legally responsible for how the home is run and for the quality and safety of the care provided.

Notice of inspection

The inspection was unannounced.

What we did

We reviewed information we had received about the home since it was registered. We assessed the information we require providers to send us at least once annually to give some key information about the home, what it does well and improvements they plan to make. We reviewed the action plan received following the last inspection. We used all this information to plan our inspection.

People living at the home were unable to engage in conversations with us because of their health conditions. However, during the inspection we spoke with two relatives of people who lived in the home. We

spoke with the registered manager, two nurses and two care staff.

We reviewed a range of records. This included five people's care records, two staff files and other records relating to the management of the home.

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 has now improved to Good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Using medicines safely

At our last inspection the provider had failed to robustly manage the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Improvements had been made in accordance with the provider's action plan.
- The service had introduced an electronic care management system which prompted staff to complete records. The same system alerted senior staff if essential care was not recorded. One member of staff told us, "The hand-held (electronic recording device) is good. It's much better. Some things are timed and we get a reminder. They flag-up in different colours. It's been very helpful."
- Environmental risk was reduced because new locks had been fitted and fire doors repaired to the relevant standard. We checked the safe operation of doors throughout the building.
- Medicines were stored safely, records were completed correctly and subject to regular audit. A change had been made to ensure orders for medicines were followed-up.

Systems and processes to safeguard people from the risk of abuse

- Staff had been trained in adult safeguarding and understood their role in relation to keeping people safe.
- The relatives that we spoke with told us their family members were safe.

Staffing and recruitment

- Safe recruitment practices were used to ensure that new staff were suited to working with vulnerable people. Appropriate checks were completed before new staff started work.
- Staff were deployed in sufficient numbers to provide safe care. Regular agency staff were used to ensure consistency when cover was required.

Preventing and controlling infection

- The environment was visibly clean and free from any unpleasant odours. There was a clear system in place and the building was cleaned regularly.
- Staff had completed appropriate training and were aware of the need to control the potential spread of infection.

Learning lessons when things go wrong

- The registered manager and provider responded positively to the findings of the last inspection and made

the necessary improvements in a timely manner.

- Staff understood the importance of reporting incidents and accidents. The documentation that we saw included sufficient detail to aid analysis and to identify patterns or trends.
- Significant incidents and accidents were subject to further review by senior managers.

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 Requires Improvement. At this inspection this key question has now improved to 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

- Quality and safety audits had improved since the last inspection and were effective in identifying issues and reducing risk.
- Recently introduced systems generated alerts when action was required to improve safety. Alerts and associated information could be accessed by all staff.
- A registered manager was in place. The registered manager and provider completed regular safety and quality audits.
- Each of the people we spoke with had a clearly defined role within the service and understood their role and responsibilities.
- Notifications regarding important events had been submitted as required.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- The managers and the staff we spoke with demonstrated their commitment to providing high-quality, person-centred care. This commitment was reflected in records and in their interactions with people.
- Staff demonstrated an understanding of their responsibilities in relation to the people living at Lakeside View and the need to act with honesty and integrity.

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

- People living at the home were involved in discussions about concerns and improvements in different ways. They were invited to attend regular meetings, or they could choose to engage less formally by speaking to staff. They also had the option to have their views communicated by a relative if they wished.
- Staff were supported to express their views and contribute to the development of the home at team meetings and handovers. The staff we spoke with said they could approach the registered manager, or the provider at any time.

Continuous learning and improving care; Working in partnership with others

- The provider placed continuous learning and improvement at the heart of their practice. Lessons learnt from incidents and accidents were shared with staff to improve practice.
- Additional partnerships had been developed with other services to enhance the experience of people living at the Lakeside View.

