

Brighterkind Health Care Limited

The Lawns Residential Care Home

Inspection report

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27 January 2022

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

The Lawns Residential Care Home is a residential care home providing accommodation and personal care for up to 41 people aged 65 and over. At the time of our inspection there were 23 people using the service.

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

Overall people's individual risks were managed effectively, and they received safe care. Feedback from people and their relatives confirmed this.

Whilst the service was using a high number of agency staff they were all suitably trained and experienced enough to meet people's care and support needs. The provider had a recruitment drive underway to reduce the requirement for the deployment of regular agency staff. All staff were recruited safely.

The provider accepted our concerns over the number of managerial changes at the service leading up to the inspection but were confident in the current structure now in place. They had communicated these changes to people and relatives including the CQC.

Quality control systems were effective in identifying issues within the service. Where an issue was identified during audits, the provider developed effective action plans to improve care and drive continuous learning.

The provider learnt lessons when things went wrong, and they encouraged continuous improvements.

Medicines were managed safely. Medicines administration record (MAR) charts were accurately completed, medicines were safely administered and when people received their medicines 'as and when required' the correct protocols were in place.

People and their relatives were involved in developing and reviewing their care plans and risk assessments. Care records were person-centred and contained information about people's preferences, specific routines, their life history and interests.

Staff were caring and kind to people. Relatives spoke highly of the good work the staff team had done to ensure their family members remained well cared for and safe. 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.

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 requires improvement (published 25 June 2019)

Why we inspected

We undertook a targeted infection prevention and control inspection in line with our current regulatory approach.

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 the service can respond to COVID-19 and other infection outbreaks effectively. This included checking the provider was meeting COVID-19 vaccination requirements.

We inspected and found a concern with the management of people's skin care, so we widened the scope of the inspection to become a focused inspection. We found no evidence during this inspection people were at risk of harm from this concern. Please see the safe, effective and well-led sections of this full report.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Lawns residential Care 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

The Lawns Residential 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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This included checking the provider was meeting COVID-19 vaccination requirements. 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

The inspection was carried out by one inspector. An Expert by Experience then contacted relatives of people who use the service via telephone on 4 February 2022. 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 Residential 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 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

The infection prevention and control inspection on 20 January 2022 was unannounced. The focused

inspection on 27 January 2022 was also unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection and sought feedback from the local authority. 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 all this information to plan our inspection.

During the inspection

We spoke with five people who used the service and eight relatives about their experience of the care provided. We spoke with 10 members of staff including the regional manager, registered manager, deputy manager, two senior care workers two care workers. We also spoke with the activities coordinator, chef and the administrator/receptionist.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed, including policies and procedures.

After the inspection

We continued to seek clarification from the provider to validate evidence found and reviewed further evidence the provider submitted.

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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- At our last inspection there were delays in responding to people's request for assistance due to shortfalls in the number of staff deployed. At this inspection enough staff were on duty and response times had improved.
- People told us improvements had been made. One person told us, "This morning, I wanted to get up and pressed the call button and two staff appeared very quickly to make sure I was ok." Another person told us, "The staff will explain if they are delayed which can happen sometimes."
- Whilst the service was using agency, staff rotas showed staffing levels were consistent. The registered manager told us a recruitment drive was underway to reduce the reliance on agency staff, so people received care from regular staff. At the time of the inspection four new staff had been recruited.
- Staff were recruited safely. Recruitment processes included a Disclosure and Barring Service (DBS) check. A DBS check provides information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks associated with people's care and support were assessed. Risk assessments were usually completed to identify and manage risks to people's health and safety, such as the risk of developing pressure ulcers, risk of falling and nutritional risks.
- One person's care plan we reviewed had been updated following an injury but their risk assessment had not. However, the registered manager accepted this was an oversight and immediately investigated this during the inspection. They said it was a genuine oversight and reviewed the process for reviewing risk assessments and would use this as a lesson learnt.
- Several other risk assessments were reviewed. We found these had been regularly reviewed and updated following any incident or injury.
- Referrals were made to an appropriate health care professional where risks to people's health and welfare had increased. A relative told us, "[Name] was referred to a physio after their mobility declined. They now have a wheelchair with a special cushion to prevent pressure sores but are not just left in the wheelchair all day. Staff use a 'turner' [stand aid] to transfer them from a wheelchair to a sitting chair to prevent a fall."
- The service's equipment was appropriately maintained to ensure people were safe. This included hoists, wheelchairs and walking frames.
- The environment was safely managed. People's rooms and communal areas were free from hazards ensuring people could move around the service safely.

Using medicines safely

- Medicines were managed safely. People told us they received their medicines as prescribed. One person told us, "I always get my medication and it's usually always on time. I did mention once my night time medication was a bit late, but it has not happened again since I mentioned it."
- Medicines administration records (MAR) were in place. We reviewed several MARs and found the actual stock of medicines matched what was recorded on the MAR. This assured us people received their medicines as prescribed.
- Staff were trained in the safe administration of medicines and received regular competency checks.
- The registered manager completed medicines audits and any actions identified were promptly addressed and investigated where necessary.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of harm and abuse. All the people we spoke with told us they felt safe and relatives said their loved ones were cared for well. One person told us, "Yes I feel safe." A relative told us, "Yes [Name] tells us they feel safe and we [family] do to."
- Staff received safeguarding and whistleblowing training and knew how to keep people safe from potential harm and recognised the signs that might indicate a person was being abused. They told us they would report any concerns to managers and were aware of external agencies they could contact such as CQC and the local authority if their concerns were not listened to or acted upon.
- Accidents and incidents were reported, recorded and investigated to reduce the risk of recurrence.

Preventing and controlling infection

- 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 promoting safety through the layout and hygiene practices of the premises.
- 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.
- The provider ensured visiting arrangements were safely managed and in line with government guidance.

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency. We checked to make sure the service was meeting this requirement. We found the service had effective measures in place to make sure this requirement was being met.

The Government has announced its intention to change the legal requirement for vaccination in care homes, but the service was meeting the current requirement to ensure non-exempt staff and visiting professionals were vaccinated against COVID-19.

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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff support: induction, training, skills and experience

- People and their relatives told us they felt staff were well trained for their role. One person told us, "Yes, the staff are well trained, and they are very good at their job." A relative said, "I observe how they manoeuvre [Name] from their chair to their wheelchair and how they do it tells me they are well trained as it looks really safe."
- Staff had completed mandatory training prior to delivering care. New staff were supervised until assessed as competent to work alone. Staff told us the training received equipped them to undertake their role safely.
- The staff training matrix showed 93% of training had been completed for all staff. Training was scheduled for the small amount of training outstanding. The registered manager explained the COVID-19 pandemic had delayed this training.
- Staff received supervision, appraisals and competency checks. Agency staff also had their competencies checked by the registered manager.

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

- People's nutritional needs were met and safely monitored. People were weighed regularly, and their food and fluid intake recorded when required.
- Care plans detailed people's dietary needs. We checked kitchen staff knew people's dietary needs when preparing food and found they did. The chef told us, "I get a copy of their dietary needs and meal preferences when they first arrive. If their diets change, such as food needing to be pureed for example, I am informed straight away."
- People and their relatives gave positive feedback on the food provided." One person told us, "The food is delicious and there is a good variation to the menu." A relative told us, "The food is of good quality, nicely presented and the staff promote hydration well."

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

- The service made timely referrals to relevant healthcare agencies to maintain people's health. Records showed people were referred to dietitians, opticians and their GP when required.
- People's oral health care was recorded in their care plans and people had access to dentistry services when they needed them.

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

- People's needs had been thoroughly assessed with appropriate care plans in place. Staff had access to

information on how to support people and were aware of important information to enable them to meet their needs.

- People received the support they required. Records confirmed when people required specific support such as repositioning in their bed this was completed as planned.
- People and relatives were involved in the planning of care. One relative told us, "Yes we [family] were involved when [Name] moved into the home and when it is reviewed."

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

- People were encouraged to personalise their bedrooms. We saw they contained important possessions and mementos such as photographs and ornaments.
- People were encouraged to spend their time according to their wishes. The service had communal areas where activities took place or quieter areas where people could watch TV, read or spend time together socially.

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 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 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.

- People were supported to make their own decisions about their care where they were able to. People had detailed mental capacity assessments in place. Care plans described people's support needs and identified whether the person had the capacity to make decisions about those areas.
- The provider had made the required applications to the local authority when it had been determined it was in a person's best interests to be deprived of some aspects of their liberty. Examples included where it had been identified a person would not be safe or at risk if they left the building alone.

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 requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- At our last inspection the provider had not taken appropriate action to make the necessary improvements to staff response times following feedback from people and their relatives. At this inspection improvements had been made. Our observations and feedback from people and relatives confirmed this.
- People and relatives told us the previous two years had been unsettling for them due to several management changes at the service.
- The service was person centred and focused on meeting people's individual needs and they received good quality care. One person told us, "When I first came here, I was worried I would be alone due to problems I had with walking. They [staff] have always have time to make sure I am not alone and support me with activities and chats in my room." A relative told us, "People and professionals in our local community gave us positive feedback about The Lawns before [Name] came here. We're glad we asked and chose The Lawns as we are really happy with the care."
- Staff demonstrated they were knowledgeable about people who used the service and took a person-centred approach to providing care.
- The provider was supportive of the registered manager and they held regular meetings together. The registered manager told us, "The regional support team are always on hand if I need them and we have an open dialogue between us."
- The registered manager divided their time between being a visible presence in the service, to support people and staff, and undertake their regulatory duties and responsibilities.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 service had robust governance systems in place. Several audits including those for care plans, medicines and accidents and incidents were undertaken and used to identify any areas for improvement or concern.
- The service had an ongoing action plan in place. This was used to record the outcome of audits which both the provider and registered manager had access to. This meant the provider had full oversight of the service and monitor areas identified for improvement.
- Staff performance was monitored by supervisions, observations and competency checks. Staff felt the management changes had affected morale, however, were confident morale would improve once the current management structure had settled in. One staff member said, "The registered manager is really

knowledgeable. It just takes time to adapt when a new manager comes in."

- The registered manager was open and honest with us throughout the inspection. There was good communication in place with people, relatives, and professionals.
- The registered manager had appropriately submitted notifications to the CQC. They are legally required to send us notifications of incidents, events or changes that occur in the service within a required timescale.

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

- People and relatives told us they felt involved in the service. The serviced actively encouraged people to express their views so they understood their experience of care and where any improvement could be made. For example, one relative told us, "I have expressed my views without being asked. They listened and have acted when appropriate. I was happy with the outcome."
- The registered manager arranged for people and their relatives to communicate when 'in person' visits were unable to be undertaken. We observed one person talking to their relative via a video call. The relative later told us this was a great way of being able to stay in touch with their family member and be able to see them in their surroundings.

Continuous learning and improving care; Working in partnership with others

- The provider had systems in place to support continuous learning and development. The registered manager was a 'train the trainer' for medicines and used this qualification to undertake competency checks in line with the providers medicines policy for any agency staff they deployed. The registered manager showed us a compliment they received from an agency worker who had been competency checked by them.
- The service worked in partnership with other agencies such as G.P.'s, district nurses and the local authority to ensure people received joined up care.