

# Random inspection report

## Care homes for older people

Name:	Lister House
Address:	13 Heaton Road Heaton Bradford West Yorkshire BD8 8RA

The quality rating for this care home is:	three star excellent service
The rating was made on:	

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this review a 'key' inspection.

This is a report of a **random inspection** of this care home. A random inspection is a short, focussed review of the service. Details of how to get other inspection reports for this care home, including the last key inspection report, can be found on the last page of this report.

<b>Lead inspector:</b>	<b>Date:</b>							
Mary Bentley	2	1	0	4	2	0	1	0

## Information about the care home

Name of care home:	Lister House
Address:	13 Heaton Road Heaton Bradford West Yorkshire BD8 8RA
Telephone number:	01274494911
Fax number:	01274547693
Email address:	
Provider web address:	

Name of registered provider(s):	Lister House Limited
Name of registered manager (if applicable)	
Mrs Jacqueline Mitchell	
Type of registration:	care home
Number of places registered:	32

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
physical disability	32	32
terminally ill	2	2

Conditions of registration:								
Date of last inspection								
Brief description of the care home								
<p>Lister House is a large detached Victorian property, which has been extended to provide accommodation for thirty-two people who require personal and nursing care. The home is situated in a quiet area of Manningham on the outskirts of Bradford close to a bus route from the city centre.</p> <p>The home is situated in well-maintained attractive gardens and provides off road parking. A safe enclosed courtyard in the centre of the home is accessible from the</p>								

### Brief description of the care home

communal areas. There is a passenger lift to the first floor. The accommodation is mainly in single rooms, there are a small number of shared room. Many of the rooms have en-suite toilets. Communal bathrooms and toilets are located throughout the home.

The home has a no smoking policy.

In April 2010 the weekly fees ranged from GBP 490.00 to GBP 532.00. Additional services such as hairdressing, chiropody, and physiotherapy are available at an extra cost. The fees are reviewed every year in November and more detailed information can be requested from the home.

## What we found:

We looked at all the information that we have received, or asked for, since the last key inspection or annual service review.

This included

The annual quality assurance assessment (AQAA) that was sent to us by the service. The AQAA is a self-assessment that focuses on how well outcomes are being met for people using the service. It also gave us some numerical information about the service.

Information we have about how the service has managed any complaints.

What the service has told us about things that have happened in the service, these are called "notifications" and are a legal requirement.

The previous key inspection and the results of any other visits that we have made to the service in the last 12 months.

Relevant information from other organisations.

What other people have told us about the service.

We sent surveys to the home for people using the service and staff. In total 8 surveys were returned, 6 from people using the service and 2 from staff. Some of the surveys had been completed by relatives on behalf of people living in the home.

One inspector made an unannounced visit to the home. During the visit we talked to people living in the home about their experiences of living there, we spoke to staff and management, looked around the home and observed staff as they carried out their duties.

What this told us about the service.

The last key inspection was carried out on 26 April 2007, there were no requirements following that visit. Since then we have carried out an Annual Service review every year for the service. These reviews confirmed that the home was continuing to provide good and excellent outcomes to people using the service.

The home sent us their AQAA when we asked for it, it was clear and gave us all the information we asked for.

In their AQAA the home told us "we provide potential client packs that include: a cover letter giving advice on finding a good home; a brochure; our fees, a hard copy of our website and a blank contract". People who completed surveys for us said they had been given enough information about the service before moving in to help them decide if the home was the right one for them. The home told us they encourage people to visit before making a decision about moving in, they said they will continue to do this by inviting people to spend a day in the home before making a decision about moving in

permanently.

In their AQAA the home told us "we aim to meet our clients health, personal and social needs in a way that respects privacy and dignity and takes account of their wishes. We do this by promoting independence through involvement of the clients and their families and/or friends in choices and care planning". The people who completed surveys for us said their care needs are usually met. People we spoke to during the visit told us they are well cared for. One person who completed a survey for us said they had only seen their relatives care plan once in 5 years and that was when they asked to see it. During the visit we looked at one person's care records. We did not see any evidence of involvement by the person or their representative. We discussed this during the visit and the home agreed to look at how this could be improved. They told us they are in the process of developing new care documentation and are looking at ways of making the care records more person centred.

One person who completed a survey for us said staff did not always respect people's privacy and dignity. The people we spoke to during the visit told us they are treated well by staff, they said their choices are respected, for example they can choose whether they want to go to the dining room for meals or eat in their rooms. During the visit we saw that staff interacted with people in a kind and respectful way. We saw that people looked well cared for and were able to spend their time where they wanted. When we looked around we saw that people had lots of personal belongings in their rooms which reflected their interests and tastes. We talked to staff about their working practices and found they had a good understanding of how to respect and promote people's rights.

People told us they usually get the medical support they need. The home works in partnership with a local GP surgery and a doctor visits the home every week.

The home told us they offer people the opportunity to take part in a range of social and leisure activities including bingo, crafts, movement to music, aromatherapy and word games. They also have visiting entertainers, over the Christmas period last year they organised 18 different acts to come and entertain people. There were no activities going on when we visited, however people told us they are generally satisfied with the activities provided. The home told us that their plans for improvement include encouraging more input from all faiths and cultures and developing links with multi faith groups.

People told us they enjoy the food, one person said it is "wonderful", another person said they had put on weight since moving into the home which they were pleased about. People told us they are offered a choice of meals and during the morning we saw the cook talking to people about what they wanted to eat at lunch time. The food at lunch time looked appetising and was well presented.

People who completed surveys for us told us they know who to talk to if they have any concerns and know how to make a formal complaint if necessary. The home told us they "have an "open", "no blame" culture with a positive attitude to complaints." In their AQAA the home told us they have had 10 complaints in the past year, they were all investigated and where necessary action was taken to make improvements. One person who completed a survey for us said that over the years they had made various complaints, they said things improved for a while but then lapsed again. This was discussed during the visit. The home told us that all staff are trained in the protection of vulnerable adults (safeguarding) and staff we spoke to confirmed this. Staff told us they know how to

report any concerns they might have about people's well being. The management team have demonstrated that they understand the importance of safeguarding people's wellbeing and make appropriate referrals to the local Adult Protection Unit. The home told us that all the required checks, including CRBs (Criminal Records Bureau), are done before new staff start work. This was confirmed by staff. This helps to make sure people are protected.

People told us the home is usually clean and fresh and it was clean when we visited. One person who completed a survey for us said it is sometimes difficult to get in and out of the home. This is because they have to wait for staff to open the front door. During the visit we saw it sometimes took a while for the door to be answered because staff were busy. We talked to the home about this. They told us they are aware this is an issue and are looking at how they can resolve it without compromising security.

People told us staff are usually available when they need them and said staff usually listen to them and take notice of what they say. They told us the staff are kind and caring and one person said they are always "courteous and patient" even in difficult circumstances. The home told us that staffing levels are reviewed and adjusted to take account of people's changing needs. Generally people felt there were enough staff available to meet their needs. Staff said they work well as a team. In response to what the home could do better one said "Employ more staff so there is a bit more time to spend with the residents just to chat to them and have a conversation which would make them feel better".

The home told us staff are encouraged and supported in developing their skills and knowledge. Staff who completed surveys and those we spoke to during the visit confirmed that they get a lot of training. They told us the training covers safe working practices and subjects related to the needs of people living in the home, for example infection control, fire safety and palliative care. Staff told us they have an appraisal every year but there is no system of formal staff supervision in place between annual appraisals. Regular supervision is a way of making sure staff continue to be supported throughout the year and this was discussed with management.

Some people told us they were concerned that there had been a lot of staff changes recently. They were concerned that some staff did not seem to know people very well and that the changes meant people did not get continuity of care. We discussed this during the visit. The home acknowledged that there have been changes recently, some of these due to staff leaving and some due to staff being moved between Lister House and its sister home Sherrington House. The home is aware that this can be unsettling for people but felt the changes were necessary to maintain the right balance of skills and experience in the staff team.

Lister House and Sherrington House are owned and managed by the same company. Since Sherrington House opened in 2005 the management team have been based there and this has led to some people feeling they are not always easily accessible. The management team have recognised that this needs to be addressed and have restructured the management roles to make sure there is a more visible senior management presence at Lister House. This will benefit people living in the home and their representatives.

The home has meetings for people using the service, they alternate monthly between

Lister House and Sherrington House. A comment from a relative suggested they were not aware of these meetings. The home told us the meetings are primarily for people living in the home and while relatives are welcomed they are not actively invited. The notes of these meetings are not routinely made available to people who have not attended. We discussed making the notes available to people and having some meetings throughout the year which relatives are invited to attend.

The home told us they send annual quality assurance questionnaires to give people the opportunity to share their views of the service and they continue to develop the service in response to the feedback they get from people.

In their AQAA the home told us there are suitable health and safety arrangements in place to make sure the home continues to be a safe place for people to live and work.

### **What the care home does well:**

The surveys we sent out asked people what the home does well, these are some of the comments we received.

- Has good organised entertainment and activities, great staff, very helpful
- Keep the residents clean and tidy, good meals and drinks, monitors residents intake of food
- Provides basic care
- Lister House cares for the patients very well; they are well fed, clean and comfortable
- I am usually told when the GP has seen my relative, staff are usually welcoming, cheerful and smile.

The home is well maintained and provides a comfortable and pleasant place for people to live. It has recently been refurbished and this included improving the lighting by putting in extra light fittings. When we visited the bedroom furniture was being replaced and all the bedrooms are having new TVs installed in preparation for the digital switchover.

The home has been awarded a 5 star (the highest) rating by Environmental Health for its standards of food safety and hygiene.

### **What they could do better:**

There are no requirements following this visit.

In the surveys we sent to people we asked what the home could do better. These are some of the comments we received:

- It would be nice to meet the owners maybe once a year as we never see them face to face. Obviously they are very busy but an occasion for families, owners and staff would be fruitful.
- The residents who are in bed all day must feel lonely, maybe employ someone to visit

them daily for a chat

- The home does an annual survey but I have not seen the outcomes of them and have not been aware of the home holding residents meetings.

In their AQAA the home told us they had already identified areas where improvements could be made and during the visit we made some good practice recommendations. The management team were open to ideas about improvements and showed they are committed to continuing to improve the service.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details set out on page 2.

Are there any outstanding requirements from the last inspection?

Yes

No

## Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

## Requirements and recommendations from this inspection:

### Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

### Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action

### Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations
1	7	Documentation should show that people and/or their representatives have been involved in drawing up and reviewing their care plans. This will mean that people can have a say in how they receive care and support.
2	33	The notes of meetings for people using the service should be made available to all people. Consideration should be given to inviting people's relatives and/or representatives to some meetings throughout the year to give them the opportunity to contribute to the ongoing improvement of the service.
3	36	There should be a formal system of staff supervision to make sure that staff get the ongoing support they need to carry out their roles effectively.

## Reader Information

Document Purpose:	Inspection Report
Author:	Care Quality Commission
Audience:	General Public
Further copies from:	0870 240 7535 (telephone order line)

Our duty to regulate social care services is set out in the Care Standards Act 2000. Copies of the National Minimum Standards –Care Homes for Older People can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or got from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: [www.tso.co.uk/bookshop](http://www.tso.co.uk/bookshop)

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