

Lakeview Rest Homes Limited

Rosewood Lodge Rest Home

Inspection report

491 Clifton Drive North
Lytham St Annes
Lancashire
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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

About The service

This is a residential care home for up to 24 people. The home is situated along the promenade near St Annes town centre. The service offers short to long term care. Private parking facilities are available. At the time of the visit there were 21 people who lived at the home.

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

People were protected from the risk of abuse and kept safe by staff who were trained to protect them. The registered manager recorded and audited any incidents and accidents and learnt from them. People were supported to manage risks in their daily lives. Staff continued to be recruited safely and sufficient numbers of staff supported people to live an independent life as possible. Medicines were managed safely. Infection control systems and audits continued to ensure a clean environment and reduce any risks. The provider ensured safety checks of the home environment were completed regularly.

The registered manager ensured staff received an effective induction and training programme that was continually updated, staff confirmed this. People spoke positively about the quality of meals and praised the cooks for the choices available. People received support with their healthcare needs promptly. 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.

People and their relatives told us staff were kind, caring, respectful and treated them well. They told us staff respected their privacy and supported them to be as independent as possible. The registered manager provided information about local advocacy services, to ensure they could access support to express their views if required.

People told us staff knew them well and provided care that reflected their needs and choices. Activities were varied, and people told us there were trips and entertainment regularly provided. Staff offered people choices and encouraged them to make decisions about their care. People's communication needs had been assessed and where support was required these had been met. The registered manager managed concerns and complaints in a timely manner and people told us they felt listened to.

The management team were clear about their roles and obligations to people and provided care which resulted in good outcomes for them. They worked in partnership with a variety of agencies to ensure people's and social needs were met. The registered manager and provider used a variety of methods to assess and monitor the quality of the service on a regular basis.

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

Rating at the last inspection

The last rating for this service was good (published 01 March 2017)

Why we inspected

This was a planned inspection based on the previous rating

Follow up: The next scheduled inspection will be in keeping with the overall rating. We will continue to monitor information we receive from and about the service. We may inspect sooner if we receive concerning information about the service.

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 caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Rosewood Lodge Rest

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 Care Act 2014.

Inspection team

The inspection was carried out by two inspectors.

Service and service type

Rosewood Lodge is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (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 that 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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection, including information from the provider about important events that had taken place at the service, which they are required to send us. We sought feedback from the local authority and Healthwatch Lancashire. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and

social care services in England. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections and we used this to plan our inspection.

During the inspection

We spoke with five people who lived at the home, three relatives, one healthcare professional and the registered manager. We also spoke with the area manager three members of care staff and a cook. We observed care practices and how staff interacted with people in their care. This helped us understand the experience of people supported by the service.

We looked at care records of two people and arrangements for meal provision. We also looked at records relating to the management of the home and medicines records of two people. We reviewed the services staffing levels and walked around the building to ensure it was clean, hygienic and a safe place for people to live.

After the inspection

We continued to communicate with the provider to corroborate our findings and further information was sent by the provider in response to the feedback provided during the inspection visit.

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 good. At this inspection this key question remained the same.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The registered manager protected people from the risk of abuse and their human rights were respected and upheld. A relative said, "A really safe place for [relative] to be that is down to the staff." A person who lived at Rosewood Lodge said, "I feel comfortable and safe here with staff around all the time."
- Effective safeguarding systems continued to be in place and staff spoken with had a very good understanding of what to do to make sure people were protected from harm. Staff told us safeguarding training was provided and updated and records confirmed this.

Assessing risk, safety monitoring and management

- The service managed risks to people's safety appropriately. Care plans contained completed assessments of people's risks and how to keep people safe. These included, mobility, the environment and fire safety. The assessments provided information for staff about people's risks and how best to support the person to reduce that risk. These had been kept under review by the registered manager and updated where required to ensure staff had access to information and support people safely.
- Accident records contained evidence staff had taken appropriate action when people had experienced accidents, including falls.

Staffing and recruitment

- Staff continued to be recruited safely. Pre-employment checks had been carried out prior to personnel commencing employment. We confirmed this from records we looked at. One staff member said, "No I wasn't allowed to start the induction until all checks were in place."
- The service was staffed sufficiently, and staff spoken with confirmed this. One said, "Yes happy with the staffing situation it is not a problem."
- We observed during the inspection visit staff were visible around the home to support people and provided help and attention when required. One person said, "They are always around the lounges we are never really short of staff to speak with."

Using medicines safely

- Medicines continued to be managed safely, and people received their medicines when they should. Our observations and people spoken with confirmed this. Medicines were recorded within people's medication administration records. This meant the registered manager had oversight of medicines taken and ensured they were administered in line with the prescriber's instructions.
- Staff who administered medicines had completed relevant training to administer medicines safely and

confirmed to us they had done so.

- We observed medicines being administered at breakfast and lunch time. We saw good practice was followed to ensure people received the correct medicine at the right time and safely. People were assisted as required and medicines were signed for only after they had been administered.

Preventing and controlling infection

- The registered manager continued to have safe and effective infection control procedures. Personal protective equipment such as aprons and gloves were available around the building. We saw staff make use of these to ensure correct practices were followed and reduce the risk of infection.
- Staff received training and regular audits were undertaken to ensure standards were maintained. Discussion with staff confirmed this and meant people were protected from the risks of poor infection control.

Learning lessons when things go wrong

- Systems were in place to record and review accidents and incidents. Accidents and incidents were investigated, and actions put in place to reduce the risk of future occurrences. Regular audits were completed, and lessons learned were shared with staff to improve the service and reduce the risk of similar incidents.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same.

This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Assessments completed by the management team were comprehensive and detailed to ensure people's needs could be met and a plan of care developed from the information. Care records continued to contain details about people's care needs, and their ability to help themselves and what support was required. Records were consistent, and staff provided support that had been agreed during the assessment process. People we spoke with confirmed this.
- The registered manager continued referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. People we spoke with confirmed this. This supported the service to ensure people received effective, safe and appropriate care which met their needs and protected their rights.
- Care plans continued to be regularly reviewed and updated when required. Records we looked at confirmed this.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and carried out their roles effectively. People told us they felt comfortable and confident staff had skills and expertise to support them with their care needs. A relative said, "My [relative] needs support and I feel staff are well trained to do that."
- Staff confirmed they had received training that was relevant to their role and enhanced their skills. They said they went through a thorough induction period when commencing their duties. Staff continued to feel supported by the registered manager and received regular supervision and appraisal of their work. One said, "Great support and training given here."

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

- The service managed people's nutritional needs to ensure they received a balanced diet and sufficient fluids to keep them hydrated. Care plans confirmed people's dietary needs had been assessed and support and guidance was recorded as required. We received positive comments about the quality of food. They included, "Food really good and a choice if you don't like something." Also, "We have a good cook who looks after us well."
- We arrived at breakfast time and observed a relaxed atmosphere with people eating their breakfast in their own rooms, and in the dining room. Lunch was organised, managed well and provided a relaxed and social occasion for people to enjoy their meal. We observed people who required help with meals were supported in a sensitive and encouraging way. A relative said, "They don't make a fuss when helping people

and engage with people it's a lovely environment at meal times."

- Where concerns had been identified regarding people's food and fluid intake appropriate action had been taken. This included implementing food and fluid charts to record the amount of food and fluid consumed by people that may be risk.

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked effectively with healthcare professionals to ensure people's healthcare needs were met. The registered manager worked closely with health care services including GPs, and district nurses. A health professional only had positive comments about Rosewood lodge. They told us how well they with worked with them to ensure people received the right care and support.
- People confirmed they were supported to attend healthcare appointments when required. One person said, "I always go with a staff member if required to do so."

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

- Accommodation was accessible, safe, homely and suitable for people's needs. Bathrooms could accommodate people who required support with moving and transferring to the bath.
- The service had Wi-Fi (wireless connectivity) fitted allowing people with computers, smartphones, or other devices to connect to the internet or communicate with family and friends.

Supporting people to live healthier lives, access healthcare services and support

- People experienced effective, safe and appropriate healthcare support which met their needs. People spoke positively about the way the staff and registered manager had improved their quality of life and ensured all healthcare appointments were met.
- A visiting healthcare professional told us staff responded quickly and appropriately to any issues they encountered.
- Care records confirmed visits to and from GPs and other healthcare professionals had been recorded. The records were informative and had documented the reason for the visit and what the outcome was. This confirmed people's assessed needs were being met.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act 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 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. Also, whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority. We saw these were being met.

- People told us staff always asked for their consent before supporting them. Care records contained consent to care documentation that was signed by the person receiving care.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as Outstanding. At this inspection this key question has remained the same.

This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- People we spoke with told us they continued to experience care and support by staff that treated them with respect and kindness. Comments included, "Very caring staff always doing the best for you." Also, "They treat everyone the same with great kindness."
- Staff had a good understanding of protecting and respecting people's human rights. They talked with us about the importance of supporting people's different and diverse needs. Care records seen had documented people's preferences and information about their backgrounds.
- The service had carefully considered people's human rights and support to maintain their individuality. Documents included information of protected characteristics as defined under the Equality Act 2010, such as their religion, disability, cultural background and sexual orientation. The registered manager told us they had systems to ensure people's human rights were upheld.

Supporting people to express their views and be involved in making decisions about their care

- People and relatives continued to be consulted about care and support they received. They told us they had an input on how they wanted to be supported and cared for. People told us they were encouraged to attend reviews of care. A relative said, "We do have a lot of input with [relative] care and the staff encourage that."
- The culture of the service was caring, compassionate and empowering. This reflected the attitude of all people who worked there and their values. There was a strong emphasis people were individuals and treated well. This was evidenced by our observations and discussions. A staff member said, "Everyone has different needs and choices and it is important we respect the person as an individual."
- There was information available about access to advocacy services should people require their guidance and support. An advocate is an independent person, who will support people in making decisions, to ensure these are made in their best interests.

Respecting and promoting people's privacy, dignity and independence

- People continued to be treated with respect and their dignity was upheld. People who lived at Rosewood Lodge and relatives confirmed this. We observed staff knocked on bedroom doors before entering or waited for a response. Staff were aware of respecting people's privacy.
- The registered manager and staff respected people's wish to be as independent as possible. One person told us, "I do a lot on my own and prefer that. They do encourage me to be independent as I can, and I

appreciate that."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same.

This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The management team and staff provided support that focussed on individual needs and choices of people. People's care records continued to be personalised and detailed. They contained information about their preferences, needs and choices. They were updated on a regular basis and people told us they were involved in reviews of their care. One person said, "We do have choices and staff go overboard to make sure we do what we choose to."
- People told us staff gave them choices and they were able to make every day decisions about their care and how they wished to spend their time. One person said, "We have a lot going on and I would join in at times, or I would go in the garden I like it there, its lovely."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The management team assessed people's communication needs as part of the assessment process. They documented in people's care plans any support they needed and how that should be provided. The service provided large print information for people with visual impairment and provided training guidance for staff, so they could support people with their communication needs.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were encouraged to take part in events at the home and develop relationships. People were encouraged to have as much control and independence as possible. Care records highlighted the positive impact the service had on people and support provided to enable them to pursue activities of their choice. One person said, "Staff provide a lot of entertainment."
- The registered manager had kept a record of activities people had undertaken and advertised on the notice board of up and coming events. There had been a variety of activities carried out which people told us about. One person said, "I love going out on any trips and singers that come in."
- Staff encouraged people to maintain relationships that were important to them. People told us they did not restrict visiting times and staff made visitors feel welcome. Relatives spoken with told us they were welcome at any time and encouraged to visit the home.

Improving care quality in response to complaints or concerns

- Complaints would be listened to, taken seriously and dealt with appropriately. People knew how to make complaints and felt confident that these would be acted upon. The registered manager told us they learnt from complaints or concerns as a positive experience to improve the service.
- People told us they had no reason to complain about anything however they were sure concerns would be dealt with appropriately. A relative said, "Never complained but they would make sure things would be put right I know that."

End of life care and support

- People's end of life wishes had been recorded so staff were aware of these. No one at present was on end of life care. Staff had completed end of life care training and they confirmed this when spoken with.

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 good. At this inspection this key question has remained the same.

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

- The registered manager planned and delivered effective, safe and appropriate person-centred care. We saw all current and relevant legislation along with best practice guidelines had been followed. This was to ensure the diverse needs of everyone who used their service were met. A health professional spoke positively about staff attitudes and commitment to provide the right care and support for people.
- The service continued to have systems to make sure people received person-centred care which met their needs and reflected their preferences. The management team led by example, treating people as individuals and encouraging people, relatives and staff to be involved in the running of Rosewood Lodge. People spoken with confirmed this.
- The structure of the service was organised, and a clear staffing system was evident. Staff spoke positively about how they were managed. One person said, "We have a good manager and organisation behind them."

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 understood legal obligations, including conditions of the Care Quality Commission (CQC) registration and those of other organisations. They had submitted statutory notifications to CQC about people using the service, in line with current regulations. A statutory notification is information about important events which the service is required to send us by law.
- We found they had clear lines of responsibility and accountability. People spoke positively about how Rosewood Lodge was managed.
- The registered manager continued to provide policies, and guidance around the duty of candour responsibility if something was to go wrong.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager was experienced, and staff were knowledgeable with the needs of the people they supported. A staff member said, "We have a good staff team that know the people and experienced enough to ensure people are well cared for."
- Discussion with staff confirmed they were clear about their role and between them and registered manager provided a consistent and organised service. A relative said, "This is well run, and the staff and

management know what they are doing. Staff seem to stay a while which is a good sign."

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

- The registered manager created an open culture and encouraged people to provide their views about how the service was run. For example, satisfaction surveys given to people and relatives were completed for feedback about the service. Results from recent questionnaires found very positive results and satisfaction about care provided at Rosewood Lodge. The management team told us any negative comments would be acted upon to ensure they continued to develop.
- Staff told us staff meetings were held regularly and they felt able to raise concerns and make suggestions. They told us the registered manager was supportive and always available for discussion any time.

Continuous learning and improving care

- Rosewood Lodge was regularly assessed and monitored. A wide range of audits such as medication, health and safety and maintenance were carried out. We saw evidence the registered manager had acted upon any findings from the audits. This demonstrated improvements were made to continue to develop the home for the benefit of people who lived and worked there.

Working in partnership with others

- The management team worked in partnership with other organisations to make sure they followed current practice, providing a quality service and the people in their care were safe. These included healthcare professionals such as GPs and district nurses. A health care professional told us the staff and registered manager worked with them to ensure people were looked after well. This ensured a multi-disciplinary approach had been taken to support care provision for people in their care.