

# Innova House Health Care Limited

## Lilac

### Inspection report

24 Greasley Court  
Mansfield  
Nottinghamshire  
NG18 4ND

Tel: 01623626252

Website: [www.innovahouse.org.uk](http://www.innovahouse.org.uk)

Date of inspection visit:  
14 January 2019

Date of publication:  
13 February 2019

### 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

What life is like for people using this service:

This was the first inspection for Lilac. The service had no service users living in the home until November 2018 when one person moved in. The people who were living there before went to live in supported living accommodation.

The provider provided effective person-centred care to people using the service. Staff listened to people, and organised activities and outings which were interesting and developed people's social skills. Staff understood the importance of this for people using the service and provided the structured support people required. This enabled people to achieve positive outcomes and promoted a good quality of life.

There was good oversight by the management team and all aspects of the service were monitored with a view to making improvements. Improvements within training and development were being implemented which would benefit the people who were living at the service..

Support planning was comprehensive and involved the person and any professionals. The information was kept updated and reviewed regularly according to changing circumstances. Risk assessments were also relevant and up to date and had good information on how the risk could be reduced.

About the service:

Lilac is a residential care service that accommodates up to three people with learning disabilities or autistic spectrum disorder. At the time of our inspection there was one person living at the service. The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practise guidance. The values include choice, promoting independence and inclusion. People with learning disabilities and autism using the service can live as ordinary life as any citizen. 'Registering the Right Support' CQC policy.

Why we inspected:

This was a first full comprehensive inspection for Lilac since it's registration in January 2017.

## 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.

Good ●

### Is the service effective?

The service was effective.

Good ●

### Is the service caring?

The service was caring.

Good ●

### Is the service responsive?

The service is responsive.

Good ●

### Is the service well-led?

The service was well led.

Good ●

# Lilac

## Detailed findings

### Background to this inspection

#### The inspection:

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

One inspector carried out the inspection.

#### Service and service type:

Lilac is a care home. People in care homes receive accommodation and nursing or personal care. CQC regulates both the premises and the care provided, and both were looked at during the 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:

The inspection was unannounced and the inspector visited the service on 14 January 2019.

#### What we did:

We reviewed the information we had received about the service since its registration in January 2017. We assessed the information we require providers to send us at least once annually to give us some key information about the service, what the service does well and the improvements they plan to make. We use all of this information to plan the inspection.

People living at Lilac were involved in activities on the day we visited and didn't wish to speak with us. We spoke with one member of staff, the assistant manager and registered manager and after the visit we spoke with a relative by telephone.

We looked at support plans and risk assessments for one person. Medication records including

administration, storage and audits. We looked at infection control, staff files including recruitment checks, supervision and appraisal, training and development. We also looked at internal audits, systems and processes to ensure that the service was meeting the needs of those living there and kept them safe from avoidable harm.

# Is the service safe?

## Our findings

Safe – this means people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

Supporting people to stay safe from harm and abuse, Systems and processes

- The registered manager and staff understood their responsibilities to safeguard people from abuse. Concerns and allegations were acted on to make sure people were protected from harm.
- Staff had been trained in safeguarding and how to recognise the signs of abuse. One relative told us, "I feel that [name] is kept safe at Lilac, staff are brilliant and it's like an extended family."
- A system was in place to record and monitor incidents and this was overseen by the registered manager.
- Support plans provided advice on how to keep people safe in the community and reduce the risk of abuse.

Assessing risk, safety monitoring and management

- There were clear risk assessments in care plans with explanations of control measures to keep people safe. Risk assessments were linked to the person's support needs and these were reviewed regularly.
- Environmental risks were managed safely. There was a monitor of sharps including kitchen knives and scissors as these had posed a risk in the past however the registered manager had taken steps to reduce the risk to keep people safe.
- The environment and equipment was safe and well maintained. Emergency plans were in place to ensure people were supported in the event of a fire.

Using medicines safely

- The registered manager had stated on the information provided to us before the inspection, that they were planning to work to support a person to self-medicate. When we visited the home, this was taking place. The registered manager had systems and processes in place to monitor this and medication was signed out weekly and monitored closely by staff.
- Medicines were stored and administered safely.
- Staff were trained and assessed in the administration of medication.

Preventing and controlling infection

- Staff had received training in infection prevention and control and how to prevent the spread of infection such as through effective hand washing.
- The home was clean throughout and there were audits on infection control, food hygiene and personal protective equipment (PPE).

## Learning lessons when things go wrong

- Incidents and accidents were reviewed when they happened and the registered manager told us that they would learn from what had happened and put measures in place to reduce the risk.

## Staffing levels

- There were enough staff available to meet people's needs and ensure their safety. People at Lilac only needed to be supported during the day and staffing had been reviewed on this basis.
- The registered manager told us that he had recently reduced the hours from 14 to 12 per day but would be reviewing again when they had more people living at the home. They assessed the staffing based on the needs of people living there.

# Is the service effective?

## Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

People's outcomes were consistently good, and feedback confirmed this.

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

- People's health needs were assessed and monitored, professionals were involved in care and treatment. Care plans and risk assessments were reviewed and updated accordingly.
- Staff applied learning effectively in line with best practice which led to good outcomes for people and supported a good quality of life.

Staff skills, knowledge and experience

- Staff were competent, knowledgeable and skilled, and carried out their roles effectively. A relative told us, "Staff know what [name] likes and support them to do what they enjoy."
- A member of staff told us "[Name] was keen to go to the gym so we have started taking them, they enjoy it and it helps them to socialise which they also enjoy".
- Improvements were underway to staff training and a regular training programme was being introduced.

Supporting people to eat and drink enough with choice in a balanced diet

- People were supported to prepare meals and although advice and support on healthy eating was available, staff told us they respected people's decisions to make unhealthy choices if they wished to.
- People were encouraged to do their food shopping and choose what they would like to eat for each meal.

Staff providing consistent, effective, timely care

- Staff provided support on a one to one basis throughout the day. People at Lilac did not need support during the night, this had been recently assessed by the registered manager. There were systems in place should support be needed after day staff had left.

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

- People could choose what they wanted in their room and also in the main lounge. Staff explained that people were able to socialise in the lounge area when they were not out doing an activity.

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 Act requires 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. The application procedures for this in care homes and hospitals are 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 were being met.

- People at Lilac had full capacity and could make decisions regarding all their care and treatment. People's choices were respected by staff

# Is the service caring?

## Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- We saw staff speak with people in a respectful manner, people were given choices and staff had time to spend with people and do different activities.
- We observed people were treated with kindness and care.
- Staff were competent, knowledgeable and skilled and showed a good knowledge of people's needs and preferences.

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

- One relative told us that the staff supported their family member to do what they wanted to do and were kind and caring.
- Support plans reflected the views of people and their wishes in relation to both care and support and a range of activities they wanted to be involved in.

Respecting and promoting people's privacy, dignity and independence

- People were offered choice and control over their day to day lives
- Staff encouraged people to spend time as they liked and to make choices.
- People's right to privacy and confidentiality was respected.
- A relative told us, "I don't drive at the moment and [name] comes home for sleepovers and staff always bring them over and take them back again which is such a help and keeps them safe."
- People were encouraged to be independent with personal care where possible but support was available if needed.

# Is the service responsive?

## Our findings

Responsive – this means that services met people's needs

People's needs were met through good organisation and delivery.

How people's needs are met

Personalised care

- Staff had weekly one to one sessions with people using the service to discuss aspects of their care and support including shopping, outings and activities. This was used to inform and make changes in the persons weekly plan and covered aspirations for the future. For example, when a person expressed a wish to start attending a gym, the staff arranged this at a local facility.
- Staff knew people's likes, dislikes and preferences. They used this information to care for people in a way that they wanted to be supported.
- People's needs were identified, including those relating to protected characteristics, such as race, religion or gender, and their choices and preferences were regularly reviewed.
- Important information was available in easy read accessible formats including information about equality, diversity and human rights.

Improving care quality in response to complaints or concerns

- The assistant manager was able to show how complaints or concerns would be managed but the service had not received any. They would use this information to make changes or improvements to systems and processes or the way that people were cared for.
- The assistant manager showed how concerns were acted upon in their other service and also showed us a letter which was written in response to a person's complaint. The letter was written in a format accessible to the person. This would be the same in Lilac should they receive a concern or complaint.

End of life care and support

- Where appropriate people were supported to think about their wishes for the end of their life. There was an easy read document to complete in relation to end of life care for people which was kept at the back of the support planning. This was not completed in the support plan we looked at. The manager explained that not everyone wished to make those decisions in the service but it was available for when they did.

# Is the service well-led?

## Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

### Leadership and management

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- The quality assurance system included effective checks carried out by the manager and staff.
- Staff supervision was not always carried out regularly but staff said that they felt supported and listened to. The registered manager was aware that the supervision process required review but was frequently at the home, talking to and supporting the staff on duty.
- Leaders and managers showed a commitment to delivering high quality person centred care by engaging with people, families and stakeholders.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements which included statutory notifications to CQC.

- The service was well run. People at all levels understood their roles and responsibilities and the registered manager was accountable for their staff and understood the importance of their role.
- The registered manager was clear about the quality of the service and talked about planning to have another person move in and the implications that may have on the staffing which they had already considered.

### Engaging and involving people using the service, the public and staff

- The service had good relationships with professionals including specialist services and professionals in health.
- The registered manager had an open relationship with families and one relative told us, "I wouldn't hesitate to phone up to have a chat, [registered manager] is really friendly and always sorts out any issues."

### Continuous learning and improving care

- The provider had 'enrichment leads' who supported staff in specialist areas. This role had replaced the team leader role and was working well and supporting the registered manager and assistant manager.
- The registered manager was keen to have further training for the team in specialist areas to develop themselves and the service going forwards.

## Working in partnership with others

- The staff in the service had links with other resources and organisations including an advocacy service should it be needed. This included specialist health professionals involved in the healthcare and support of people using the service. There was evidence in care plans where other professionals had been consulted.