

Heritage Manor Limited

# The Lawns Nursing Home

## Inspection report

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05 October 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 Nursing Home is a residential care home providing personal and nursing care to up to 63 people. The service provides support to people requiring personal and nursing care, including those living with dementia and physical disabilities. At the time of our inspection there were 59 people using the service. The Lawns Nursing Home is an adapted building, with care provided over two floors.

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

Some people experienced delays in call bells being answered. The registered manager identified this and was engaging with people to alter care plans to meet their needs. The registered manager had also adjusted staffing levels to meet people's care needs. People's needs were assessed and monitored to support them to live safely. Staff had a good understanding of people's care plans and risk assessments, which were regularly updated. Medicines were administered safely.

Staff completed a robust induction, including training in manual handling. Staff received regular peer mentoring and supervisions with management. The provider had a comprehensive training programme which allowed staff to gain formal qualifications and develop their skills to support people's needs.

People were offered a choice of good quality food and drink, which was tailored to meet their dietary requirements. People were actively involved in their care and their choices were respected. There was timely access to healthcare services and equipment. Staff supported people to meet their cultural and religious needs. People had a good choice of activities and their views were listened to. The registered manager worked proactively to establish a resident ambassador to advocate for people, as well as seeking individual and group feedback.

There was a positive and open leadership culture. Staff were supported to provide care to people through strong quality assurance processes, which identified areas for development. The registered manager actively engaged with staff to promote good practice. The provider had strong links with other healthcare professionals to improve people's health and well-being.

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 were involved in making decisions regarding their care and staff knew how to meet people's needs. People and relatives knew how to complain if they were unhappy.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 27 May 2020).

### Why we inspected

We received concerns in relation to manual handling, staffing levels, people's nutrition and care needs. As a result, we undertook a focused inspection to review the key questions of safe, effective and well-led only. 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 remained good based on the findings of this inspection.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the Safe, Effective and Well-Led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Lawns Nursing Home on our website at [www.cqc.org.uk](http://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 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. 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 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 visit was carried out by an Inspector, Inspection Manager, Specialist Nurse Advisor (SPA) and an Expert by Experience. 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 Nursing Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. The Lawns Nursing Home is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced on the first day. We visited the location on 04 October 2022 & 05 October 2022.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We 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 12 people who received care from the service and 5 relatives. We spoke to the registered manager, two deputy managers, a lifestyle and wellbeing lead, head chef, two care staff and two nurses. We reviewed a range of documents including five people's care records and three staff recruitment files. We also looked at checks the registered manager completed to assure themselves people received safe and good quality care. We spoke to the provider representative and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

# 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.

Systems and processes to safeguard people from the risk of abuse

- People felt safe at the Lawns Nursing Home and were confident staff would help them if they were at risk of abuse. One person told us, "This is a safe place." Another said, "The staff are friendly and always check on you."
- Relatives were confident people were safe. One relative told us, "[Person] is safe here, there are always [staff] around."
- Staff knew the signs of abuse and what action they needed to take to protect people.
- The registered manager described local safeguarding procedures in detail and knew how access support from other health and social care professionals, when appropriate.

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

- People were supported to manage risks to their safety in accordance with their wishes. For example, one person was receiving support from staff to manage the risks associated with their health condition.
- Regular reviews of people's risks were completed including falls, nutrition and skin integrity. Appropriate referrals to partner agencies were made when required to support people to live safely.
- Routine checks were carried out on the safety of the environment, equipment and utilities by a maintenance member of staff to promote people's safety.
- There was an open culture where staff were encouraged to report if anything had gone wrong. This helped to promote learning and improve the quality of the service.
- The registered manager reviewed accidents and incidents to identify trends. The registered manager took appropriate steps to mitigate risks.

Staffing and recruitment

- Some people experienced delays for call bells to be answered. The registered manager recognised this and was engaging with people to adjust their care plans to reduce call bell waiting times. The registered manager regularly reviewed staffing levels and adjusted these to meet people's care needs. Staff shift times had been adjusted to meet people's requirements and 'hosts' had been employed to support during busier mealtimes.
- The provider was actively recruiting for permanent staff and, used regular agency staff when required who had completed an induction. This supported people's continuity of care.
- The provider checked the suitability of staff before they were employed. For example, checks were undertaken with the Disclosure and Barring Service (DBS). DBS provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

### Using medicines safely

- People were supported to have the medicines they needed to remain well. Medicines were administered, stored and disposed of safely.
- The registered manager and senior staff regularly audited people's medicine records to check they had their medicines safely. Staff medication competencies were assessed every twelve months.
- Medicine Administration Records were completed with a good quality photograph, allergy information and a person-centred plan for how people like to be supported with their medication.

### 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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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 home facilitated visitors in-line with government guidance. There were no restrictions on visiting the home and checks were undertaken to ensure visitors were following guidelines.



# 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. At this inspection the rating for this key question has remained good. 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

- People's needs were assessed on admission and routinely monitored during the 'resident of the day' process. Risk assessments and care plans were regularly updated and reflected current needs. This ensured people's health and wellbeing was well managed.
- Staff had good knowledge of people's care plans and risk assessments. One staff member told us, "We have access to all [people's] care plans and they tell us everything we need to know." This helped people remain safe and well.

Staff support: induction, training, skills and experience

- Staff completed an induction, including shadowing experienced staff and were allocated a 'peer mentor'. One staff told us, "I had a good induction and shadow shifts. It was brilliant." This enabled new staff to learn people's care preferences.
- Mandatory training had been completed by all staff, including the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- The provider's comprehensive training programme gave staff the opportunity to develop their skills and knowledge. Staff were motivated to provide good care by the opportunity to pursue areas of interest and gain formal qualifications.
- Staff completed training in manual handling to ensure people were safely moved. One person told us, "They hoist me safely and I am not scared". A staff member said, "I did manual handling training, assessment and refresher."

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

- People were offered a choice of food and drink. One person told us, "They [staff] are aware of my chewing problems and they make an effort to accommodate my dietary needs." Another said, "Talk about the fluids, here they come, we have them all the time."
- The head chef understood people's individual dietary requirements and ensured food was served in an appealing way to encourage people to have enough to eat. They told us, "All modifications are made in the kitchen prior to being served. For example, level four pureed food is not mixed, and I can fortify food to help manage weight changes."
- The lunchtime experience was positive and calm. We saw carers positively encouraging people to eat and drink in line with their wishes and dietary needs.

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

- People had timely access to healthcare services and equipment when needed. The provider had strong links with a GP service, community pharmacists, physiotherapist, dentists, and other healthcare professionals to meet people's needs.
- Referrals were made to specialist healthcare professionals, such as speech and language therapists and occupational therapists. This improved people's health outcomes and ensured they received the right support.
- A daily management meeting and robust staff handovers ensured key information was being shared about people's health and wellbeing. This meant staff were able to effectively monitor and address concerns regarding to people's health and wellbeing in a timely manner.
- Lifestyle and wellbeing leads ensured people received a good choice of activities and access to the community to promote their physical health and well-being.

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

- The home is designed to meet the needs of people. This enabled people with physical disabilities to easily navigate around the building. There is an attractive outdoor area for people to enjoy.
- People's rooms were personalised to their wishes and tastes.

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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Covert medicines were administered safely. The provider had a protocol in place to ensure capacity assessments and best interests' meetings had taken place. A pharmacist was consulted to ensure safe administration to keep people well.
- People told us they were given choices to live in the way they wished. One person said, "They are quite good at letting me do things on my own." If people were unable to make a decision; a decision was made in the person's best interests following the appropriate process.
- The provider and staff understood their responsibilities for ensuring people could make decisions about their care and support, and the role of best interest decision making. One staff member told us, "We give them choices, they always have a choice."
- DoLS applications and authorisations for people were effectively monitored.

# 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 good. The rating for this key question has remained 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

- People and relatives were happy with the leadership of the home and the care they received. One person said, "Things run smoothly here, we always have what we need." Another told us, "We are all very happy here" because of the way the home was managed.
- People were given a choice in their care and their choices were respected. Care plans were tailored to meet people's daily individual preferences and staff worked to ensure their needs were met. People were supported to access their religious and cultural needs. One person said, "I have been [religious] all my life, they support me with that and I have meetings on Zoom."
- Staff spoke of a positive and open leadership culture, including, "Management are lovely, always open for a chat. Any issues, I know I can complain." Another said, "The registered manager is very supportive, available, accessible and their primary focus is the quality of the lives of the people who live here. They also really care about the staff."
- A daily management meeting was chaired by the registered manager and attended by all heads of departments. This meeting discussed people's needs and the operational functioning of the home. This assured the registered manager action was consistently taken to support people's health and wellbeing.
- The home is accredited by the Gold standard framework (formalised best practice for end of life care) and has been awarded platinum status..

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; Continuous learning and improving care

- Staff were supported to provide care to people through detailed care plans, robust handovers, regular supervisions and personal development opportunities. The registered manager audited staff handovers to ensure people's needs were known.
- The registered manager kept up to date with the latest good practice guidelines by chairing the local registered managers forums. The registered manager attended internal provider meetings where important information was shared. This meant people received care in line with developments.
- Strong quality assurance systems were in place. Medications audits had identified missing signatures on two occasions. This was investigated by management and staff were provided with supervision to reduce the likelihood of a repeat occurrence.
- The registered manager knew their legal and regulatory responsibilities, including key events which needed to be reported to The Care Quality Commission.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- An established 'resident ambassador' advocated for people living at the home. The registered manager welcomed comments from the resident ambassador, with people's feedback quickly acted upon.
- People's suggestions and concerns were sought during individual 'resident of the day' meetings every month. People were also listened to during well-attended resident meetings and feedback survey. Requests for day trips had been implemented and new garden furniture was being sought. This improved people's wellbeing.
- The registered manager was visible and approachable. A person told us "[name] is a good manager and comes around all the time." A relative said "I chat to the manager most of the time I'm here."
- People's equality characteristics were fully assessed and supported. For example, people were provided with audio books and easy to read resources to meet their needs. The provider had used technology and the diverse staffing team to support people who required translation. This actively supported people's wellbeing.
- The registered manager worked proactively with other organisation to improve people's health and wellbeing. This included taking part in a university study into the use of air filters to reduce respiratory infections and membership of a multiagency skin integrity task group.
- The provider worked closely with local colleges and universities to provide work placements for care and nurse students.