

Durham Care Line Limited

Lyons Court Care Home

Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Lyons Court Care Home is a residential care home providing personal and nursing care to up to 50 people in 1 adapted building. The service provides support to a range of people, including older people, people living with a dementia and people with mental health conditions. At the time of our inspection there were 38 people using the service.

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

The premises were not always effectively cleaned or well-maintained. Effective governance systems were not in place to monitor and improve standards.

Medicines were managed safely. People were safeguarded from abuse. The provider had safe recruitment procedures in place. Risks to people were assessed and monitored. 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.

We have made a recommendation about staffing levels.

People, relatives and staff spoke positively about the culture and values of the service. Feedback was sought and acted on. People and relatives spoke positively about people's care outcomes.

Rating at last inspection and update

The last rating for this service was good (published 22 April 2021).

Why we inspected

The inspection was prompted due to concerns received about cleanliness and infection control. A decision was made for us to inspect and examine those risks.

You can see what action we have asked the provider to take at the end 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 good to requires improvement based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Lyons Court Care Home on our website at www.cqc.org.uk.

Enforcement and Recommendations

We have identified breaches in relation to cleanliness, infection control and governance systems at this inspection.

Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan from the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. 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 not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Lyons Court 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.

Inspection team

2 inspectors, 1 specialist advisor nurse and 1 Expert by Experience carried out this inspection. 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

Lyons Court Care 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. Lyons Court Care 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 not a registered manager in post. A new manager had been in post for 6 months and had submitted an application to register. We are currently assessing this application.

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. We sought feedback from the local authority and professionals who work with the service. 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.

During the inspection

We spoke with 3 people who used the service and 8 relatives about their experience of the care provided. We spoke with or gathered feedback via email from 12 members of staff including the manager, care and domestic staff. We reviewed a range of records. This included 12 people's care records and medicine administration records, with accompanying documentation. A variety of records relating to the management of the service, including policies and procedures were reviewed.

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 good. At this inspection the rating has changed to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Preventing and controlling infection

- The premises were not always clean. We saw that some communal areas, including dining rooms and bathrooms, were dirty and had not been effectively cleaned. This meant people's living environment was not always clean or suitable for use.
- Equipment was not always clean or properly maintained. For example, tables and chairs in dining areas were stained and dirty. Some shower chairs were also stained with dirt.
- Infection prevention and control systems were not always effective. For example, clinical waste was not always disposed of correctly and in line with the provider's policy. We also saw that personal protective equipment was not stored correctly to ensure it was free from contamination. We spoke with the manager about the issues we identified, and some remedial action was taken.

The premises were not always clean or well-maintained. This was a breach of Regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Staffing and recruitment

- Staffing levels were monitored to ensure they matched the support people needed. However, staff told us that night staffing levels were sometimes pressured and did not always reflect people's true levels of care.

We recommend that the provider review the system they use to determine staffing levels to ensure they reflect people's assessed levels of support.

- After the inspection, the home manager informed us that another member of staff had been added to those already on duty throughout the night.
- People and relatives spoke positively about staffing at the service. One person said, "There are carers all over the place and they will come if you need them."
- The provider's recruitment policies reduced the risk of unsuitable staff being employed. These included interviews, obtaining references and completing Disclosure and Barring Service checks.

Using medicines safely

- Medicines were managed safely. People received their medicines when needed, and clear records of administration were kept.
- Medicines were safely and securely stored. However, storage temperatures were not consistently monitored and some areas of the treatment rooms were dirty. We spoke with the manager about this, who

said action would be taken immediately to address it.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were safeguarded from abuse. Staff received safeguarding training and knew how to raise any concerns they had. One member of staff said, "I would first try to address the issue directly with the staff on duty or the management. If the concern persisted or was not adequately resolved, I would escalate the matter."

Assessing risk, safety monitoring and management

- Risks to people were assessed and action was taken to address them. Risk assessments were regularly reviewed to ensure they reflected people's current support needs. One person said, "I certainly feel safe here."

- Required test and servicing certificates were in place for the premises and equipment. These were monitored and reviewed appropriately.

- Plans were in place to support people in emergencies. These included regular checks of firefighting equipment and contingency plans.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

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. At this inspection the rating has changed to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; Working in partnership with others

- The provider's governance systems had not effectively assessed, monitored or improved the quality of the service. For example, audits dealing with the premises had either not identified cleanliness issues or had raised some issues but not led to remedial action. This meant effective action to improve the service was not always taken.
- External professionals told us that issues they had raised for improvement had not always been actioned. These included issues with the premises that we found were still awaiting action when we inspected.

Systems had not been established to assess, monitor and improve the quality of the services provided. This placed people at risk of harm. This was a breach of Regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- People, staff and relatives spoke positively about the leadership of the manager. One person told us, "I get on with the manager very well." A member of staff said, "[The manager] is really turning it around, I think she is doing a marvellous job."

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

- Staff gave us positive feedback on the culture and values of the service. Comments included, "I feel Lyon's have staff that really care about the residents and always have the service users best interests and care needs as their number one priority" and, "The service has shown dedication to providing quality care for the residents."
- People and relatives said they had open and regular contact with the service. One person told us, "I can go to her (the manager) with any issue that I have." A relative told us, "The overall view I have is that they are approachable, and the office door is always open, and people are available if you need to speak to them." Another relative said, "The management team are very approachable and you can ring them at any time if you have a problem."
- Staff supported people to achieve their care outcomes. One person told us, "The staff are friendly and helpful." A relative we spoke with said, "I think [named person's] care is managed extremely well."
- The manager and staff understood the duty of candour and knew how to act when things went wrong.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 12 HSCA RA Regulations 2014 Safe care and treatment People who use services and others were not protected against the risks associated with unsafe or unsuitable premises because of inadequate cleaning. Regulation 12(1).
Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA RA Regulations 2014 Good governance Effective systems had not been put in place to assess, monitor and improve the quality and safety of the services. Regulation 17(2)(a).