

Lyndhurst Limited

Lyndhurst Residential 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

Lyndhurst Residential Care Home is a residential care home registered to provide personal care and accommodation for up to 20 people aged 65 and over. There were 17 people living at the home at the time of this inspection.

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

Risks associated with people's care were assessed and people's care plans gave staff the basic information needed to care for them safely. However, the level of detail and robustness of some of these records required improvement. The environment both internally and externally was generally safe and well-maintained. A wide-ranging schedule of improvement works had started at the home since our last inspection. Some areas of the home still required redecoration and/or upgrading, and we identified some minor repair works which the provider had not yet identified or addressed.

The effectiveness and organisation of quality assurance processes at the home had notably improved since our last inspection. However, some of the issues we identified during this inspection still had not been identified or addressed by the provider's own quality processes. Therefore, the provider requires further time to fully embed, sustain and develop the improvements made in this area.

People told us there were enough staff at the home. One person commented, "There's enough staff, people never wait long for help. The staff are on the spot." Staff were visible around the home throughout our inspection and any call bells were answered promptly. Staff were safely recruited, ensuring new staff were suitable to work with vulnerable adults.

People living at the home were safeguarded from the risk of abuse. People said they felt safe living at the home. One person said, "I'm safe and happy here. I get on with the staff, they are friendly and kind." Staff had received safeguarding training and understood their role in recognising and reporting safeguarding concerns.

The home was clean and hygienic. Staff followed the relevant guidance and best practice in relation to infection prevention and control. The home had a COVID-19 testing programme in place for people living at the home and staff. Staff and people living at the home had been supported to access COVID-19 vaccinations.

There was a kind and caring culture amongst staff at the home. Staff interacted with people with kindness and care throughout the day. People appeared content and comfortable in their surroundings. People living at the home spoke positively about the staff. One person said, "All the staff are kind. I know the staff, as we chat and they get to know us and have a laugh."

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

Rating at last inspection (and update)

The last rating for this service was requires improvement (published 28 November 2021).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We received concerns in relation to the safety, maintenance and cleanliness of the environment. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained requires improvement. This is based on the findings at this inspection. Whilst the provider had made improvements since our last inspection, we have found evidence that the provider needs to make further improvements. Please see the safe and well-led sections of this full report. You can see what action we have asked the provider to take at the end of this full report.

We found no evidence during this inspection that people were at risk of harm from the concerns received. Please see the safe section of this full report.

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

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 ●

Lyndhurst Residential 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 Care Act 2014.

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

This inspection was carried out by one inspector.

Service and service type

Lyndhurst Residential Care Home 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 checked the information that we held about the service. This included statutory notifications sent to us

by the provider about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send us by law. We also gathered feedback about the service from the local authority. We used all of this information to plan our inspection.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with six people who lived at the service and three relatives about their experience of the care provided. We spoke with six members of staff including the registered manager, carers and other staff. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment. 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 the last inspection this key question was rated as requires improvement. At this inspection this key question has remained the same. 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.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Risks associated with people's care were assessed and people's care plans gave staff the basic information needed to care for them safely. However, we found the level of detail and robustness of some of these records required improvement.
- The environment both internally and externally was generally safe and well-maintained.
- The provider had started a wide-ranging schedule of improvement works at the home since our last inspection and these works were ongoing. This included installing new windows and fire doors.
- Some areas of the home required redecoration and/or upgrading. We also identified some minor repair works which the provider had not yet identified or addressed as part of their own regular environmental checks. The provider took action to complete these repairs both during and shortly after the inspection.

Learning lessons when things go wrong

At our last inspection the provider had failed to effectively mitigate risks associated with people's care as systems were either not in place or robust enough to investigate and prevent recurrence of incidents. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Accidents and incidents were effectively recorded, responded to and reviewed by staff.
- The provider had systems in place to record and review accidents and incidents that occurred to ensure staff had taken appropriate action and lessons were learned.
- Relevant policies and procedures were in place to help guide staff.

Using medicines safely

- People received their medicines safely and as prescribed. Medicines were safely stored, administered and

recorded.

- Staff were suitably trained, had the required knowledge and skills and had their competency checked regularly by senior staff.
- The provider had effective systems and checks in place to regularly monitor the safety and quality of medicines management at the home.

Staffing and recruitment

- There were enough staff available to meet people's needs. People said they felt there were enough staff. Comments included, "There's enough staff, people never wait long for help. The staff are on the spot" and "There is plenty of staff. We have a buzzer, staff come right away if I press it."
- Staff were visible around the home throughout our inspection and any call bells were answered promptly.
- Staffing levels were planned and regularly reviewed to ensure people's needs were met safely.
- Staff were safely recruited. Appropriate checks were carried out to ensure new staff were suitable to work with vulnerable adults.

Systems and processes to safeguard people from the risk of abuse

- There were effective systems and processes in place to safeguard people from the risk of abuse.
- People said they felt safe living at the home. Comments included, "I'm safe and happy here. I get on with the staff, they are friendly and kind" and "We're very safe and well-looked after here."
- Staff had received safeguarding training and understood their role in recognising and reporting safeguarding concerns.
- Information and guidance about how to raise safeguarding concerns was displayed in various places at the home and there were systems in place to appropriately manage any concerns raised.

Preventing and controlling infection

- The home was clean and hygienic. Cleaning processes and schedules were in place and cleaning products had been reviewed and amended in response to COVID-19.
- Staff followed the relevant guidance and best practice in relation to infection prevention and control. Staff wore the required personal protective equipment (PPE) and disposed of used PPE safely.
- Staff had received refresher training on infection prevention and control practice, including the use of PPE.
- The home had a COVID-19 testing programme in place for people living at the home and staff.
- Staff and people living at the home had been supported to access COVID-19 vaccinations.

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 requires improvement. At this inspection this key question has remained the same. 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.

Continuous learning and improving care

At our last inspection the provider had failed to effectively assess, monitor and improve the quality and safety of the service being provided. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The effectiveness and organisation of quality assurance processes at the home had notably improved since our last inspection. However, some of the issues we identified during this inspection still had not been identified or addressed by the provider's own quality processes.
- The provider requires further time to fully embed, sustain and develop the improvements made in this area since our last inspection.

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 their duty of candour responsibility

- There was a kind and caring culture amongst staff at the home. Staff interacted with people with kindness and care throughout the day. People appeared content and comfortable in their surroundings.
- People living at the home spoke positively about the staff. Comments included, "All the staff are kind. I know the staff, as we chat and they get to know us and have a laugh" and "Everything is 100%, the staff are extremely kind."
- Staff knew the people they were supporting well and clearly had well-established friendly relationships.
- The provider and senior staff at the service understood their responsibilities regarding the duty of candour and promoted openness and transparency within the service.

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

- Ratings from the last CQC inspection were clearly displayed within the home as required.
- CQC had been notified of all significant events which had occurred, in line with the registered provider's legal obligations.
- There was a range of regularly reviewed policies and procedures in place to help guide staff.

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

- People and their relatives said staff listened to them and involved them in decisions about their care. Comments included, "I can always talk to one of the staff if something was wrong. If there's a problem, I'm always listened to", "I can say if I have a problem, they [staff] fix anything straight away" and "Staff do communicate with us and keep us updated."
- People and their relatives told us they were able to give feedback about their care in regular conversations with staff and during care plan reviews. However, the provider could implement some more creative and proactive methods of seeking and gathering feedback.
- Staff told us they felt well-supported by senior staff and spoke positively about management staff at the home.

Working in partnership with others

- Staff effectively engaged with other health and social care professionals to support people's health and wellbeing.
- Staff sought support and guidance from other organisations and professionals regarding COVID-19, such as the local authority and local infection prevention and control team.