

Laburnum House (Shaw) Limited

Laburnum House Shaw Limited

Inspection report

Laburnum Avenue
Shaw
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23 August 2023

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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

Laburnum House is a purpose built care home situated close to the centre of Shaw, Oldham. Accommodation is provided in single rooms spread over two floors, with access to the upper floor provided by a passenger lift and stair lift. There are large communal rooms on the ground floor and a secure garden. Laburnum House is registered to provide personal care and accommodation for up to 34 people. At the time of our inspection there were 33 people living at the home.

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

People and relatives were complimentary about the service and were very happy with the care and support given at Laburnum House. There were effective safeguarding systems in place and safeguarding concerns were managed promptly. Staff understood their responsibilities in relation to safeguarding and felt comfortable to raise concerns. There were sufficient staff to provide care and support to people promptly and attentively. Staff had been safely recruited. People received their medicines correctly and as prescribed. The home was clean and well-maintained and staff followed good infection control practices.

Staff had received appropriate training and supervision. People were provided with a balanced diet and had their weight monitored. People were helped to maintain their health, and referrals to specialist professionals for advice and support were made when required. 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 received mixed comments about the provision of activities. However, we saw evidence that the service provided a range of activities, including visiting entertainers and celebrations of special events.

People were supported by kind, caring staff who respected their privacy and dignity and helped them be as independent as they could. People and their relatives were able to talk to the registered manager when they wished to, and felt the service was well-managed. The service had governance systems in place which ensured all aspects of the service were reviewed and checked regularly.

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

Rating at last inspection

The last rating for this service was good (published 13 January 2020).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the

service can respond to COVID-19 and other infection outbreaks effectively.

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 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 ●

Laburnum House Shaw Limited

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 was carried out by 2 inspectors 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

Laburnum House 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. Laburnum House is a care home without 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.

Inspection activity started on 23 August 2023 and ended on 4 September 2023. We visited the location's service on 23 August 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We gathered feedback from the local authority and Healthwatch Oldham. 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 (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 looked around the home and observed how staff interacted with people. We also observed the lunchtime meal and the administration of medicines. We spoke with 8 people who used the service and 7 relatives about their experience of the care. We also spoke with the registered manager, deputy manager, a senior care assistant, a care assistant and a housekeeper. We reviewed a range of records. This included three people's care records, medicine administration records and two staff recruitment files. A variety of other records relating to the management of the service were also considered as part of the inspection. These included audits, training and supervision records and checks of the equipment.

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 for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they were happy living at the service and felt safe. One person said, "It's a very nice place. The staff are very good with me." Another told us, "They keep their eye on me here! If I try to get up, there's always someone watching me in case I fall!" A relative told us, "Mum has been here for just over two years. She is well looked after. The staff are confident and capable. They know what they are doing and they go above and beyond the call of duty regularly."
- The provider had safeguarding and whistleblowing policies in place for staff to follow. Staff had received training in how to protect people from harm and abuse and those we spoke with understood their responsibilities around safeguarding.
- The provider and registered manager understood their responsibility to report any allegations of abuse or neglect to the local authority and the Care Quality Commission (CQC).

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

- Risks to people's health, safety and welfare were assessed, documented and kept under regular review. This included consideration of people's nutrition and hydration, pressure care needs and their mobility.
- Annual servicing of the equipment was up to date and regular maintenance checks of the building and equipment had been completed. This included regular checks of the home's fire safety system.
- There were processes in place to record, investigate and monitor accidents and incidents, such as falls and incidents involving people's behaviour. We reviewed a recent incident and found that appropriate action had been taken, including referring the person for specialist equipment.

Staffing and recruitment

- The provider ensured staff were recruited safely and sufficient staff were deployed to meet people's needs.
- The required checks had been completed when new staff were recruited. We reviewed 2 staff files and found all the relevant documentation was in place, including references. Disclosure and Barring Service (DBS) checks had been received. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People and relatives told us staff were attentive and responded quickly to requests for help. One person said, "I would say there are enough staff. Even at night, if I use my buzzer they are quite quick at helping me."

Using medicines safely

- Medicines were managed, stored and administered safely.

- The service used a digital medicines administration system and staff were competent in its use.
- Regular medicines audits were carried out to check practice and ensure standards were maintained.

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.
- A recent inspection by the food standards agency had awarded the home the highest award of 5 stars for food hygiene.

Visiting in care homes

- In line with current government guidance, visits to the service were unrestricted and people were welcome at any time.

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 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

- A thorough assessment of people's care and support needs was completed prior to their admission to the service.
- Staff were kept up to date of changes to people's care and support needs through regular staff handover meetings.

Staff support: induction, training, skills and experience

- People were supported by staff who were competent and well trained.
- New staff received an induction and completed mandatory training and a period of shadowing more experienced staff.
- All staff completed regular training and received supervision.
- The service had recently been involved in a local authority project aimed at enhancing staff skill and confidence in moving and handling people safely.

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

- People's care records contained information on their dietary requirements and preferences and the support they needed to maintain their nutrition and hydration needs. Where people had been assessed as requiring a modified diet or fluids, for example because they were at risk of choking, there was guidance in place for staff to follow.
- People were weighed regularly and advice was sought from health professionals if people lost weight.
- People and relatives were happy with the food at Laburnum House. Comments included, "They are always taking drinks round and there are nice smells at lunchtime when I visit"; "I like the food, there are choices and they offer me drinks regularly" and "The food is okay, if there is anything I don't like, they find me something else."
- There was a pleasant atmosphere throughout the lunchtime meal we observed. Staff were attentive, friendly and alert to people's needs.

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

- The home was generally well-maintained. There were several large communal areas, which were bright and airy with lots of natural light and a secure garden for people to use during fine weather.
- The bedroom furniture in some rooms was rather old. However, the service had an ongoing maintenance and refurbishment programme.
- There was clear, bold signage throughout the service to help those with sight or memory problems find

their way around.

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

- People's health needs were identified in their care records. Referrals were made to external healthcare services when people required support, such as from district nurses and dieticians.

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.

- The service was working within the principles of the MCA and if needed appropriate legal authorisations, or the applications for, were in place to deprive a person of their liberty.
- We heard staff asking people for their consent before assisting them and saw people were supported to make their own choices where able.

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 our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people were supported and treated with dignity and respect and involved as partners in their care.

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

- People and relatives spoke positively about the staff and told us they were treated well by them. Comments included, "Mums been there about four years I'd say. The staff are absolutely brilliant. I can't recommend the place highly enough"; "Mums care is excellent. Staff are very attentive and on the ball"; "The staff are lovely and very helpful. It's nice when they (staff) are familiar faces" and "Mum has been in hospital three times and the staff have been in to see her there in their own time which is lovely."
- People looked comfortable and relaxed with the staff and staff regularly stopped and chatted with them. One relative told us, "Staff will make time for a chat and sit with people. They are very pleasant and seem very caring."

Respecting and promoting people's privacy, dignity and independence

- People were addressed by staff in a warm, polite, and respectful manner.
- Staff took steps to promote people's privacy, dignity, and independence. For example, we saw staff knocking on people's doors before entering their rooms. We saw staff supporting people to walk with their walking frames, giving gentle encouragement and a helping hand when needed.

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

- Staff supported people to make decisions about their day-to-day care and support, such as what they wanted to eat and drink, and what they would like to wear.
- When possible residents contributed to the interviews for new staff and gave their opinion on who they thought would be suitable.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. At this inspection the rating has remained good. 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

- Staff knew people well. Care plans were detailed and provided staff with guidance and information on how people wanted to receive their care.
- Relatives spoke highly of the care and support provided. One relative told us, "Mum moved in at the end of January. She has had depression and a couple of falls, but they have handled everything really well."

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

- We received mixed comments about the activities at the service, with some people feeling there was not enough to do. However, we saw evidence that the service put on a number of activities, such as a fitness class twice a month and a monthly music therapy class with visiting musicians. In addition, staff encouraged people to take part in board games and quizzes, movie sessions and celebrations of special events. Several people had visited a local primary school to talk to children about their experiences of the second world war. A trip to Blackpool to see the illuminations had been enjoyed by 12 people, staff and families.
- The service had recently been offered a grant to develop a music/sensory room.
- Where people had a specific faith, the home ensured people were able to continue observing this. A local priest visited the home regularly to hold a religious service.
- Although the service did not employ an activities coordinator, several of the care staff were trained to organise an activity programme.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were assessed when they first moved to the home and were kept under review.
- People's care plans documented their communication needs and explained how staff could work with them to ensure good communication.

Improving care quality in response to complaints or concerns

- There was an effective process in place to deal with any complaints.

- The service kept records of any complaints, investigation, the actions taken to address the concerns and a written response to the complainant.
- People and relatives told us they would feel able to complain if they needed to. One person said, "If I did have a complaint, I'd be comfortable telling the manager. It's not a bad little place and the staff will help you." Another person told us, "The manager is approachable, nice and easy to talk to. I've no complaints. If anything was bothering me I'd be able to tell them."

End of life care and support

- Staff had received training in end-of-life care. This prepared them to support people coming towards the end of their life, in a dignified and caring way.
- The service worked closely with community health professionals to care for people as they approached the end of their lives.

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

- Everyone we spoke with praised the care and support provided at Laburnum House.
- Staff described positive teamwork within the service and an open and supportive culture.
- Relatives were very complimentary about the way the service was managed. Comments included, "(The manager) is very approachable. She will always talk things through and has time for people. She also has a couple of good deputies. They are all very caring. The place is always spotless and I've no complaints about anything." And, "(The manager) keeps us involved every step of the way. I'm extremely happy with everything and I've never had to go to the office once in four years."
- People's health needs were regularly reviewed, and staff worked well with external health and social care professionals. We saw email feedback from a visiting health professional who described Laburnum House as a 'welcoming environment'.
- Relatives were able to give feedback through care reviews and through meetings. One relative told us, "They do have relative's meetings, which are like a forum and you can have your say."

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

- The registered manager had effective oversight of the service.
- Regular audits and checks were carried out by the registered manager and senior staff. These were used to review the quality and safety of the service.
- Information was prominently displayed in the corridors and foyer area for staff, people and relatives. Photo boards displayed photographs of past celebrations and information boards on infection control and oral health provided guidance and promoted understanding of these important issues.

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 had kept the CQC informed of incidents that had taken place in the service and understood their duty of candour responsibilities.
- Action was taken when incidents or complaints were raised. Action included apologies when this was appropriate.