

Voyage 1 Limited

Greenfields Lodge

Inspection report

152A Stockton Road
Hartlepool
Cleveland
TS25 5BQ

Tel: 01429232892

Website: www.voyagecare.com

Date of inspection visit:

16 December 2022

19 December 2022

Date of publication:

24 January 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Greenfields Lodge is a residential care home which provides short stay respite services, including personal care, for up to 7 people at any one time. The service provides support to people with a learning disability, and/or a physical disability and/or autistic people.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support:

The service gave people care and support in a safe, clean, well equipped, well-furnished and well-maintained environment that met their sensory and physical needs.

Staff focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life.

Staff supported people to make decisions following best practice in decision-making. Staff communicated with people in ways that met their needs.

Right Care:

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to their individual needs.

Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it.

The service had enough appropriately skilled staff to meet people's needs and keep them safe.

People's care, treatment and support plans reflected their range of needs and this promoted their wellbeing and enjoyment of life.

Right Culture:

Staff placed people's wishes, needs and rights at the heart of everything they did.

People and those important to them, including advocates, were involved in planning their care.

Staff evaluated the quality of support provided to people, involving the person, their families and other professionals as appropriate.

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 27 July 2017).

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.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Greenfields Lodge on our website at 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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Greenfields Lodge

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

One inspector carried out this inspection.

Service and service type

Greenfields Lodge 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. Greenfields Lodge 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 activity 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 was in post and had submitted an application to register. We are currently assessing this application.

Notice of inspection

We gave the service 2 hours' notice of the inspection. This was because we did not want to cause anyone

who used the service any distress by attending unannounced.

Inspection activity started on 16 December 2022 and ended on 21 December 2022. We visited the service on 16 December 2022 and 19 December 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 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. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people who used the service and 1 relative about their experience of the care provided. We spoke with 6 members of staff including the manager, the operations manager and 4 support workers. We received written feedback from a further 4 support workers.

We spoke with 1 professional who worked closely with the service and received written feedback from a further 3 professionals who worked closely with the service.

We reviewed a range of records. This included 3 people's care records, 2 staff recruitment files and multiple medication records. A variety of documents relating to the management of the service, including policies, audits and training records, 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. 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 were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so.
- Staff had training on how to recognise and report abuse and they knew how to apply it.
- People told us they enjoyed attending the service and said they felt safe there. One relative told us, "The care is exceptional and [person] loves all the staff. We can rely on them."

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well. One professional told us, "The support provided balances a nurturing safe environment with a framework that promotes people to become more independent and have aspirations in their life."
- Appropriate risk assessments were in place for people, which considered possible hazards, control measures and additional precautions for staff to take. Information about risks to people was consistently and accurately recorded throughout their support plans. Staff kept accurate, complete, legible and up-to-date records, and stored them securely.
- Staff managed the safety of the living environment and equipment in it well through checks and action to minimise risk. Health and safety and maintenance checks were completed and up to date.

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.

Staffing and recruitment

- The service had enough staff, including for one-to-one support for people to take part in activities and

visits how and when they wanted.

- The numbers and skills of staff matched the needs of people using the service. The manager had a robust system in place to ensure staffing was appropriate, taking into account who was using the service at any given time.
- Staff recruitment and induction training processes promoted safety. Appropriate pre-employment checks were carried out to ensure suitable persons were employed. One staff member told us, "My induction was good, and I received plenty of support and everything I needed."

Using medicines safely

- Medicines were managed safely. People were supported by staff who followed systems and processes to administer, record and store medicines safely.
- People received their medicines as prescribed. Where medicines were prescribed on a 'when required' basis, clear and detailed guidance was in place for staff around the use of these medicines.
- Staff made sure people received information about medicines in a way they could understand.

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.
- There were no restrictions on visiting at the time of the inspection.

Learning lessons when things go wrong

- People received safe care because staff learned from safety alerts and incidents.
- The provider managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately and the manager investigated incidents and shared lessons learned with staff.

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

- The service was well-led. Management were visible in the service, approachable and took a genuine interest in what people, staff, family, and other professionals had to say.
- The manager worked directly with people and led by example. One professional told us, "[The manager] leads her team by example, bringing out the best in all of them, nothing is a problem to her, and she ensures everyone in her care gets the best possible support."
- Staff felt respected, supported and valued by senior staff which supported a positive and improvement-driven culture. One staff member told us, "The manager listens to us as a team and as individuals, as well as having a great care ability for the people we support and their families, she is always around if we need her and we have a great staff team due to this."
- Management and staff put people's needs and wishes at the heart of everything they did. One relative told us, "[The manager] is a gem. We couldn't do without them."

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

- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support. The manager and the provider carried out frequent and robust quality assurance audits. Both the provider and the manager had good oversight of the service.
- Staff were committed to reviewing people's care and support on an ongoing basis as people's needs and wishes changed over time. Regular and thorough reviews were carried out involving people and their key staff members.
- The provider kept up to date with national policy to inform improvements to the service.
- Staff gave honest information and suitable support to people and their relatives, and applied duty of candour where appropriate.

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

- Staff encouraged people to be involved in the development of the service. People and those important to them were supported to give feedback and be involved in decisions. Feedback was used to develop the

service.

- Staff had multiple opportunities to express their views, offer suggestions and provide feedback. Staff had regular handovers, meetings and supervisions. One staff member told us, "The supervisions allow us to voice our concerns and also gain feedback needed to improve within our roles."
- The manager and staff engaged and worked well with others. One professional told us, "The staff always have a caring and compassionate approach and are great at keeping in touch with myself and other relevant professionals."