

Melba Lodge Limited

Melba Lodge Limited – 16 Heverham Road

Inspection report

16 Heverham Road
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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 

Overall summary

This inspection took place on 13 May 2015 and was unannounced.

Melba Lodge also known as 16 Heverham Road is a residential care home that provides accommodation and support for up to four people with mental health needs.

We last inspected Melba lodge in December 2013. At that inspection we found the service was meeting all the regulations that we assessed.

There was a registered manager in post at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Summary of findings

People using the service told us that the home met their needs and said they felt safe living there. Each person said there were enough staff available to support them and that the staff were kind and caring towards them. Relatives and carers were positive about the service being provided and said they could visit at any time. There was a relaxed, friendly and homely atmosphere when we visited. We saw there were systems and processes to protect people from the risk of harm and staff were aware of safeguarding procedures.

People were being supported to develop the skills they needed to live independently. They were supported to take responsible risks and make their own choices in their daily living activities. They said they enjoyed the food provided at Melba lodge and were able to make choices about what they ate each day. Staff supported them with shopping and cooking to help them become more independent.

The service understood and complied with the requirements of the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS). There were no restrictions on people using the service and they were able to go out when they wanted.

People were supported to have their health needs met. Staff at Melba Lodge worked with other healthcare professionals and obtained specialist advice as appropriate to help make sure individual health needs were met. We saw that people's prescribed medicines were being managed safely and stored securely.

There was a system in place for dealing with people's concerns and complaints. People we spoke with told us that they knew how to complain and felt confident that staff would respond and take the appropriate action.

The registered manager understood their role and responsibilities and positive feedback was received from people and staff about their leadership. There were effective systems in place to ensure the safety and quality of the service provided at Melba Lodge.

Summary of findings

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. There were enough staff to meet people's needs and to ensure their safety and welfare.

Identified risks to people's safety and welfare were being managed appropriately.

Medicines were being stored securely and managed safely.

Appropriate recruitment policies were in place.

Good



Is the service effective?

The service was effective. The registered manager ensured staff were up to date with their training requirements and had the knowledge and skills to meet people's needs.

People were able to choose what they wished to eat and drink. Staff supported people to prepare and cook their meals.

The service complied with the requirements of the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS).

Staff supported people to access healthcare services to help make sure their physical and mental health needs were met.

Good



Is the service caring?

The service was caring. Staff knew people well and worked to ensure their privacy and dignity.

People made decisions about the care and support they received. Staff provided support in line with people's wishes.

Good



Is the service responsive?

The service was responsive. Staff were knowledgeable about people's care and support needs.

People were supported to lead active lives and to maintain contact with people who were important to them.

People using the service felt able to raise concerns or complaints and knew how to do this.

Good



Is the service well-led?

The service was well-led. There was a registered manager in post who was visible and approachable. Staff felt supported in their role and said they did not have any concerns about the service.

There were systems in place to monitor the quality of the service and make improvements where needed.

Good



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Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Before the inspection we looked at all the information we had about the service. This information included the statutory notifications that the provider had sent to CQC. A notification is information about important events which the service is required to send us by.

This inspection took place on 13 May 2015 and was unannounced. One inspector conducted the inspection as there were only four people living at the home.

During our inspection we spoke with four people using the service, two care staff and the registered manager. We observed care and support in communal areas, spoke with people in private and looked at the care records for two people. We also looked at records that related to how the home was managed.

We received feedback from the relatives and carers of people using the service by email and telephone following our unannounced inspection.

Is the service safe?

Our findings

The people using the service told us that they liked living at Melba Lodge and felt safe there. One person said, “I’m very happy, the staff are very friendly.” Another person commented, “Everything is alright, they treat me well here.” One relative or carer commented that the person was in “a really good safe place”. Another relative or carer commented, “They look after [the person] well.”

There were sufficient staff available to meet people’s needs. People said there were staff available to support them when required. The service was staffed 24 hours a day, seven days a week with one staff member on duty on the day of our visit with the registered manager available to support them as required. Staff told us that the staffing levels were adequate to support people safely as the majority of individuals were independent in their activities of daily living.

One staff member commented, “We make sure people are safe, we can speak to the manager about anything.” Records showed that staff completed safeguarding training and staff spoken with said they were confident that the registered manager would respond appropriately to any raised concerns. They were aware of the different types of abuse along with the action to be taken to report any concerns. The home had an up to date safeguarding policy available for reference that detailed the information and action staff should take. The registered manager confirmed that there had been no safeguarding issues in the last 12 months.

Care plans included assessments of any risks associated with people’s care, daily routines and activities. People and

staff told us that they were encouraged to be independent and were able participate in activities in and outside of the home environment. One person commented, “There are no restrictions, I can help with the cooking, I can go out when I want.” A staff member said, “We allow them to be independent, we do look at the risks and give advice or guidance.” A written risk assessment was completed for each person using the service and they had signed to show their agreement with the content.

There were effective procedures for reporting and investigating accidents and incidents. Incident or accident reports documented the action taken by staff, a review of what took place and any underlying causes and the amendments required to people’s risk assessments and care plans. The registered manager reviewed and signed off each completed report.

People told us that they were given the support they needed to take their prescribed medicines. Medicines were stored securely and records showed that people were supported to take their medicines as prescribed. The administration charts we looked at were fully completed and our random checks of the quantities of prescribed medicines found them to be correct.

The home was maintained well and clean. One person told us, “It’s warm and comfortable” and another individual commented, “I’ve got my own lockable cabinet in my room, it’s all five star.”

Staff undertook regular health and safety checks to make sure equipment was working and a safe and suitable environment was provided for people. Weekly management audits took place to make sure these important safety checks were taking place.

Is the service effective?

Our findings

People using the service said they were able to be independent and were being supported to learn activities such as cooking for themselves. One person said, “I’m learning to cook” and another person commented, “I help cooking and I go out shopping.”

The registered manager told us that the service was not a home for life with the emphasis placed on quality of life, building confidence and independence. Staff told us, “They come and we move them along. We pro-actively teach them and help them gain self-confidence.” A relative or carer commented about one person saying, “They have thrived and evolved from a young adult who was highly dependent on staff to a person who has learnt how to swim, goes shopping for them self, and who has learnt to manage their problems.” Another relative or carer said, “They have come on leaps and bounds since they have been there.”

Staff had the skills and knowledge to support people effectively. Staff said they received the training they needed to support people and meet their assessed needs. One staff member told us, “I had an induction including training on Safeguarding. We talked all about the people who live here and I saw their care plans.” Records showed that staff had undertaken training across a number of areas including safeguarding adults, health and safety, medication and food hygiene. Staff also received training in topics specific to the needs of people using the service, for example, around autism, learning disabilities, mental health and dementia.

Staff were supported effectively in their job role. The registered manager undertook six weekly supervision sessions with staff to review how they were getting on in their job role and look at any training needs to help ensure the quality of care and support provided.

Staff also received training in the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS). The MCA is a law about making decisions and what to do when people cannot make some decisions for themselves. The DoLS protect people when they are being cared for or treated in ways that deprive them of their liberty. Staff told us that people using the service had capacity and retained choice and control over what they did each day. At the time of our inspection, there were no restrictions on people using the service and they were able to go out when they wanted. One person told us, “They don’t stop me from going out” and another person commented, “There are no restrictions here, I can go out any time.”

People told us they were involved in choosing their meals and were able to participate in shopping and meal preparation. One person said, “We choose the dinners, I go with the staff to the shops.” Another person told us, “It’s good, all healthy food, we can make a choice.” The menus were planned on a weekly basis with each person able to help choose the main meals with alternative dishes planned as required. We saw examples where people prepared their own snacks and chose to take their meals at different times from other people. Care plans recorded information about each person’s food and drink preferences along with any special dietary needs.

People were supported to access their GP and other healthcare professionals. People confirmed that they were supported to make appointments with their doctor when they needed to. People’s individual health needs were included in their care plans to ensure they received the support they required to have their needs met. For example, one person was diabetic and records showed that staff supported them to attend clinics as appropriate.

Is the service caring?

Our findings

A relative or carer told us, “The staff and manager have gone out of their way to cater towards [the person’s] complex needs.” Another relative or carer said, “[The person] is very happy there, I have no complaints at all.”

All the people we spoke with said they were happy with the support provided at Melba Lodge. They said staff encouraged and supported them to make decisions and be in control of their daily lives. Each person commented about the caring attitude of the staff and confirmed that they were treated with dignity and respect. One person said, “They look after me, five star care.” Another person commented, “The staff are nice here” while a third person said, “They’re great, they’re caring. I’m happy with the care.” We saw that staff respected people’s privacy and knocked on people’s doors. Staff made sure they had permission before entering their room.

Staff had a good knowledge of people’s individual needs and told us they had read the care plan for each person. One staff member talked about one person’s individual needs and how they supported them providing assistance and prompts when required. For example, when supporting the person with cooking or reminding them of

an appointment. Throughout our visit, we observed that people went out when they wanted to and organised their own time. A staff member said, “They make choices, they say what they want.”

People using the service had signed their risk assessments and care plan to indicate they agreed with the support provided to them. Comments in their own words were added to each care plan giving their view of the support they wanted. A key worker system was used to make sure each

One person told us, “I meet with my key worker regularly and I have signed my care plan.” Another person said, “I’ve seen my care plan and I am happy with it.”

Regular meetings were held to obtain the views of people using the service. The meetings were used to discuss the planning of outings, parties and to make sure people were satisfied with the support provided. One person spoke about their Birthday celebrations and how they had planned these with the staff at the home. The meetings were also used to give information to people using the service about the care and support provided. For example, the safeguarding vulnerable people procedures and how people could raise any concerns should they have any.

Is the service responsive?

Our findings

Each person had their own timetable of activities including work placements and activities along with activities of daily living such as meal preparation and laundry. People told us they were able to access the local amenities freely and said the home organised an activity each week for them on a Friday. One person said, “We go on trips, to Bluewater and the cinema.” Another person commented, “We go out on a Friday, I would like to do more trips out.”

One staff member told us “They go out for shopping, for walks and for trips each week.” Two people were out at their work placements when we visited, returning later for their evening meal. Daily notes seen included references to people going out, birthday parties held and the encouragement given with cooking and personal care tasks. Written feedback in surveys from people using the service included positive comments about trips and parties that had taken place in recent months.

Each person had an up to date care plan addressing areas such as their mental and physical health. Each plan included the support required for the person and the goals set with them. Staff spoken with were aware of the content of care plans and said up to date information was also shared at the daily handovers and in staff meetings. Records showed that people and their relatives or carers

were involved in reviews and information was provided to commissioners about the progress of their clients. Feedback seen from one professional stated, “The placement has gone very well and their mental health is now stable.”

Information about the complaints procedure was included in a guide about the home and in the induction when someone first came to use the service. People told us that they felt comfortable in raising any issues or concerns. They said that the registered manager and staff would listen to them and take action. One person said, “I’d tell the manager, she gets things sorted.” Another person stated, “I’m able to talk to the manager” and another person commented, “No problems, you can talk to the manager.”

A complaints and suggestions policy was in place and this included templates for people to make any concerns or comments known to the service. We saw that no complaints had been made in the last 12 months.

People were supported to maintain contact with relatives and friends. One person told us, “I see my relative every week.” Relatives said they were able to visit the service and were made to feel welcome. Visitors were encouraged to leave feedback after each visit and recent comments included, “welcoming and friendly” and welcoming, great atmosphere”.

Is the service well-led?

Our findings

People using the service were positive about the registered manager and staff team. One person commented, “There are no problems, the staff are nice, the manager is nice, everything is alright.” A relative or carer commented, “The manager has been exemplary in employing the right staff, and in personally providing the care and support [the person] has required to prepare them towards independent living.”

The registered manager communicated a strong person centred ethos throughout our inspection of Melba Lodge. We saw that she was in regular contact with people, visitors and staff and demonstrated her in-depth knowledge of the service. Staff we spoke with said the registered manager was available when they needed her and that she supported them to improve their skills and knowledge. One staff member told us, “You can speak to her about anything.” Another staff member commented, “She wants the best service for the clients” and said they could discuss any issues with her.

Regular staff meetings were held that enabled staff to discuss issues and keep up to date with current practice. Minutes from previous team meetings included discussion around people using the service and discussion of particular areas such as Safeguarding, medicines or health and safety. Staff said the team worked well together and they felt supported by their colleagues. One staff member told us, “The service here is second to none.”

The provider also sought feedback from people using the service about what they thought of the quality of care and

support they received. People’s views were sought through regular meetings but also through questionnaires that were supplied regularly to people using the service, relatives or carers and other professionals. Typical comments seen included, “They put the service user at the heart of the service”, “Well run friendly care home” and “[The person] continues to make good progress.” A book was used to capture feedback from visitors and recent comments made included, “welcoming and friendly” and “I’d give Melba Lodge 100%.”

The home also had systems to regularly check the quality of the service provided and make sure any necessary improvements were made. For example, regular checks were carried out on the medicines to make sure staff were following the correct procedures and people were receiving their medicines as prescribed. The building was regularly checked to make sure that it was safe and well-maintained and individual financial records audited to ensure they were accurate. We saw action was taken where any issues or shortfalls had been identified.

The registered manager subscribed to professional publications and websites in order to help ensure their practice was up to date. Staff were being provided with training around new care legislation and the registered manager continued to attend training courses to develop their own knowledge.

Certificates showed that the registered manager and her staff had signed up to the Social Care Commitment where they had made a pledge to continually strive to deliver high quality care. This is the sector’s promise to provide people who need care and support with high quality services.