

Pretim Singh

Wortley Lodge

Inspection report

26 Wortley Road
East Ham
London
E6 1AY

Tel: 02084729974

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25 May 2023
13 June 2023
16 June 2023

Date of publication:
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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

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.

About the service

Wortley Lodge is a residential care home registered to provide accommodation and personal care support for up to 3 people with a learning disability or autistic people. At the time of the inspection 3 people were using the service.

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

Right Support: People were kept safe while living at Wortley Lodge and when they accessed their local community. There were enough staff to meet people's needs. People had risk assessments to reduce their known risks and staff followed these and were knowledgeable of people's needs. Care was regularly reviewed, and staff worked well with the management team and external health professionals to provide information to plan care. 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.

Right Care: Staff were kind and respectful, people had built trusting relationships with care staff and the management team. Staff at Wortley Lodge were welcoming and did not discriminate against people living in the home. Staff knew how to identify and report potential abuse.

People's privacy and dignity was respected. Independence was supported and encouraged. Staff received full training and support to enable them to provide good care to people that met their needs. People's dietary requirements were met and choices of meals and drinks were respected.

Right Culture: Managers were supportive of their staff and complimentary of the commitment they had to the role and the people they supported. The atmosphere was warm and people were observed to be relaxed with staff who supported them. The management team performed regular audits of the service to ensure standards were being met and that people received good health care support.

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 16 April 2018).

Why we inspected

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

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well led.

Details are in our well led findings below.

Wortley 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.

Inspection team

The inspection was carried out by 1 inspector.

Service and service type

Wortley 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. Wortley 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 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 and an additional manager who have been referred to as the management team.

Notice of inspection

This inspection was unannounced.

Inspection activity started on 25 May 2023 and ended on 16 June 2023. We visited the location's service on 25 May 2023.

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 the registered manager and another manager, 1 staff member, 3 people who lived at the home, 1 relative and 1 external health professional. We reviewed 3 people's care records including risk assessments and medicine records. We looked at 3 staff files in relation to recruitment and staff supervision, and a variety of records relating to the management of the service.

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 protected from the risks of potential abuse.
- A relative told us their family member was kept safe and they had no concerns about their safety. They said, "They [staff] do everything they can to keep [person] safe."
- Staff were aware of the procedures to follow should they suspect or witness abuse. They told us they would report concerns to the registered manager or deputy in the first instance.
- Staff at the home knew how to whistleblow if they felt appropriate action to protect someone from abuse was not being taken.

Assessing risk, safety monitoring and management

- People had appropriate risk assessments in place to reduce the risk of harm they may face.
- Risk was assessed when people began to use the service and this was monitored regularly to ensure any new risks were managed to keep people safe. Reviews of risk were carried out when changes were identified and involved people's relevant health professionals as required.
- Health and safety checks were carried out within the home to protect people from potential hazards, these included fridge and freezer temperature checks, hot water checks, legionella testing, gas safety and portable appliance testing checks.
- Records confirmed fire safety checks were completed and the home was updating their internal fire safety system to further ensure people were protected in the event of a fire.
- We viewed records that showed fire drills took place and each person had their own personal emergency evacuation plan.

Staffing and recruitment

- There were enough staff to meet people's needs safely.
- Records and observations confirmed there were enough staff on duty to provide safe care, treatment and support people to go into the community.
- Safe recruiting practices were followed and the home recruited staff in line with their policy and procedure.
- We viewed staff recruitment records and these showed staff were interviewed for suitability to the role and had provided the appropriate documentation before starting work, this included references, proof of identification and a disclosure and barring service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People were supported to receive their medicines safely.
- Staff had been trained in the safe administration of medicines and staff competence was checked during their supervision. A medicines policy and procedure was in place to support staff.
- We checked medicines within the home and found them to be stored correctly. Audits of medicines were performed weekly.
- People had appropriate 'as required' medicine protocols which told staff the circumstances when this type of medicine should be given.

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.

Visiting in care homes

There were no restrictions on visits to the home. People's relatives were free to visit when they wished.

Learning lessons when things go wrong

- Systems were in place to learn when accidents, incidents and mistakes happened at the home and for the provider and staff to all learn from them.
- Records confirmed no accidents had occurred at the home. The management team wanted staff to be able to report to them if there were any accidents or incidents within the home and staff knew this responsibility as part of being open and transparent. Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

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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. The rating for this key question 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

- People's care needs were assessed before they began to live at the home to ensure their needs could be properly met.
- Records confirmed people's health needs and choices were taken into consideration in order for the home to plan and provide care.
- The management team told us they worked with people, people's relatives and health professionals to provide a care package which fully covered their individual needs.

Staff support: induction, training, skills and experience

- Staff received a comprehensive training programme which provided them with the appropriate skills to do their job and support people well.
- Feedback from a relative and a health professional was positive when they described the skills staff had to support people at the home. A relative said, "They are very good and have the skills." A health professional said, "I have found them [staff] to be knowledgeable about the people they support."
- Records confirmed staff had completed the care certificate and completed mandatory training relevant to their job role. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- Staff gained practical experience from on the job training and completed mandatory training courses relevant to their role, these included; first aid, learning disabilities, autism, epilepsy, dementia, moving and handling and food hygiene.
- Staff told us they were well supported and received regular supervision from the management team and an annual appraisal as required, records confirmed this.

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

- People were able to enjoy a balanced diet and have enough fluids to stay healthy.
- People were offered choices of meals through a weekly pictorial menu. Alternatives were available if people wanted something different to eat.
- Where people required meals to be prepared in different textures, guidance was provided from the speech and language therapist on how to do this.

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

- The home was suitable to meet people's individual needs and people's personal rooms decorated to their

taste which included displaying their own personal items and personal photographs.

- The home was observed to be homely and welcoming. The home had use of a generous outdoor space which was fully accessible. Rails were in place to support people to access the garden space safely. The management team informed us this was done to ensure people could move around the outdoor space independently.

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

- People's health needs and the relevant health professionals involved in their care was recorded.
- The management team had established good links with each health professional involved in people's care and arranged health appointments for people when they needed healthcare support.
- Records confirmed people were accessing their gp, advocate, social worker, dentist, community learning disability team, optician and occupational therapist as required.
- The management team ensured people were prepared for accessing health appointments especially if it was an appointment that could cause anxiety, by carrying out a practice journey and by showing people pictures of the environment they would be attending.

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.

- Consent to care and treatment was requested before care was provided.
- Where people were unable to consent, the home arranged for best interest meetings to take place with people's health professionals.
- Staff asked people for their permission before providing care and did not force people to do something they did not want to.
- Staff completed MCA training. Staff told us they helped people make their own decisions by showing people different options, for example clothing.

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. The rating for this key question 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

- Staff at the home were kind towards people they supported, showed compassion and patience.
- We observed staff spoke respectfully to people and offer people reassurance in the form of holding their hands. We could see people who could not use words to speak smile when this gesture was offered.
- Staff told us they were happy to be doing this role, a member of staff said, "I love what I do I love to bring joy and help people."
- A relative was happy with how their family member was treated, they said, "I just want them to keep doing what they are doing. [Person] is so happy there, [staff] treat them so well."
- Staff received equality and diversity training and understood to treat people as individuals and not to discriminate.

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

- People were involved in making decisions about their care to ensure their voice was heard. This was achieved through face to face discussions between staff asking people what they needed from care.
- Records confirmed house meetings took place and provided an opportunity for people to share their views about their care.
- Staff took the time to listen and ask people what they liked to do or activities they wanted to plan. This showed staff were taking an interest in people's lives. To ensure everyone was able to take part, staff told us they showed people objects of reference and pictures to help.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity was respected by staff supporting people.
- Staff encouraged people to maintain their independence, records confirmed 1 person was able to make their own sandwiches without staff support.
- During personal care staff told us they closed doors and curtains. A member of staff said, "We are having work carried out so we make sure all the personal care is done before [contractors] are here. I also knock on their [people's] door before entering to ensure it is alright to enter."

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. The rating for this key question 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

- People's care plans were prepared to meet their individual needs.
- Records confirmed people's likes and dislikes were recorded in their care plan. Information about their background, religion, activities they enjoyed and people who were important to them were recorded.
- Staff told us care plans told them about the person they were supporting and they also learnt about people's unique needs after spending time supporting them.
- Relatives told us they were involved in planning care and were contacted about changes in their family member's needs. A relative said, "They tell me everything, any changes to [person's] care they call me."
- A health professional said, "Staff showed good awareness of people's preferences and were person centered when supporting them."

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 clearly documented within their care plans.
- Records confirmed what we observed during our inspection, people were given time to express what they needed to say and where people did not use words to communicate, staff observed people's body language, sounds made and gestures used to understand what was being communicated.
- The management team told us they were able to provide information for people in different formats such as alternative language, pictorial, large font and braille if the need arose.

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

- People were supported to engage in activities they enjoyed and to spend time with people who were important to them.
- Records confirmed people were able to participate in a number of different activities of their choosing, these included, beauty therapy, going to the pub, visiting friends, local community projects, short holiday breaks and discos.
- Relatives were encouraged to visit and spend quality time with their family member.

- The home planned short holiday trips for people to visit the seaside with a member of staff. A member of staff understood the importance of this social interaction as some people may not have relatives to visit them.

Improving care quality in response to complaints or concerns

- People were supported to make a complaint if they were not happy with an aspect of their care.
- People who needed support had use of an advocate who made complaints on their behalf.
- There were systems in place to report and respond to complaints and advice on who to approach if the outcome was not to people or their relatives satisfaction.
- Relatives we spoke with told us they were pleased with the care provided and did not wish to make a complaint but knew how to.

End of life care and support

- People's end of life wishes were respected and documented in their care plans, records confirmed this.
- No one currently required end of life care or support, however all staff were aware of people's choices when the time came should they need this type of care. The management team were aware they could contact health professionals for additional support.

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 atmosphere at the home was warm and inviting and promoted people's well being.
- Relatives were positive about the management of the home. A relative said, "They do absolutely everything for [person], their quality of life is the best it can be."
- Staff told us they worked well with the people they supported and were positive about the support they received from the management team. A member of staff told us they could approach the managers whenever they needed guidance.
- The management team told us they operated an open-door policy and staff and people living at the home were able to speak to them whenever they needed care and support. The registered manager said, "Staff can come and speak to us at any time, we have open communication. If there is something they don't understand we talk about how to rectify it."

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 management team knew what it meant to be open and transparent and their responsibility under duty of candour.
- The registered manager said, "We have to be accountable and notify the relevant people. If we don't and they find out, they'll say why didn't you tell us?"

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

- The management team and staff were clear about what was expected from their job role.
- Records confirmed monthly staff meetings took place, these provided staff with the opportunity to discuss the care being provided to people, any upcoming health appointments people had and any training they needed to complete.
- Records confirmed a quarterly audit of the home was performed which checked a number of areas and included whether people's care plans were up to date, safe staffing levels to meet people's needs and whether safe recruitment had taken place.
- Monthly spot checks and medicines audits were also performed, and any actions were documented for the management team to follow up. All this was done to assure the management team that people were receiving quality care and staff were supported accordingly.

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

- The service asked for the views from people, relatives, staff and health professionals to help them improve the service.
- Information was presented to people in an accessible format so that people understood what was being asked, this included picture format. Staff would observe people's body language and sounds made to determine if they were happy with the care provided.
- A relative told us they were asked if they were pleased with the care being provided and that they were always included when information was being shared and this was appreciated.

Continuous learning and improving care; Working in partnership with others

- The management team and staff welcomed continuous learning and development and worked well with external health professionals.
- The registered manager told us they readily contacted the nurse if they had anything complex in relation to people's care, so they could all work together and resolve the matter.
- Policies and procedures were continually being updated to ensure all working at the home were following the correct guidance.