

Mr Neil Bradbury

Cypress Lodge

Inspection report

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Date of inspection visit: 19 August 2015
Date of publication: 06/10/2015

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 19 August 2015 and was unannounced. The previous inspection of Cypress Lodge was on 10 October 2013. There were no breaches of the legal requirements at that time.

There was a registered manager in post. 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.

Cypress Lodge provides care and accommodation for up to 10 people with a learning disability. There was a main house with accommodation for six people. A smaller property in the grounds, known as Willow Cottage, had places for four people.

People received a service that was safe. Risks to people were assessed and plans put in place to reduce these. Checks were carried out on staff to confirm they were safe to be working with people at the home.

Summary of findings

Staff received training and support which helped them to do their jobs well. People's rights were protected because staff understood their responsibilities in relation to the Mental Capacity Act 2005. Staff supported people in ways which promoted their independence.

People spoke positively about Cypress Lodge and their relationships with the staff. One person told us "I enjoy living here, the staff help me with things". A staff member commented "It's important to remember that this is people's own home".

Staff helped people to maintain good health and advised people about healthy eating. People took part in activities they enjoyed and went out into the local community. Meetings were arranged when people could talk about the day to day arrangements and discuss any concerns.

Overall, people benefited from a well run home. There were systems in place for monitoring the service and for identifying where improvements could be made.

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.

Risks to people were being assessed and action taken to reduce these. Staff had received training in protecting people from abuse and knew to report any concerns they had about people.

Procedures were in place to check that staff were safe to be working with people. Staffing levels were kept under review so that people received support which met their needs.

People received support with their medicines and these were being safely managed.

Good



Is the service effective?

The service was effective.

Staff received training and support which helped them to do their jobs well. People's rights were protected because staff understood their responsibilities in relation to the Mental Capacity Act 2005.

Staff were well informed about people's needs and provided support which helped people to maintain their health.

People enjoyed the meals and took an active part in their preparation.

Good



Is the service caring?

The service was caring.

People spoke positively about the staff who supported them. Staff helped people to maintain good relationships with those they lived with.

People were given the opportunity to talk about any concerns and to make decisions about their support.

Staff supported people with activities they enjoyed and were of interest to them.

Good



Is the service responsive?

The service was responsive.

People's needs were kept under review. They talked to staff about changes in support and their plans for the future.

People had regular contact with the local community and used a range of leisure facilities. Staff supported people in ways which promoted their independence.

People had the opportunity to pass on their views about the service.

Good



Is the service well-led?

The service was well led.

The registered manager was approachable. Staff were well supported and felt able to discuss any concerns.

Good



Summary of findings

Procedures were in place for ensuring the service was safe for people and was meeting their needs.

Cypress Lodge

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.

The inspection took place on 19 August 2015 and was unannounced. The inspection was carried out by one inspector.

Prior to our inspection we reviewed the information and notifications we had received about the service. A notification is information about important events which the provider is required to tell us about by law. We also

received a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

Health and social care professionals were contacted in order to gain their views about the service. We received comments from one of the professionals we contacted.

During our inspection we spoke with four people who lived at Cypress Lodge. We made observations throughout the day in order to see how people were supported. We spoke with the registered manager and with three staff members.

We looked at three people's care records, together with other records relating to their support and the running of the service. These included staff employment records and records in relation to quality assurance.

Is the service safe?

Our findings

People told us they felt safe living at Cypress Lodge. They said they could talk to the registered manager or to one of the staff if they had any concerns. One person said it was important for them to have staff around, as this made them feel less anxious. We saw that staff were readily available to support people and to respond to their needs. Staff told us the staffing levels were sufficient to maintain a safe service for people.

The deployment of staff was kept under review to ensure this was meeting people's needs. The registered manager described a planned approach, which was based on a minimum level of staffing. Additional staff were deployed during the day to support people with their activities and appointments. A detailed weekly schedule had been produced which showed when this support was needed. There was also a daily jobs allocation list which staff said they referred to when coming to work. This highlighted how staff were deployed during the day so that people received the planned level of support with their activities and personal care.

A staff member told us they had been through a thorough recruitment process. They said they had not been able to work at the home before information about them had been obtained from the Disclosure and Barring Service (DBS). The DBS helps employers to make safer recruitment decisions by providing information about a person's criminal record and whether they were barred from working with vulnerable adults. Records showed a range of checks had been carried out on new staff to determine their suitability for the work. References had been obtained in addition to information from the DBS; other checks had been made to confirm the applicant's identity and their employment history.

Action was being taken to promote people's safety and reduce the risk of harm. Staff had received training in

protecting people from abuse and were aware of the procedures for safeguarding people. They understood the need to report any concerns they had about people being at risk of harm.

Records showed that risks to people arising from their daily activities had been assessed. For one person, for example, this included assessing the risks relating to cycling; information had been recorded about how these risks could be reduced. The assessments showed that the person's health and safety had been considered, although the records did not refer to the rights of the person and the benefits of engaging in the activity. We brought this to the attention of the registered manager who acknowledged that it would be useful to include this in the assessment documentation.

Information was being recorded about accidents and untoward incidents. The records included details of the circumstances and the actions taken, for example to help prevent a reoccurrence. They showed that learning points from such incidents were being identified and any new risks highlighted. Documentation such as body charts had been used on occasions to help provide a good record of what had been found.

The registered manager and staff made regular checks of the home to help ensure it was a safe environment for people. Staff told us, for example, that checks were made of the home's fire precaution systems and that arrangements were made for the safekeeping of hazardous materials. Records showed that the provider used the services of a specialist company in relation to health and safety matters and obtaining advice.

There were procedures in place for the safe management of people's medicines. A staff member told us they had received training before being able to administer medicines to people. They felt the training had been thorough and enabled them to support people safely. We saw that people's medicines were being stored securely. A range of records were maintained to show that people's medicines were well managed and being accounted for.

Is the service effective?

Our findings

People spoke positively about the support they received from staff. For example, one person commented “I enjoy living here, the staff help me with things”. Staff told us that people’s needs in relation to personal care varied; some people required assistance from staff while others were prompted or reminded about this. People’s records included individual plans which set out the level of care that had been agreed.

People’s individual plans reflected the support they needed in different areas of their lives. This included support with maintaining health and with accessing services in the community. There was guidance for staff about people’s health conditions and the action to take so they were managed effectively. This information helped to ensure that staff supported people in a consistent way which met their needs. Records of appointments were being maintained; these provided information about the outcome and any follow up actions so that staff were aware of what was required.

People’s records included details of their dietary needs and food preferences. Advice had been obtained from outside professionals; this was incorporated into the information about people’s needs and the support they required. One person told us that staff helped them to maintain their diet and advised them of the types of food they should avoid.

There was a flexible approach to the meal arrangements dependent on people’s abilities and individual needs. At lunchtime, we saw that some people had a meal that was prepared by staff. Other people prepared food for themselves with support available from staff. People had access to the kitchen to cook their own meals. There was

also an area outside the kitchen where a kettle and a refrigerator was available. One person said they liked to prepare their own food but also enjoyed the meals they had with other people, which included a ‘Sunday roast’.

The staff we spoke with were knowledgeable about people’s needs and preferred routines. They told us people’s individual plans and other guidance provided a good picture of the care and support people required. The minutes of staff meetings showed that people’s needs were regularly discussed and staff kept up to date of any changes and significant events.

The registered manager had taken action to ensure that people were not deprived of their liberty unlawfully. People’s individual circumstances had been reviewed; for a number of people, applications under the Deprivation of Liberty Safeguards (DoLS) had then been made to the local authority and authorised. DoLS is the process by which a person in a care home can be deprived of their liberty if this is agreed to be in their best interests and there is no other way to look after the person safely.

Staff were aware of the legislation relating to mental capacity and how this protects the rights of people who are unable to make decisions independently about their own care. In the records we saw that people’s capacity to make decisions about specific aspects of their care and welfare had been assessed.

Records showed that training was arranged for staff in a range of topics that were relevant to their role. These included subjects relating to health and safety and maintaining a safe environment. The training plan also covered specialist subjects such as epilepsy and mental health, which reflected the individual needs of people at the home. Staff told us they were receiving the training they needed to be competent in the tasks they were expected to undertake.

Is the service caring?

Our findings

People told us they liked living at Cypress Lodge and said they got on well with the staff. One person, for example, commented “All the staff are nice here, we have a laugh”. We observed staff interacting with people in a friendly way. It was evident that staff had got to know people well and were aware of their preferred routines.

Staff spoke to, and about, people in a respectful way. They talked about the need for people to have privacy and the importance of people being able to make choices, for example about how they wanted to spend their time. People could choose whether they wanted to socialise with others or to spend time in the privacy of their own room. People told us they could personalise their rooms as they wished. One staff member told us “It’s important to remember that this is people’s own home”.

People said they received help from staff in different areas of their lives. One person told us about the support they received with making friends and in their dealings with people outside the home. They felt they were listened to and described a caring approach from the registered manager and staff team. People also talked about social events they had attended accompanied by one of the staff or the registered manager. They said they had enjoyed their company and shared some of the same interests.

People were also supported to maintain good relationships with those they lived with. Staff told us people usually got on well together but said there were occasions when a person’s behaviour or mood could have an impact on

others. In people’s records we saw that plans had been produced with guidance for staff about how to support people on such occasions and reduce the risk of incidents arising.

Meetings were also being held when people could discuss any concerns together. One person told us that a meeting could be arranged when the need arose. They said that the meetings were useful in being able to talk about things with other people and make arrangements for the future.

People’s records included details of their personal circumstances and how they wished to be supported. This included information about people’s likes and dislikes and their preferred routines. This helped to ensure people received support in the ways they wanted and which fitted in with their lifestyle.

Records also showed that people’s independence was promoted; a staff member commented that people were “encouraged to do as much as they can for themselves”. We saw people acting independently during the inspection, for example by making their own meals and going out into the community. One person answered the home’s telephone and took messages for people.

There was information available to people in the home about advocacy. The registered manager told us about the support one person was receiving from an advocacy service and how this had been beneficial for them. The registered manager also gave us examples of how people’s diverse needs were recognised and met, for example in relation to their sexuality.

Is the service responsive?

Our findings

People said staff helped them with making their day to day arrangements. They told us about various activities they took part in when at home and when out in the community. Daily records showed that people had different routines and there was a flexible approach to how people spent their time.

Some people had planned activities during the week, such as attending the provider's farm day care centre. One person told us they liked helping to look after the animals at the centre. People told us about clubs they regularly attended, such as a lunch club. Some of the community based activities were for older people, which reflected the needs of a number of people who lived at Cypress Lodge.

People had regular contact with the local community and used a range of leisure facilities. People told us they went swimming and to the cinema. One person said there were some shops nearby which they were able to use independently. Staff confirmed that each person received some 'one to one' time when they were supported with an activity of their choice.

In the records we read about individual goals that had been agreed with people and the work being undertaken by people to develop their lifeskills. During the inspection, one person talked to staff about menu planning and was making a shopping list. This was in preparation for a meal they would be cooking as part of their independence training.

We heard about some new developments, such as people attending a local centre where they would learn and practice independent living skills. The registered manager told us staff had attended training sessions at the centre in order to be able to support people who would be going there.

Staff told us they encouraged people to take part in the household tasks such as cleaning and laundry. This was so

that people gained experience of how to do these jobs and took responsibility within a shared house. Staff said that developing independence was an important part of the support people received. We were told about one person who had been able to move from Cypress Lodge to a more independent form of living arrangement. A health and social care professional commented about an improvement they had seen in one person's quality of life and life opportunities since moving in to Cypress Lodge.

People said they could talk to staff about changes in their support and their plans for the future. The records showed that people met with staff on a regular basis to review the support they received. Reviews of people's support plans were being recorded although it was not always apparent what had changed from the original plans. The registered manager acknowledged that the method of recording could be amended so that the latest information would be more clearly identified on the plans.

Records showed that people's health and welfare were being monitored on a regular basis. Staff, for example, completed a monthly health check form with people. This system helped to ensure that any changes, such as in diet and weight, were identified and that good information was available when people's support was being reviewed.

Arrangements were being made for people to pass on their views. These included meetings when any concerns could be discussed between people at the home and raised with staff. A complaints procedure had also been produced in an 'easy read' format for people.

People had the opportunity to complete an annual survey. We saw that the findings of the last survey in 2014 had been analysed; overall, the people who took part had expressed a good level of satisfaction with the service. We read that the meetings had improved and the minutes were produced in a format that made them easier for people to understand. The need for more accessible information had also been identified.

Is the service well-led?

Our findings

The provider, Mr Neil Bradbury, had produced information (available on a website) about the organisation and the range of services provided. Specific aims were identified for the provider's residential services, which included Cypress Lodge. It was stated, for example, that "Cypress Lodge encourages independent living within the scope of the service user's ability and pace."

Feedback from people at the home and from staff showed that the provider's aims for the service were being put into practice. People told us they were involved in the local community and took part in activities which helped to develop their independence. Staff described the ethos of the home as "promoting independence" and giving people choices in their lives.

Relationships between people, staff and the registered manager were seen to be friendly and informal, but also respectful. At times during the inspection, people spoke to the registered manager about what they were doing and shared their news. People were given the time they needed to ask questions and these were responded to in a positive way.

Staff said the registered manager was approachable and they felt able to discuss any concerns with them. One staff member commented that the registered manager "listens to you" and told us they felt well supported. Another staff member described the support they received as "brilliant". We were told that support was available to staff 'as and when' and also through individual supervision meetings. The registered manager kept an annual schedule of supervision meetings to ensure these took place on a

regular basis. We were also shown examples of the records that were maintained. These showed that staff members' development needs were discussed with them and actions identified where needed.

Team meetings were being held so that staff were kept informed, for example about new developments and changes in policies and procedures. Staff told us they also saw senior managers who visited the home on a regular basis. The provider gave staff the opportunity to pass on their views in an annual survey.

A senior manager visited the home about every two months and completed a 'Quality Assessment & Monitoring Report'. The reports of the visits were detailed and provided a range of information about the running of the home. For example, they included an evaluation of staff training and details of any compliments and complaints that had been received. The visits showed that the provider was monitoring the quality of service people received and could make decisions about any action that may be needed to improve this.

Other procedures were in place for checking standards in the home on a regular basis. The registered manager told us about audits they undertook, for example of the care documentation. Senior staff, in the role of team leader, also made a range of environmental and other checks each month. Overall, the documentation in relation to audits and quality assurance was being well maintained; there were some shortcomings, including the recording of infection control audits, which we brought to the registered manager's attention.

The registered manager told us that attending local provider forum meetings helped them to keep up to date with care practice and changes in legislation. They told us that the provision of training had been reviewed following the introduction of the Care Certificate.