Lifeways Community Care Limited

River Lodge

Inspection report

35 Stapenhill Road
Burton On Trent
Staffordshire
DE15 9AE

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08 March 2019

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03 June 2019

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: River Lodge is registered to provide accommodation for up to eight people who require accommodation and support with their personal care due to living with learning difficulties. The home is located near to Burton On Trent. At the time of our inspection eight people lived at the home.

People's experience of using this service: People's support plans contained clear and easy to understand information about their needs and risks and how to support them effectively. Support plans were person centred and contained information about people's preferences, daily routines and what was important to them. For those people who were unable to express their needs and wishes verbally, staff had detailed guidance on the behaviours, gestures and body language the person would use to communicate their needs or wishes. From talking to staff it was clear they knew people well. They were able to tell us about people's changing needs and how the support provided had been adapted to respond to these changes.

The atmosphere at the home was positive and inclusive. We saw that people were well looked after, safe and happy at the home.

Medication was managed safely and people had access to a range of health and social care professionals in support of their needs.

People who lived at the home were given opportunities to express their views and where possible any suggestions for improvement were acted upon. Feedback on the service was positive and from our observations it was clear that people liked the staff and the place in which they lived. All of the staff spoken with had a positive attitude about the service and the care that they provided. During our visit, we had no concerns about the support people received and the manager and staff team appeared committed to providing a good service.

In June 2017, CQC published best practice guidance called 'Registering the Right Support'. This good practice guidance sets out the values and standards of support expected for services supporting people with a learning disability and or autism. During our visit, we found that the service was not designed in line with this best practice guidance. The service was situated on a campus style setting with two other services for people who have a learning disability. However, we could see that the service focussed on the values set out in the 'Registering the Right Support' guidance which advocates that people's choice, independence and ability to live as life as ordinary in their own home should be promoted in service delivery.

Rating at last inspection: This was the first inspection for this service since it registered with CQC. The service had been registered with a different provider and had previously been rated as Good in November 2015.

Why we inspected: This was a planned inspection and the first for this service under the current provider.

Follow up: We will continue to monitor the service and will inspect again in accordance with our inspection

principles.

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

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.

River Lodge

Detailed findings

Background to this 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: One inspection manager

Service and service type: River Lodge is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection: This inspection was announced. We gave the service 48 hours' notice of the inspection visit because it is small and we needed to be sure that they would be in.

What we did: We reviewed information we had received about the service since the service was registered. We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection we met with all the people who lived in the home. We spoke with two members of care staff, the team leader and the registered manager. We also spoke with a community nurse and an occupational therapist who were visiting the home during our inspection.

We reviewed a range of records. This included three people's care records and medicine records. We also looked at two staff files around staff recruitment. Various records in relation to training and supervision of staff, records relating to the management of the home and a variety of policies and procedures developed and implemented by the provider.

Good

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse
- Staff were trained to understand how to protect people from harm and abuse. Policies and procedures were in place and were discussed with staff to clarify their understanding.
- Safeguarding information was available and on display on notice boards in the home.

Assessing risk, safety monitoring and management
- Risk assessments clearly identified people's needs and actions to take to support them and maintain their safety.
- We saw that detailed risk assessments were completed in relation to physical conditions that people had. These explained to staff what action they should take in an emergency.
- We looked at records relating to the safety of the building and saw that all of the required checks had been carried out and safety certificates were in date.

Staffing and recruitment
- We looked at staff recruitment and saw two files for staff members who had been recruited during the last year. We saw that this had been done safely and all the required checks had been completed prior to the new staff commencing work for the service.
- We looked at the rotas and saw that staffing levels were consistent and generally maintained.
- Agency staff were never used in the home. Staff members picked up extra shifts when cover was required.

Using medicines safely
- Staff were trained to administer medicines and the registered manager observed staff practice on a regular basis to ensure that this was done safely and in accordance with the service's policy.
- The registered manager completed audits to ensure that medicines were managed safely.

Preventing and controlling infection
- There were aprons and gloves for staff to use when required to support people with personal care.
- The home was clean and well maintained.

Learning lessons when things go wrong
- There was significant oversight from the provider in relation to learning from accidents and incidents. Every incident was subject to a high level of scrutiny to ensure that all issues were explored to minimise any possibility of a reoccurrence.

Good

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

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
● One person was having a review on the day of the inspection. They were visibly anxious that the meeting was taking place. Staff were supportive and offered reassurance to the person until the meeting was over.
● Assessments of people's needs were detailed, expected outcomes were identified and care and support was reviewed when required.
●Staff had been developing their skills in supporting people living with communication and used learning from best practice. Lots of current information was available for staff to access.

Staff support: induction, training, skills and experience
● We looked at the support that staff received and saw that it was good. All staff received training when it was due. The provider maintained oversight of the training that staff completed and prompted the registered manager when training was due to be undertaken.
● Staff induction, supervision and appraisals were recorded and we could see that these were always completed. All staff had regular access to the registered manager or their appointed team leader to discuss any issues or concerns.

Supporting people to eat and drink enough to maintain a balanced diet
● The service supported people to eat and drink in accordance with their care plans. We saw that the service paid attention to detail to make sure that food and drink was provided in accordance with people's needs and choices. There were people in the home who required a soft diet. There was a person who did not like any sauces and preferred their food to be served dry. We could see evidence that these preferences and requirements were always met.

Staff working with other agencies to provide consistent, effective, timely care
● The service demonstrated that they worked closely with health care professionals to meet people's needs safely.
● We spoke with a community nurse and an occupational therapist during the inspection and they told us that the service was very "responsive to people's health needs."

Adapting service design, decoration to meet people's needs
● We noted that in parts of the building the décor was tired and required updating. The registered manager agreed with us and explained that work-men were on site and were starting some refurbishment of some areas.

Supporting people to live healthier lives, access healthcare services and support

● The service had positive relationships with the local GP surgery's and they worked together to meet people's needs.

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 Act 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 with appropriate legal authority. 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 any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

● The registered manager had a clear understanding of the MCA and how to apply it safely. The service always assumed capacity when supporting people.

● Everyone living in the home had a DoLS in place to keep them safe as the people were unable to leave the home without staff supporting them. These were managed carefully.

● We saw mental capacity assessments and best interest documentation in all of the care files that we looked at. The assessments were decision specific as required.

Good

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

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 we spoke with demonstrated a good knowledge of the way people preferred to be supported, their needs, likes and dislikes. Most of the people who lived at the home had difficulties communicating their wishes, feelings or needs verbally and each person communicated their needs in different ways.
- We saw that staff were familiar with each person's preferred method of communication. They had detailed information on the gestures or behaviours people would display when they were hungry, sad, happy or anxious or excited. This was good practice and enabled staff to anticipate people's needs and feelings so that appropriate support could be provided.
- During our visit, we saw that the conversations between staff and people who lived at the home were spontaneous and natural and they looked relaxed and comfortable in each other's company.

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

- During our inspection the home had a relaxed atmosphere and we saw that people were supported to maintain independent living skills such as cleaning their own rooms and making their own snacks with staff support.
- People's care plans contained details of the things that were important to them, the activities that supported their emotional well-being and the social interests that they enjoyed.

Respecting and promoting people's privacy, dignity and independence

- One person who lived in the home chose to spend most of their time in their bedroom doing various activities. We saw that staff respected this choice and were often seen with the person in their bedroom supporting them. The person was encouraged to leave their bedroom to eat their meals but did this for the minimum time possible.

Good

Is the service responsive?

Our findings

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

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

● We saw that people's support plans were person centred and staff had clear guidance on how to meet their individual needs. Support plans covered all aspects of their physical and emotional health, their likes and dislikes and contained information about, the person's personality, life history and how the person preferred their support to be provided. From the way people's support plans were written it was clear that the person was at the centre of their own support.

● Some people experienced behaviours that were challenging. We found staff were provided with detailed information on what behaviours people would display in various situations or when they became anxious or upset. The possible reasons why the person displayed these behaviours was outlined which helped staff to understand what people were trying to communicate when they behaved in a certain way. Staff also had clear information on the triggers to people's behaviours and what to do to reduce the person's anxiety or upset. This was good practice and enabled staff to provide the right level of support at the right time. This approach helped mitigate the risk of the person's behaviour and distress escalating. We saw evidence of this during the inspection when one person became upset.

● We saw that people had access to lots of activities of their choice. We saw people's plans for activities included a mix of fun activities such as valley walks and lunch out but also tasks at home including 'deep clean bedroom' and tidying up.

Improving care quality in response to complaints or concerns

● There was a complaints procedure in place which was openly displayed in the home. The procedure was available in easy read format to help people who may struggle to read or understand a written policy about how to make a complaint.

End of life care and support

● The service was not currently supporting anyone with end of life care. In care files we did see that some people had received support to complete end of life care plans so that their wishes were recorded.

Good

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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- Staff told us they felt listened to and that the registered manager and team leaders were approachable and supportive.
- Staff told us and we saw records to show they had regular team meetings.

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

- The registered manager was aware that that the service did not fully comply in full with 'Registering the Right Support' best practice guidance. The building's size, layout and location was not in accordance with current best practice guidelines for services supporting people with learning disabilities and or autism. However, there was evidence the provider had reviewed the experience of people using the service considering this guidance. Appropriate adaptations to the premises had been made to ensure that people's comfort and independence was maintained. This meant the provider had ensured that people were able to live as independent a life or as ordinary a life as any citizen.

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

- The registered manager positively encouraged feedback and acted on it to continuously improve the service, for example asking staff working in the service regularly if they could be doing anything else to support them to meet people's needs.
- During our visit, we found the manager and staff team to be inclusive and approachable. The culture of the service was positive and person centred and we saw that the people in the home appeared very happy. Staff morale was good and staff spoken with told us they enjoyed working at the home and working for the provider.

The service had good partnership links with local healthcare providers, social work teams, and community services. This ensured that people had access to the support they needed to have a healthy and meaningful life.

Continuous learning and improving care

- We could see that the registered manager analysed feedback and made changes to the care provided to ensure that people's views were responded to.
- The provider and registered manager completed many audits to review the quality of the service provided. We reviewed the most recent provider audit and saw that the home had achieved a score of 75%. This

placed them in the 'Good' category. The audit had produced and action plan and we saw that the registered manager had almost completed all of the actions required.

Working in partnership with others

● The service had good links with the local community and the staff team worked in partnership to improve people's wellbeing. For example, people regularly visited the pub next door to the home. The pub was very responsive to people's needs and would keep the food warm if the person became distressed and needed to leave.