

Burlington Care Limited

Maple Lodge Care Home

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Maple Lodge Care Home is a residential care home providing personal and nursing care to 51 people aged 65 and over at the time of the inspection. The service can support up to 60 people.

The care home accommodates people in one adapted building, with a separate unit for people living with dementia.

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

People living at Maple Lodge Care Home were supported to remain safe. Risks to people were assessed and reviewed on a regular basis. Staff were recruited safely, and people received their medication as prescribed.

People were supported in line with government guidance around COVID-19. Staff understood their roles clearly and knew what was expected of them and the principles of keeping people safe.

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.

Care plans described the support people needed to maintain their mental and physical health. Changes to people's needs were quickly identified and amendments were made to reflect their up to date care.

The provider and registered manager were focused on continuous learning and developing the service. Quality assurance systems effectively monitored the service and drove improvements when they were needed. Lessons learnt were used as learning opportunities to continuously develop the service.

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

Rating at last inspection (and update)

The last rating for this service was requires improvement (published 27 April 2020) and there were two breaches of regulation. The provider was asked to complete an action plan after the last inspection to show what they would do and by when to improve.

At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We received concerns in relation to falls, pressure area care and weight risk management. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Maple Lodge Care Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Maple Lodge Care Home

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 Care Act 2014.

Inspection team

One inspector carried out the inspection.

Service and service type

Maple Lodge Care Home 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 that 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 unannounced.

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. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service about their experience of the care provided. We spoke with

seven members of staff including the area manager, registered manager, a nurse, senior care workers and care workers. We walked around the service and observed care and social interactions using infection, prevention and control and socially distanced practices.

We reviewed a range of records. This included three people's care records and three people's medication records. We looked at three staff files in relation to recruitment and staff supervision.

After the inspection

We looked at a variety of records relating to the management of the service. We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two relatives about their experiences of the care provided.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection the provider failed to ensure the premises were safe and equipment was used in a safe way. This was a breach of regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities Regulations) 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Systems were in place to ensure the environment remained safe. Risks to people were assessed, recorded, managed and reviewed regularly.
- Detailed action plans supported the service to reduce risks to people and improve the service.
- Equipment received regular safety checks.
- Risks assessments for people were in place and provided staff detailed information on how to identify risks whilst supporting people in a pro-active way to reduce them.

Systems and processes to safeguard people from the risk of abuse

- People felt safe at the service. People told us, "I like it here, I am safe, the staff are lovely" and "It's a safe place, I like to see people and there is always someone to talk to."
- The service had a safeguarding policy in place and the management team followed internal and external processes to keep people safe.
- Staff knew what action to take to ensure people were safe and protected from harm and abuse.

Staffing and recruitment

- There were enough staff to support people and meet their needs. At the inspection, we observed staff respond to people in a timely manner.
- Contingency plans were in place to cover staff absence at short notice.
- Staff were recruited safely; appropriate checks were carried out to protect people.

Using medicines safely

- Medicines were managed, stored and administered safely. Records showed people received their medicines as prescribed.
- Staff responsible for supporting people with medications were appropriately trained. They received regular competency checks.

- The provider completed regular audits to ensure safe medicines management.

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 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 accessing testing for people using the service and staff.
- 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.

We have also signposted the provider to resources to develop their approach to ensure social distancing was always maintained.

Learning lessons when things go wrong

- The provider had systems in place to review and analyse accidents and incidents. Themes and trends identified were used as learning opportunities to drive improvements at the service.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care

At our last inspection the provider failed to have effective systems in place to improve the quality and safety of the service was a breach of regulation 17 (good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The provider and registered manager were focused on continuous learning from incidents and shared lesson learnt with all staff. This ensured improvements were identified, actioned and sustained.
- The registered manager completed regular 'walk arounds' of the service to identify and mitigate any new potential risks.
- Robust audits supported the service to be continuously monitored.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The provider and registered manager worked collectively with all staff to demonstrate a positive culture and promote person-centred care and support for people.
- The registered manager was clear about their vision for the home. This was embedded by committed, loyal staff who had worked at the service for numerous years.
- The provider and registered manager acted on feedback to improve the service for people.
- Staff felt extremely supported by the registered manager. Comments from staff included, "I feel totally supported by the registered manager. If you have any problems they will sit and listen to you and make sure you're alright" and "They are very supportive, we can contact them at any time."

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 registered manager understood their legal responsibility to notify the CQC about incidents that affected people's safety and welfare; records showed they had done so accordingly.

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

- The registered manager was clear about their roles and responsibilities.
- The registered manager completed quality assurance checks to oversee the service and drive forward improvements in the quality of the service. This enabled them to collate information daily to show how the service was performing.
- Effective communication between the registered manager and staff team supported people to receive their preferred care and support.

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

- Regular communication and information sharing with people, relatives and staff kept them up to date with any changes and fully involved in regards to the running of the service during the COVID-19 pandemic.
- Relatives told us, "Staff contact me, so I know how [Name of person] is doing which is really reassuring to me. Video calls are available for the other members of my family" and "The service is superb. The staff are fantastic and my relative is well looked after. During COVID-19 they have been brilliant and are like an extended family to us."