

# Community Homes of Intensive Care and Education Limited

# Stokelodge

## Inspection report

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## Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service effective?	Good ●
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Is the service caring?	Good ●
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Is the service responsive?	Outstanding ☆
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Is the service well-led?	Good ●
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# Summary of findings

## Overall summary

Stoke Lodge provides accommodation and personal care to a maximum of nine people who live with a learning disability, autism and/or associated health needs, who may experience behaviours which may challenge.

At the time of the inspection nine people were living at the home. The service is a residential home that has been developed and adapted in line with the values that underpin the Care Quality Commission's 'Registering the Right Support' and other best guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can lead as ordinary life as any citizen.

The home had a registered manager. A registered manager is a person who has registered with the CQC 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 and associated Regulations about how the service is run.

This comprehensive inspection took place on 18 December 2018. The inspection was unannounced, which meant the staff and provider did not know we would be visiting.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good. There was no evidence or information from our inspection and on-going monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

At our last inspection in March 2016 we found the provider required to improve their provision of staff training in relation to supporting people living with autism. At this inspection we found the provider had made the required improvements and now ensured staff had completed the necessary training.

During this inspection we identified the service had improved and now delivered outstanding personalised care that was responsive to people's needs. People experienced exceptional care that was extremely flexible, to their individual changing needs and preferences. People and relatives regularly reported that the dedicated staff team consistently went the extra mile to make people's dreams come true. The care provided to people, achieved exceptional outcomes, enriching the quality of their lives and improving their physical and mental wellbeing.

Staff were particularly skilled at helping people and their families to explore and record their wishes about care at the end of their life, which made them feel empowered, valued and listened to.

The registered manager sought the views of people and their relatives and reviewed complaints to drive improvements in the home.

People were protected from avoidable harm by staff who received the required training and understood their responsibilities to safeguard people. Risks to people had been identified and were managed safely. The provider had enabled staff to develop and maintain the necessary skills and knowledge to deliver effective care to meet people's needs. The registered manager ensured there were always sufficient suitable staff deployed to support people safely.

Staff knew people well and delivered their care in accordance with detailed assessments, which were reviewed regularly. People were protected from the risks associated with malnutrition and supported to eat a healthy balanced diet. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. Staff quickly referred people to external services, when required to maintain their health.

Staff supported people to maintain required standards of cleanliness and hygiene in the home, which reduced the risk of infection. Staff followed required standards of food safety and hygiene, when preparing or handling food.

Staff promoted people's independence, self-esteem and confidence, whilst treating them with dignity and respect. Staff consistently considered people's needs regarding equality and diversity.

People were supported to take part in stimulating activities of their choice and to maintain relationships with their families and those that mattered to them.

The service was well led by the registered manager, who inspired staff to deliver care and support in line with the provider's core values, which promoted people's dignity, independence and choice.

The provider operated effective performance management processes to monitor the quality of service being delivered, which were reviewed regularly, and reflected best practice.

The registered manager had developed good links to local community, that reflected the needs and preferences of the people who used the service.

Further information is in the detailed findings below.

## 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 remains Good.

### Is the service effective?

Good ●

The service had improved to Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Outstanding ☆

The service was extremely responsive and had improved to outstanding.

People, their families, supporting professionals and commissioners of their care, consistently described the responsive care provided by the service to be outstanding.

Staff consistently went the extra mile and provided innovative solutions to support people to achieve their aspirations.

Staff were particularly skilled at helping people and their families to explore and record their wishes about care at the end of their life, which made them feel empowered, valued and listened to.

### Is the service well-led?

Good ●

The service remains Good.

# Stokelodge

## Detailed findings

### Background to this inspection

This unannounced inspection took place on 18 December 2018 and was carried out by one adult social care inspector.

Before the inspection, we reviewed all the information we held about the service including previous inspection reports and notifications received by the Care Quality Commission (CQC). A notification is used by registered managers to tell us about important issues and events which have happened within the service. The provider had completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, such as what the service does well and improvements they plan to make. We used this information to help us decide what areas to focus on during our inspection.

During our inspection we spoke with five people living at the home, some of whom had limited verbal communication. We used a range of different methods to help us understand the experiences of people using the service who were not always able to tell us about their experience.

Throughout the inspection we observed how staff interacted and cared for people across the course of the day, including at mealtimes, during activities and when medicines were administered. We spoke with the registered manager, deputy manager, assistant manager, an assistant area director, the cook, activities coordinator and eight members of staff covering the day and night shifts, including one bank staff.

We reviewed each person's care records and seven staff recruitment, supervision and training files. We examined the provider's records which demonstrated how people's care reviews, staff supervisions, appraisals and required training were arranged.

We looked at the provider's policies and procedures and other records relating to the management of the service, including quality assurance audits and staff rotas. We considered how people's, relatives' and staff comments were used to drive improvements in the service.

Following the visit, we spoke with five relatives of people and two health and social care professionals. These health and social care professionals were involved in the support of people living at the home. We

also spoke with the commissioners of people's care.

The last inspection took place in March 2016 where we rated the service as good but required to improve staff training to support people living with autism.

# Is the service safe?

## Our findings

People continued to experience care that made them feel safe and met their needs. When concerns had been raised, the registered manager carried out thorough investigations in partnership with local safeguarding bodies. People were supported to understand what keeping safe means, and had the opportunity to complete safeguarding training in a format that met needs, supported by staff.

Staff understood people's risk assessments and the action required to keep people safe, whilst promoting their freedom and independence.

The registered manager ensured there were always sufficient numbers of staff with the right mix of skills, experience and knowledge, to meet people's individual needs safely. Staff underwent relevant pre-employment checks to ensure their suitability to support people living with a learning disability.

Risks to people associated with their behaviours were managed safely. Timely and sensitive staff interventions ensured that people's dignity and human rights were protected, whilst keeping them and others safe.

Staff followed current and relevant professional guidance about the management of medicines, which ensured people received their prescribed medicines safely. Staff completed relevant training to administer medicines and had their competency assessed regularly. People were treated with dignity when supported with their prescribed medicines.

The registered manager encouraged learning from mistakes and when things went wrong. Staff understood their responsibilities to raise concerns, to record safety incidents and near misses, and to report them.

The provider had established procedures for making sure that the premises were kept clean and hygienic, so that people and staff were protected from infections.

We observed staff supporting people to follow the required standards of food safety and hygiene, when preparing, serving and handling food.

# Is the service effective?

## Our findings

At our last inspection in March 2016 we found the provider required to improve their provision of staff training in relation to supporting people living with autism. At this inspection we found the provider had made the required improvements and now ensured staff had completed the necessary training.

People received care and support which achieved successful outcomes. Relatives consistently praised the skill of the staff in meeting people's complex and emotional needs, and their determination to provide opportunities for people to grow and experience the best quality of life.

People's needs were assessed regularly, reviewed and updated. Staff consistently referred people promptly to external healthcare services when required, to maintain their health and ensure their changing physical and mental health needs were met. Professionals reported that staff were proactive and effectively followed their guidance.

Staff had undertaken the required training to develop and maintain the necessary skills and knowledge to deliver effective care and support, which met people's needs, in line with best practice guidelines.

People were protected from the risk of poor nutrition, dehydration and choking. People and staff had developed effective support plans together, which combined a healthy diet with physical exercise to create a healthy lifestyle.

People had been involved in decisions about the decoration of their personal rooms, which met their personal and cultural needs and preferences.

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.

Staff supported people and their relatives where appropriate, to make choices, in line with best interests decision-making. For example, people had been supported with decisions relating to medical tests and surgical procedures. Such decisions were subject to constant review.

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 Mental Capacity Act 2005 (MCA). Procedures for this in care homes are called the Deprivation of Liberty Safeguards. We found that legal requirements were met and people's human rights had been recognised and protected.

The registered manager had developed effective partnerships with relevant professionals, for example GPs, community learning disability teams, speech and language therapists, dentists, chiropodists.



# Is the service caring?

## Our findings

People continued to experience positive caring relationships with staff who consistently treated them with kindness and compassion in their day-to-day care. One person told us, "They [staff] are my friends and look after me." People, relatives and staff spoke fondly about the close family environment they experienced living and working at Stoke Lodge.

Relatives consistently reported their loved ones were content and happy at the home. One relative told us, "The carers [staff] are wonderful, they are so thoughtful and always considering what they can do. [Their loved one] couldn't be in a better place because they [staff] really love and care for him.

Staff demonstrated passion and pride in relation to supporting people living in the home. For example, one staff member said, "I feel such satisfaction working with the guys [people]. Nothing compares to get a smile or seeing them [people] laughing and enjoying themselves." Another staff member said, "Nothing I have ever done before gives me so much pleasure and pride. Even when I'm not here I'm always thinking about what's happening here. I couldn't do anything else now."

During the inspection the deputy manager, assistant manager and a senior member of care staff, came in especially on their day off to talk to us about their love of the service and their dedication to the people living there.

Staff consistently interacted with people in a calm and sensitive manner, using appropriate sign language, body language and gestures where appropriate, in accordance with their communication plans. Relatives consistently reported that staff interaction with their loved ones had a significant positive impact on their well-being and happiness. Staff had the time, information and support they needed to provide care and support in a compassionate and person-centred way.

Staff showed concern for people's wellbeing in a caring and meaningful way, and responded to their needs quickly. Staff promptly reassured people who were anxious in accordance with their support plans, which calmed them and prevented their behaviour escalating. Relatives consistently told us that the consistent interactions of caring staff had reduced their loved one's levels of anxiety. This had led to them feel able to explore new opportunities and experiences to enrich their lives.

People and their relatives were involved in their care planning, which considered their wishes, needs and preferences. Relatives consistently told us that the registered manager and staff made them feel their opinion was really valued. Family members praised the registered manager and staff team for keeping them updated and involving them in important decisions.

Respect for privacy and dignity was at the heart of the home's culture and values. Staff demonstrated these values in their day to day support of people. People's care records detailed their needs in relation to equality and diversity. Staff supported people in a calm and sensitive manner and used a variety of tools to communicate with people according to their needs.

Staff consistently demonstrated in their day to day support of people that respect for privacy and dignity was at the heart of the home's culture and values. People's care records included an assessment of their needs in relation to equality and diversity.

Staff training, supervisions and competency assessments ensured they understood their role to ensure people's diverse needs and right to equality were met. Staff promoted people's choices and independence, for example, by supporting them to do things themselves, rather than doing things for them.

Information about people was treated confidentially and the provider kept and stored records in accordance with the Data Protection Act.

## Is the service responsive?

### Our findings

People, their families, supporting professionals and commissioners of their care, consistently described the responsive care provided by the service to be outstanding. One person told us, "Since I came here I feel safe and the staff help me to do things I like. I haven't been so happy for a long time." Another person told us, "I love it here because I can do what I want to do and they [staff] always help me."

One relative told us how a previous placement had continually failed to deliver responsive care that met their loved one's needs. They told us, "The change [in their family member] has been unbelievable. Since moving to Stoke Lodge, the staff have been amazing and always go out of their way to make him happy. You wouldn't recognise him as the same person. They have really brought him out of his shell and he is now living life to the full."

People and those with authority to act on their behalf, were fully involved in the planning of their care and support. They consistently told us the registered manager was passionate about enabling people to have as much choice and control of their lives as possible.

Relatives consistently told us staff went the extra mile and praised the energy and enthusiasm of staff, who tenaciously supported people to achieve their ambitions and aspirations. For example, one person who lived with a learning disability, cognitive impairment and a complex dietary condition, spoke fondly about the staff team and said, "They made my dreams come true." This person told us about their involvement in the comprehensive planning to support them to achieve their lifelong dream of meeting their favourite Disney characters, and visiting Disneyland Paris and Disneyworld Florida. He told us how staff had shown him pictures of Disneyland Paris and how he agreed with them and thought it was a good idea to use a visit there, as a stepping stone to visiting Disneyworld Florida.

The person's complex diagnosis provided multiple challenges for staff to overcome, including supporting the person with their anxieties in busy theme parks, airports, railway stations and confined flights and train rides. The person and staff created an incremental plan which included desensitisation to busy places and air travel, for example; An initial flight to Tenerife. Staff effectively engaged with an airline to support the person on short flights abroad, to prepare them to cope with a transatlantic flight. This included dealing with the person's support requirements, including their complex dietary diagnosis and potential medical needs. The risk assessment and management plan for the person's visit to Disneyland Paris contained the required comprehensive details to ensure their safety, whilst on this visit.

This person told us that every day of their visit was filled with fun and laughter, as they enthusiastically showed us the photograph album of their visit. The persons' family were overjoyed that their loved one had been supported to go abroad and make his dream come true. The person excitedly told us they were looking forward to visiting Disneyworld Florida next, to complete their dream, and were planning the next steps with staff.

People experienced care that was responsive to their individual needs and preferences. The registered

manager and staff ensured people had as much choice and control over their lives as possible. Families told us the staff worked closely with them, to ensure they were fully involved in their loved one's care.

Staff provided innovative solutions to support people to achieve their aspirations. For example, one person whose family were the most important thing in their life, wished to attend his sister's wedding. However, this person experienced severe anxieties when using vehicular transport, which caused behaviours that challenged others and created road safety risks. Staff developed comprehensive plans to support the person to travel in the home's vehicles. Unfortunately, exhaustive, positive behaviour support had not successfully reduced the person's anxieties and they were not able to travel to the family wedding. Therefore, staff engaged with family members to identify a potential solution. Shortly after the wedding, the bride, bridegroom and wedding party agreed to hold a wedding celebration at the home so the person could be involved and share in his sister's happiness. On the day of the party the person was worried, needed reassurance, and initially declined to join the celebration, until he saw his sister who came to reassure him. The person was then supported to join the celebration, where they enjoyed a memorable day with those who meant the most to them, creating special memories. Staff supported people to maintain relationships with their families and friends that mattered to them.

Visiting professionals told us the service provided person-centred care and support, which achieved exceptional results. For example, one person had transferred to Stoke Lodge, due to the unexpected closure of another service. This person had become extremely introverted and reclusive in their previous placement, where they had also had been physically abused by another person using the service. The person was frightened that they would be made to return. Staff at Stoke Lodge invested time and patience with the person, providing constant reassurance that they would not be returning and that Stoke Lodge was now their home.

Since the person's arrival at Stoke Lodge their quality of life has significantly improved. This person now actively engaged in social activities and accessed the community regularly, which they had not done for some time at the previous service. Prior to moving to Stoke Lodge the person experienced high levels of behaviours which challenged others. Since moving to the home, the person has now settled and their well-being improved to such an extent, that these incidents have stopped.

Staff used individual ways of involving this person in developing their care and support plans, so that they feel listened to and valued. The activities co-ordinator had worked with this person to find out what interests they had and encouraged participation in social group based activities, which they enjoyed. This enabled the person to discover common interests with others living at Stoke Lodge and develop friendships with them, which has again promoted their confidence and self-esteem and had a positive impact on their well-being and mental health. Attentive listening led staff to learn about the person's passion for tanks and tractors, which generated visits to a tank museum and various farms. At the time of inspection staff were in the process of arranging for the person to volunteer at a local farm. This person told us their life had been transformed due to the kindness and reassuring support provided by staff, which had enabled them to rebuild their life.

Staff were particularly skilled at helping people and their families to explore and record their wishes about care at the end of their life, which made them feel empowered, valued and listened to. Whilst no-one at Stoke Lodge currently required end of life care, relatives overwhelmingly praised the sensitive manner in which the registered manager had arranged meetings with them to explore their loved one's feelings and wishes. This included the use of individual social stories.

People received care that reflected their wishes, from staff who understood how to promote their

independence and maximise the opportunity to do things of their choice. One relative told us, "They [staff] are always pushing boundaries and exploring new ways to fulfil their [people's] potential."

People's changing care needs were identified promptly and referred to relevant professionals when required. Staff understood the needs of each person and delivered care and support in a way that met these needs and promoted equality.

People and their relatives were given the opportunity to give their feedback on the service during care reviews, meetings and surveys. This feedback was consistently positive, with many complimentary comments about the support provided. The registered manager demonstrated how they used investigations into concerns and complaints to improve the service, for example; safety measures implemented whilst supporting people to access the community.

# Is the service well-led?

## Our findings

The home continued to be consistently well-managed by the registered manager and her management team, who led by example. The registered manager was highly visible and provided clear and direct leadership, which inspired staff. The registered manager and deputy manager had the skills, knowledge, and experience to lead effectively. Professionals told us the registered manager knew how to support people living with a learning disability.

The registered manager consistently acted with integrity and demonstrated honesty and transparency dealing with incidents, accidents and near misses. The management team had created an open culture where staff were supported and felt confident to question poor practice. People and staff who had raised concerns, including whistleblowers, told us they had been supported and protected by their managers and the provider.

Staff told us the registered manager and deputy manager were approachable and inspired them to put people's needs and choice at the heart of everything they did. One staff member told us, "I love working here because everyone wants the same thing and is always willing to listen and help you." Another member of staff said, "This is just the best place to work. I just love coming to work and have never worked anywhere before where you feel you are part of something special."

The provider and registered manager had created an open, person-centred culture, which achieved good outcomes for people, based on the provider's key values.

The provider's vision was to provide services for people with learning disabilities, autism and mental health needs by delivering care in line with values they identified together with people who use their services. Staff demonstrated the provider's core values during their day to day support of people, which promoted their dignity, independence and choice.

Staff received constructive feedback from the management team, which motivated them to improve and enabled them to develop and understand what action they needed to take to improve the quality of care they provided.

People, relatives and professionals told us the registered manager and staff had created a safe, caring environment at Stoke Lodge, which was founded on mutual trust and respect. People, relatives and staff told us the registered manager made them feel part of a team, where everyone's opinion was valued.

The provider readily recognised good work and staff were actively encouraged to suggest new ideas to the develop and improve the service. The registered manager ensured that good practice was shared during staff meetings and supervisions and acted on throughout the service.

The registered manager operated effective quality assurance systems to monitor the quality of service being delivered. The provider supported the registered manager with a comprehensive system of visits and audits

by senior managers. The registered manager sought feedback through a variety of methods, which demonstrated positive improvement and an effective response to issues identified.

The staff had developed good links in the local community and the registered manager had established effective partnerships with professional services that reflected people's needs and preferences.