

Harvey Stewart & Smith Limited

# Stewart Lodge Care Home

## Inspection report

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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

### About the service

Stewart Lodge Care Home is a residential care home providing personal care to up to 3 people in one adapted building. The service provides support to people with mental health needs. At the time of our inspection there were 3 people using the service.

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

People were safe at the service. Staff understood how to safeguard people from abuse and keep them safe from identified risks to their safety and wellbeing. There were enough staff to support people and meet their needs. The provider carried out recruitment and criminal records checks to make sure staff were suitable to support people. The provider made sure health and safety checks were carried out of the premises and equipment to make sure they were safe. The premises was clean and hygienic. Staff followed infection control and hygiene practice to reduce the risk of infections.

People were involved in planning and making decisions about their care and support and could state their preferences for how this was provided. Staff were provided with relevant training to help them meet people's care and support needs. Staff knew people well and understood how their needs should be met in line with their preferences. The provider checked with people at regular intervals that the care and support they received was continuing to meet their needs and sought their views about how the service could be continuously improved.

People were treated well at the service. People's feedback indicated staff delivered good quality support. Staff were supported through supervision to continuously learn and improve in their role. Staff enjoyed their work and supporting people using the service. They were encouraged to put people's needs and wishes at the heart of everything they did.

Staff supported people in a dignified way which maintained people's privacy and independence. 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 supported people to manage their healthcare and medical conditions and made sure people could access support from healthcare professionals when needed. Staff encouraged people to eat and drink enough to meet their needs. People were supported to take their prescribed medicines in a timely and appropriate way. Medicines were managed safely.

People undertook activities that reflected their interests and preferences. Relatives and friends were free to visit people without any unnecessary restrictions. The service had been designed and decorated to meet people's needs and people had a choice of comfortable spaces to spend time in.

The registered manager was experienced and had a clear understanding of how people's needs should be

met. They undertook audits and checks to monitor, review and improve the quality and safety of the service. There were systems in place to investigate accidents, incidents and complaints and people to be involved and informed of the outcome. The provider worked proactively with healthcare professionals involved in people's care and acted on their recommendations to deliver care and support that met people's needs.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection and update

The last rating for this service was Good (published 25 June 2019).

#### Why we inspected

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

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 COVID-19 and other infection outbreaks effectively.

#### 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.

# Stewart 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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

The inspection team consisted of one inspector.

#### Service and service type

Stewart Lodge Care Home 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. Stewart Lodge Care Home 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.

#### Notice of inspection

This inspection was unannounced on the first day. As the registered manager was unavailable on that day, we went back again on 3 January 2023 to complete the inspection.

### What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us 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 spoke with three people using the service and asked them for their feedback about the service and the care and support they received. We also observed interactions between people and staff to understand people's experiences. We spoke with the registered manager and two care support workers. We reviewed a range of records. This included two people's care records, medicines administration records (MARs), two staff recruitment files, staff training and supervision information and other 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 safe at the service. People told us they felt safe at the service and with the staff that supported them. One person told us, "I feel safe here and I think they have my best interests at heart."
- Staff received training to help them safeguard people from abuse. They knew what signs to look for that may indicate abuse and how to report their concerns to the appropriate person or authority.
- The registered manager understood their responsibility to liaise with the local authority and other relevant agencies if a safeguarding concern about a person was reported to them.

Assessing risk, safety monitoring and management

- Staff supported people to stay safe at the service. The provider had assessed risks to people's safety and wellbeing and had plans in place for staff to manage these risks.
- People were informed about risks to their safety and wellbeing. They had been involved in planning and agreeing the action staff would take to help manage these risks, to keep them safe.
- The provider made sure there were health and safety checks of the premises at appropriate intervals. Safety systems and equipment were maintained and serviced to make sure these remained in good order and safe for use.
- Staff had received training to deal with emergency situations if these should arise at the service.

Staffing and recruitment

- There were enough staff to support people. Staff were present and provided support and assistance to people when this was needed.
- The provider operated safe recruitment practices. They carried out appropriate checks on staff that applied to work at the service to make sure only those suitable were employed to support people. This included checks with the Disclosure and Barring Service (DBS) who 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 received their medicines safely and as prescribed.
- People's records contained information about their medicines and how staff should support them to take them in a timely and appropriate way.
- Our checks of medicines stocks, balances and records showed people consistently received the medicines prescribed to them. Medicines were stored safely and appropriately.
- The provider audited medicines stock and records and checked staff's competency to make sure they

were managing and administering medicines safely.

#### 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 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.
- Staff had completed food hygiene training and followed correct procedures for preparing and storing food.

#### Visiting in care homes

- The provider made sure visiting arrangements at this service were in line with government guidance.

#### Learning lessons when things go wrong

- There were systems in place for staff to report and record accidents and incidents.
- Staff understood when and how to report and record accidents and incidents to senior staff.
- The provider had arrangements in place to make sure any accidents and incidents would be investigated and action taken to reduce the risk of these reoccurring.

# 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

- The provider had systems in place to make sure people's care and support needs could be met by the service. Assessments were carried out with people, and others involved in their care, prior to them using the service. This helped the provider obtain the information they needed to plan and deliver the care and support people required.
- Assessments took account of people's medical history, current healthcare conditions, their care needs and the outcomes they wished to achieve from the support provided. Information from assessments had been used to develop care plans for people which set out the support they needed.
- People had been able to state their choices about how and when their care and support was provided and this information had been recorded in their care plan for staff to follow.

Staff support: induction, training, skills and experience

- Staff were able to meet the range of people's needs. They received relevant training to help them do this.
- Staff updated their training and attended refresher courses to help them continuously apply best practice when providing care and support to people.
- Staff received support in the form of supervision and appraisal at regular intervals. They were encouraged to discuss their working practices and any further training or learning they needed to help them provide effective support to people. A staff member told us about supervision, "It is very helpful as it's an opportunity to keep up to date with what is happening."

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

- People were supported by staff to eat and drink enough to meet their needs.
- Staff supported people to plan menus that reflected their individual preferences.
- Staff understood people's specific dietary needs and preferences and took this into account when planning and preparing meals.

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

- People were supported by staff to manage their healthcare conditions and needs. Their records contained information for staff on how they should do this.
- Staff understood people's conditions and how they needed to be supported with these. They worked with healthcare professionals involved in people's care and followed their recommendations to help people achieve positive outcomes in relation to their physical and mental health needs.

- People were supported to attend reviews with the mental health professionals involved in their care. Outcomes from these meetings were reviewed by the provider for any changes needed to the support people required.
- If people needed to go to hospital, information would be sent with them about their current health, existing medical conditions and their medicines. This helped to inform ambulance and hospital staff about the person and their needs when they had to make decisions about the person's treatment.

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

- The design, decoration and layout of the service was meeting people's needs. People's bedrooms had been individualised and reflected their preferences and interests. One person told us, "I'm lucky with my room as I have it all to myself. It's nice and warm."
- There were communal spaces where people could spend time in when not in their room including a lounge, kitchen/diner and the garden.
- The provider undertook redecoration and refurbishment of the service when this was needed. We saw the environment had been repainted, new carpet had been laid and new furniture had been purchased for the lounge.

#### 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.

- The provider undertook assessments of people's capacity to make and consent to decisions about specific aspects of their care and support. There were processes in place where if people lacked capacity to make specific decisions the provider would involve others involved in people's care and healthcare professionals to ensure decisions would be made in people's best interests.
- Applications made to deprive people of their liberty had been properly made and authorised by the appropriate body. The provider was complying with the conditions applied to the DoLS authorisations. Authorisations were reviewed to check that they were still appropriate.

# 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

- People were looked after well by staff. People's feedback confirmed this. One person told us, "The staff are alright. They treat me well. We are very lucky in that respect. I have a good relationship with my keyworker."
- We observed people interacting with staff. People were relaxed and comfortable with staff. Staff were quick to provide support to people when they asked for this.
- Conversations between people and staff were warm and friendly. Staff were respectful when talking to people. They listened to what people had to say and responded in an appropriate way. A staff member told us, "When I see people are down, I sit down with people and find out what's wrong."
- Staff were kind when supporting people and did not rush them. People could take as long as they wanted when undertaking tasks.
- People's specific wishes in relation to how their social, cultural and spiritual needs should be met were recorded in their care records so staff had access to information about how people should be supported with these.
- Staff received equality and diversity training as part of their role. This helped staff make sure people were always treated fairly.

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

- People had been supported to express their views and be involved in making decisions about the care and support they received.
- People's care records reflected the choices and decisions they had made about how their care and support was provided.
- People's feedback was obtained at regular intervals to make sure the care and support they received was continuing to meet their needs.

Respecting and promoting people's privacy, dignity and independence

- People's right to privacy was respected. People could spend time alone in their rooms and staff did not enter people's rooms without seeking their permission first.
- Staff prompted people to do as much as they could and wanted to do for themselves to promote and maintain their independence with the tasks of daily living.

# 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 had choice and control about how they wanted to receive care and support from staff.
- People's care records contained information about their preferences and choices for how their care and support should be provided. This included information about their likes and dislikes, their preferred routines and how they wished to spend their day.
- Staff understood people's needs and how these should be met. A staff member told us, "The best bit about this job is the interaction with people and the things that you learn about them. It is interesting to learn about people and their histories."
- Staff recorded the care and support they provided to people. This helped the provider make sure people received the care and support planned and agreed.
- People's care and support needs were reviewed at regular intervals to check this was continuing to meet their needs.
- The provider prepared reports for all involved in people's care, which set out people's progress in terms of their physical and mental health and wellbeing. This helped staff and those involved in people's care, check that the care and support provided was helping people achieve positive outcomes in relation to their physical and mental health and wellbeing.

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 had been identified, recorded and highlighted so that staff had access to relevant information about how they should be supported with these.
- The provider had made key information available to people in easy to read formats. For example, information had been provided to people about how to make a complaint about the service.

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 take part in activities and pursue interests that were important to them. One person told us, "I get choice about what I do every day."
- People were encouraged to state their preferences and choices about the activities they did and the

provider made sure people could do these. This included outings in the community to the shops, coffee shop and meals at local cafes and restaurants.

- People's friends and family were free to visit with no unnecessary restrictions.

Improving care quality in response to complaints or concerns

- There were arrangements in place to deal with people's concerns and formal complaints. People had been provided information about what to do if they wished to make a complaint and how this would be dealt with by the provider.
- The provider had not received any formal complaints about the service in the last 12 months.

End of life care and support

- None of the people using the service at the time of this inspection required end of life care and support.
- The provider understood how to seek advice and support from the relevant healthcare professionals should this be required. This would help to ensure people received the necessary care and support they would need at the end of their life.

# 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; engaging and involving people using the service, the public and staff, fully considering their equality characteristics.

- The registered manager promoted a culture at the service that valued people, protected their rights and supported them to achieve positive outcomes in relation to their care and support needs.
- The registered manager worked directly with people and led by example. People knew them well. The registered manager was respectful and approachable and took a genuine interest in what people and staff had to say.
- Staff told us they worked well together and felt respected and supported by the registered manager. Staff felt able to raise concerns without fear of what might happen as a result. A staff member told us, "[Registered manager] is very professional. I have good communication with her."
- People's feedback and views about how the service could be improved were sought. For example, people's views were sought to plan activities and outings. Staff used people's feedback to plan and deliver activities that people wanted.
- Staff were provided opportunities through supervision and staff meetings to give their feedback about how the service could be improved and help people achieve positive outcomes.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; continuous learning and improving care; 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 provider maintained a system of audits and checks to monitor and review the safety and quality of the service. These helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support.
- The registered manager had the skills, knowledge and experience to perform their role, a clear understanding of people's needs and oversight of the service.
- People's feedback during the inspection confirmed staff delivered good quality support consistently.
- Staff were focused on meeting people's needs and helping them to achieve positive outcomes in relation to their care and support.
- The registered manager understood their responsibility to comply with regulatory and legislative requirements. During the inspection we noted notifications the provider is required to submit to CQC when DoLS authorisations had been obtained for people, had not always been sent in a timely manner. We discussed this with the registered manager and were satisfied this was a genuine misunderstanding on their

part. They were now clear about this requirement and when to submit timely notifications. After this inspection all the relevant notifications were submitted by the provider.

- The registered manager gave honest information and suitable support, and applied duty of candour where appropriate.

Working in partnership with others

- The provider worked effectively with a range of healthcare professionals involved in people's care and support. They acted on their recommendations and advice to plan and deliver care and support that met people's needs and helped them achieve positive outcomes in relation to their safety and wellbeing.