

Partnerships in Care 1 Limited

Evergreen Lodge

Inspection report

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10 May 2017

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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

Evergreen Lodge provides accommodation and support for up to 12 men with mental health needs. The service does not provide nursing care. There were 11 people using the service at the time of this inspection.

This inspection took place on 26 April and 10 May 2017. The first day of inspection was unannounced and the visit was carried out by one inspector. At our last inspection in June 2015, the service was rated Good.

At this inspection we found the service remained Good.

People using the service felt safe and spoke positively about the support provided to them. They said staff treated them with respect. 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.

Medicines were stored, administered, recorded and disposed of safely. Staff were trained in the safe administration of medicines and kept records that were accurate.

There were enough staff on each shift to support people safely. Assessments were in place that reflected current risks for people at the service and ways to try and reduce these. Support plans were regularly reviewed and updated to ensure the care provided met people's changing needs.

People felt able to raise any issues or concerns and these were dealt with promptly and satisfactorily. There were clear procedures in place to recognise and respond to abuse and staff had been trained in how to follow these.

There was a registered manager in post however they were working their notice at the time of our inspection. Suitable arrangements had been put in place to manage the service whilst a new permanent manager was recruited and registered with CQC. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

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 remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

Evergreen Lodge

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 26 April and 10 May 2017. The first day of inspection was unannounced and the visit was carried out by one inspector.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. Prior to our visit we reviewed the information we held about the service. This included the previous inspection report and any safeguarding or complaints and notifications that the provider had sent to CQC. Notifications are information about important events which the service is required to tell us about by law.

During our visits we spoke with four people using the service, four members of staff and the registered manager. We observed care and support in communal areas, spoke with people in private and looked at the care records for three people. We also looked at records that related to how the home was managed.

Is the service safe?

Our findings

People told us they felt safe living at Evergreen Lodge and told us they liked living there. One person told us, "It's quality."

We saw a consistent team of appropriately trained staff worked at the service. There were adequate numbers of staff to keep people safe and help make sure their needs were met. The majority of staff spoken with said there were enough people on duty each day and said they felt safe working at the service. One staff member told us, "There are six staff on during the day, it's managed well."

People were protected by staff who knew how to recognise the signs of possible abuse. Training records showed that staff had completed safeguarding training and staff we spoke with confirmed this. They were able to describe the action they would take to protect people and to report any allegations of abuse.

Computerised care files seen included assessments of any risks associated with each person's support addressing areas such as behaviour, financial transactions and smoking. These were reviewed regularly with support plans updated to reflect any changes required. For example, we saw where a risk assessment had been completed following an incident and this was linked to a care plan detailing interventions required by staff. Alerts about potential risks were flagged to staff on the computerised records we looked at.

We looked at the homes system for reporting and monitoring incidents and accidents. These were recorded with a computerised system used to track each incident or accident. The registered manager signed off each report and these were monitored by the organisation.

People received their medicines safely. People using the service had medicines administration records (MAR) that were accurate and up to date. These were audited regularly. We found that records for medicines supplied in their original containers corresponded with the quantities of medicines being kept on behalf of people using the service. There were systems for the ordering, receipt and returning of medicines and records showed that staff received training to manage medicines safely.

The service also supported some people to manage their own medicines helping them work towards independent living. There was a structured process in place providing individualised support and monitoring depending on how independent people were.

There were suitable recruitment and selection processes for new staff. We looked at the personnel files for three members of staff. Each file contained evidence that criminal record checks had been carried out along with other important checks such as employment references and proof of identity documentation.

The premises were clean and well maintained when we visited and there were appropriate infection control procedures. The staff carried out regular checks on the safety of the environment. Regular checks took place, for example, of the fire alarms to make sure people were kept safe.

Is the service effective?

Our findings

Staff told us they received the training they required to help keep people safe and to meet people's individual needs. One staff member said that there was 'sufficient' training. Another staff member commented, "I have had quite a lot of training."

Following the transfer of the service to a new provider organisation, the records for training were being updated in line with their new systems. An existing matrix was in place showing that staff had attended mandatory training such as breakaway, safeguarding and life support. Care certificate training was used for new staff and current staff had completed NVQ training to national standards.

Staff were also supported through regular supervision and appraisal sessions which considered their role, training and future development. In addition to these formal one to one meetings, staff said they could approach the registered and deputy manager informally to discuss any issues they had.

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 who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

Records showed that staff had completed MCA and DoLS training that helped them to understand issues around capacity and support people effectively. There were no DoLS authorisations in place at the service. We saw people were able to come and go as they pleased and this was confirmed by the people we spoke to. Access to the property was monitored by staff to ensure people's safety. A person using the service told us that this helped them to feel safe in their home. One staff member commented, "People have a lot of freedom, they can come and go as they please."

Staff at Evergreen Lodge worked with relevant health and social care professionals to ensure people's mental and physical health needs were met. Daily notes documented contact with care co-ordinators to report any concerns about the person's health and support provided for people to attend health appointments.

People's nutritional needs were met. Staff supported people to prepare their own meals in a first floor kitchen area. Two people using the service had access to their own kitchen areas where they could prepare food independently. Group and individual cooking sessions were also held on a weekly basis.

Is the service caring?

Our findings

People told us they liked living at Evergreen Lodge and got on well with the staff. One person said, "The staff are polite here" Another person commented, "Five stars for the staff."

The atmosphere during our visits was relaxed and calm. Observed interactions between the registered manager, staff and the people who lived there were friendly and familiar. People shared jokes with staff and were free to go out as they pleased.

Staff talked about ensuring people were treated with dignity and respect and that their privacy was upheld. One staff said, "People are treated very well here, they are supported in what they wanted to do." Another staff described the atmosphere in the service as "homely and positive."

The staff were knowledgeable about people's needs and how to meet these. We saw staff always checking with the people using the service and agreeing what support they required. Staff we spoke with were able to describe people's likes and dislikes and how they liked to spend their days. For example, their occupation, interests and daily routines.

One to one sessions between people and their allocated key worker were held regularly. Notes documented on-going support with people in achieving goals such as managing their finances and accessing work. Minutes of regular meetings held with people using the service included discussion around activities, cooking sessions, a planned gardening project and rules around smoking. It was noted that these meetings were poorly attended and staff told us that it was difficult to engage people with these forums.

Information about people was stored securely and confidentially. The staff did not discuss people's needs in front of others. For example, staff made sure the office door was shut when sharing information about people during our inspection.

Is the service responsive?

Our findings

People using the service were supported to engage in activities. An in-house programme of groups and activities was in place however staff reported that attendance varied as people using the service were sometimes reluctant to engage with these. Activities on offer included a cooking group, mindfulness session and a move on group all held each week.

One staff member said, "We try to help people stand on their own feet. People are supported in what they want to do." Some staff told us that people using the service were difficult to engage and said they would welcome a renewed focus on recovery in the future.

One person went out for lunch with a staff member on one day we visited and another person had their Birthday celebrated by staff. There were plans for improvements to the garden with opportunities to involve people in the planting and upkeep of this area.

People received support that was responsive to their needs. Each person using the service had a support plan reflecting the care, treatment and support they needed. We saw the support plans were kept under review and updated regularly. For example, one person had a support plan in place to help them manage their own medicines. There were clear aims outlined for the plan and the interventions required from staff to help achieve these. Other support plans seen addressed areas such as behaviour and managing money.

Staff key working sessions held with people using the service were used to discuss people's goals and the plans in place for their support. Risks associated with people's support were considered with computerised assessments linking to the relevant support plans. For example, the risks associated with a person cooking independently.

Daily notes were completed for each person documenting their health, wellbeing and day to day activities. We saw references to people being supported to go shopping, attend health appointments and to prepare meals. Peoples support needs were discussed in handovers and team meetings.

Evergreen Lodge had a procedure in place to manage any concerns or complaints which was accessible to people using the service and other involved stakeholders. This set out the process which would be followed by the provider and included contact details of the provider and the Care Quality Commission. People told us they felt able to talk to staff or a manager if they had a concern or complaint. Records showed that any concerns or complaints raised were addressed appropriately.

Is the service well-led?

Our findings

A registered manager was in post at the time of our inspection however they informed us that they had resigned their position and were due to leave the service at the end of their notice period. The organisation notified CQC that the service would then be overseen by a peripatetic manager three days per week with support from the deputy manager until a new registered manager was appointed.

A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Staff felt supported by the registered manager. They said that the registered manager was available and they could talk to him or the deputy manager if they needed to. One staff member told us, "Both very supportive and very helpful." Another staff member said, "The management is supportive."

Staff we spoke with expressed concern about a recent change in the organisation running Evergreen Lodge and the impact of this on their morale. One staff member told us, "It's disruptive and it creates uncertainty. The third change we have had in recent years." Another staff member commented, "There is a lot of uncertainty, we try not to let it affect the people using the service." Staff comments were fed back to the registered manager at the time of inspection who was aware of the issues raised. He told us that he had requested a meeting for staff with senior organisational managers to enable them to discuss their concerns.

We saw regular quality checks were carried out looking at areas such as the environment, medicines and care records. New quality assurance systems were being introduced by the new provider organisation at the time of this inspection. The registered manager completed weekly reports about the service and all accidents and incidents through a computerised system.

Systems to monitor the effectiveness of staff performance and training were in place. Staff we spoke with confirmed they had received appraisals.

Records and information were held securely and confidentially.