

White Cliffs Lodge Limited

# White Cliffs Lodge

## Inspection report

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

# Summary of findings

## Overall summary

### Care service description.

White Cliffs Lodge is a privately owned service providing care for up to 15 people with learning disabilities. There were 13 people living at the service at the time of the inspection. The care and support needs of the people varied greatly. The accommodation comprises of two adjacent buildings. In one of the buildings there are six purpose built self-contained flats (known as 'The Court'). There were six people living in this part of the service and they were able to make their own decisions about how they lived their lives. They were able to let staff know what they wanted. They were encouraged and supported to be as independent as possible. Some of them were able to go out independently.

In the other building there was single occupancy accommodation for seven people (known as 'The Lodge'). The people in this part of the service needed more assistance and support with their daily activities. Some of them were not able to communicate using speech but used sign language or body language to express themselves.

### Rating at last inspection

At the last inspection, the service was rated good and requires improvement in the 'safe' domain.

### Why we inspected

We carried out an unannounced comprehensive inspection of this service on 6 July 2016. A breach of legal requirements was found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach of Regulation 12 of the Health and Social Care Act Regulated Activities Regulations 2014, Safe care and treatment.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for White Cliffs Lodge on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

At this inspection we found the service remained good and is now rated good in the 'safe' domain.

### Why the service is rated Good

The service had improved since the last inspection. Potential risks to people were now identified and there was guidance on how to safely manage the risks. People received the interventions they needed to keep them as safe as possible. Risk assessments were designed to keep risks to minimum without restricting people's activities or their life styles and promoting their independence, privacy and dignity.

Staff recruitment policies and procedures had been reviewed and a new system was in place. This made sure staff were fully checked before they started working with people to ensure they were of good character

and had the necessary skills and experience to support people effectively. Further details of how decisions were made to employ staff who may need to be monitored were in place.

People received their medicines safely and when they needed them. On the first day of the inspection not all medicines were stored at the correct temperature to make sure they worked effectively. The room temperatures where medicines were stored were not consistently recorded. Staff took immediate action to address this issue. On the second day of the inspection all medicines were stored safely and at the recommended temperatures.

Regular health and safety checks were undertaken to ensure the environment was safe and equipment worked as required. Regular fire drills were completed.

Safeguarding procedures were in place to keep people safe from harm. These procedures had been followed by the registered manager when necessary. Staff had been trained in safeguarding adults and they knew what action to take in the event of any suspicion of abuse. Staff knew about the whistle blowing policy and were confident they could raise any concerns with the registered manager, or outside agencies.

There was enough staff on duty to keep people safe and give them the care and support that they needed.

## 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 ●

We found that action had been taken to improve safety.

Potential risks to people had been identified and recorded and there was clear guidance in place to help manage the risks. Regular checks were carried out on the environment and equipment to ensure it was safe and fit for use.

There was enough staff to keep people safe. Staff were checked before they started working at the service.

Medicines were managed safely and immediate action was taken when medicines were not stored at the recommended temperature.

Staff had received training and knew how to recognise and respond to different types of abuse.

# White Cliffs 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 was planned to check 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.

We undertook an unannounced focused inspection of White Cliffs Lodge on 31 March 2017. We returned to the service on the 4 April 2017 as on the first visit the registered manager was not available and we could not access staff records.

This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our 2 June 2016 inspection had been made. We inspected the service against one of the five questions we ask about services: is the service safe? This was because the service was previously not meeting some legal requirements. This inspection was carried out by one inspector.

On this occasion we did not ask the provider to complete 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. This was because we inspected this service sooner than we had planned to. We looked at previous inspection reports and notifications received by Care Quality Commission. A notification is information about important events which the provider is required to tell us about by law, like a death or a serious injury.

During the inspection we spoke with five people, six staff members and the registered manager. We looked at three people's care plans and the associated risk assessments and guidance. We looked at a range of other records including medicines records and audits, maintenance records, four staff recruitment files and staff rotas.

# Is the service safe?

## Our findings

People told us and indicated they felt safe living at the service. They were relaxed in the company of staff. People approached staff when they wanted anything. When people could not communicate using speech the staff were able to understand what they wanted and needed. Staff were able to interpret people's sounds, gestures and body language. The staff reacted quickly if people became distressed or anxious. Staff knew people well and said they had built up good relationships with the people they supported.

At the last inspection in June 2016 risks to people had been identified and assessed but guidelines to reduce risks were not always available or were not clear. At this inspection improvements had been made. There were risk assessments in place when people had been identified as having behaviours that might be challenging. People received consistent and appropriate care from staff, as the guidance was available to tell staff what they needed to do to support people in the way that suited them best.

Some people were identified as being at risk from having unstable medical conditions like epilepsy and seizures. Other people were at risk of choking. There was information available to give staff the guidance on what to do if these risks actually occurred. Information on how to manage the risks were available and was clear and precise. Staff knew exactly what to do in these risky situations.

Steps had been taken to eliminate risks or keep them to a minimum, such as when people were undertaking household tasks, attending to their personal care, monitoring their health and when people went going out in the community.

At the last inspection details of how decisions were made to employ staff who may need to be monitored, were not in place to ensure they did not pose a risk to people. Some of the recruitment documents, such as photographs or references were not in the files for some members of staff. These documents were kept at head office but needed to be verified. At this inspection improvements had been made. The provider had reviewed their recruitment policies and procedures and the shortfalls had been addressed. Recruitment procedures were thorough to make sure that staff were suitable to work with people. Written references were obtained and checks were carried out to make sure staff were of good character and were suitable to work with the people. Disclosure and Barring Service (DBS) criminal records checks had been completed. The DBS helps employers make safer recruitment decisions and helps prevent unsuitable people from working with people who use care and support services.

Medicines were stored securely in each person's bedroom. People received medicines at the right time and if they needed support the staff helped them. Staff accompanied each person to their room to support them to take their medicines in private. Each person had an individual medicine record chart showing their personal details and the medicines they were prescribed and when they should take them. People received their medicines when they needed them.

On the first day of the inspection the room temperatures where medicines were stored had not been consistently taken and monitored by staff. Some of the room temperatures exceeded the recommended

limits. The staff took immediate action to address the issue and purchased ice blocks that could be placed in the people's medicine cupboards. On the second day of the inspection all room temperatures had been checked and were within the recommended limits.

Some people were prescribed medicine on an as and when basis (PRN) for pain relief or anxiety. There was clear guidance in place so staff knew when people might need these medicines and how much they should take.

There were appropriate arrangements in place for obtaining, recording, administering and disposing of prescribed medicines. There was evidence of stock rotation to ensure that medicines did not go out of date. Bottles of medicines were routinely dated when they were first opened. Staff were aware that these items had a shorter shelf life than other medicines, and this enabled them to check when they were going out of date.

Staff carried out regular health and safety checks of the environment and equipment to ensure people's safety. These included ensuring that electrical and gas appliances were safe. Water temperatures were checked to make sure people were not at risk of scalding. Regular checks were carried out on the fire alarms and other fire equipment to make sure they were working properly. People had a personal emergency evacuation plan (PEEP) and staff and people were regularly involved in fire drills. A PEEP sets out the specific physical and communication requirements that each person has to ensure that they can be safely evacuated from the service in the event of an emergency.

Accidents and incidents were recorded by staff. The registered manager assessed these to identify any pattern and took action to reduce risks to people. Incidents and accidents were discussed with staff so that lessons could be learned to prevent further occurrences.

Staff had received training on keeping people safe. They were able to recognise the different types of abuse and told us what actions they would take if they believed someone was at risk and how they would report their concerns. Staff understood what they needed to do should they witness bad practice. They were aware of the whistle blowing policy and the ability to take concerns to agencies outside of the service if they felt they were not being dealt with properly.

People were protected from financial abuse. There were procedures in place to ensure that all money received and spent was accounted for. Money was kept safely and was accessed by senior staff only. People could access the money they needed when they wanted to.

There was enough staff on duty to meet people's needs and keep them safe. The staff team knew people well. People said that there was always enough staff around if they needed anything. Staffing was planned around people's hobbies, activities and appointments so the staffing levels went up and down depending on what people were doing. The registered manager made sure that there was always the right number of staff on duty to meet people's assessed needs and they kept the staff levels under review.

If staff were unavailable, because of sickness or other reasons the rest of the team tried to cover the shortfall. Agency staff were used when necessary. The registered manager told us that they asked for the same agency staff so that people received continuity of care. The provider was recruiting new staff to fill vacancies.

There was an on-call system in place, which was shared between different managers employed by the provider. Staff told us that they could always contact a member of the management team should they need additional support or guidance.

