

Haydon Park Lodge Limited

Haydon Park Lodge

Inspection report

7 Haydon Park Road Wimbledon London SW19 8JQ

Tel: 02085400172

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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?	Outstanding 🌣
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service:

Haydon Park Lodge is a residential care home providing accommodation and personal care to 11 people who have a learning disability. One person was in hospital at the time of our inspection.

People's experience of using this service:

- People told us they loved living at Haydon Park Lodge. They were cared for by a long-standing group of managers and staff who respected them and actively promoted their rights, welfare and independence.
- People using the service had ownership of the service, felt it was 'their home' and knew each other and staff very well.
- People could access a range of interesting things to do. They were supported to enjoy a range of activities which enhanced their lives. This included support to enjoy swimming, football, evening clubs, day centres and going out in the community doing things they liked.
- People were supported to keep in touch with relatives and friends who were important to them.
- People had access to the healthcare they required. Staff had been provided with clear guidance so people would receive the support they needed if they required emergency health care.
- Staff understood people's safety needs well and supported people so their individual risks were reduced. People were supported to have their medicines safely, by staff who were competent to do this.
- The environment at the home was clean, well maintained and regularly checked. The risk of accidental harm or infections was reduced as staff used the resources and equipment provided to help ensure this.
- There were sufficient staff to care for people. Staff received effective training and support to develop the skills they needed to care for people.
- People's care needs were assessed and detailed support plans put in place based on their individual needs and to promote their well-being. These were reviewed regularly and kept up to date.
- People, their relatives, staff and other involved healthcare professionals were encouraged to make any suggestions for improving the care provided and the service further.
- There was an open and transparent and person-centred culture with good leadership evident. The provider, registered manager and the staff team were committed to providing high quality person centred care and support. They reflected on the support provided and made constant improvements to enhance this
- •The outcomes for people using the service reflected the principles and values of Registering the Right Support. For example, people's support focused on them having maximum choice and control in their day to day lives.
- We found the service met the characteristics of a "Good" rating in most areas; Outstanding in caring.

More information is available in the full report.

Rating at last inspection:

At our last inspection, the service was rated Good. Our last report was published on 20 September 2016.

Why we inspected:

This inspection was part of our scheduled plan of visiting services to check the safety and quality of care people received.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our inspection programme. If any concerning information is received 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 effective?	Good •
The service was effective	
Details are in our Effective findings below.	
Is the service caring?	Outstanding 🌣
The service was exceptionally 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.	



Haydon Park Lodge

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

This inspection was carried out by one adult social care inspector.

Service and service type:

Haydon Park Lodge 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:

Our first day of inspection was unannounced. Inspection site visit activity started on 10 January 2019 and ended on 22 January 2019.

What we did:

We spoke with 10 people using the service to ask about their experience of the care provided. Written feedback was received from one care professional following our visit.

We spoke with the registered provider, the registered manager and four staff members. We looked at two people's care records, three staff files and other records relating to the management of the home.



Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People using the service said that staff treated them well. One person said, "I'll tell [the provider and registered manager] if anyone makes fun of me." Another person told us, "I feel safe. I don't feel threatened."
- The registered manager and staff understood their responsibility to safeguard people from abuse.
- •Staff had received safeguarding training and knew what action to take in the event of any concerns for people's safety and wellbeing. One staff member said, "I can speak to [the provider and registered manager]. They listen to me."

Assessing risk, safety monitoring and management

- People using the service told us they liked living at Haydon Park Lodge and felt safe there.
- •Staff understood people's individual safety risks well. Staff used this knowledge when supporting people. For example, when people wanted assistance to move safely round the home.
- •People's care plans contained risk assessments which addressed their safety and support needs. For example, if people were at increased risk when out in the community or managing their own money. People's risk assessments were up to date and gave clear guidance to follow to reduce risks to people.

Staffing and recruitment

- •Staffing levels enabled people to have support when they wanted. We saw there were sufficient numbers of staff to care for people.
- •A long standing and experienced group of staff knew people well and provided individual personalised care tailored to their support needs. One person told us, "I love it here. The staff sort things out for me."
- •The provider continued to check the suitability of potential staff to care for people living at the home. Recruitment procedures made sure that the right staff were recruited to support people to stay safe.

Using medicines safely

- People's medicines were managed safely. Staff received training before they could administer people's medicines.
- People's medicines were stored and disposed of safely.
- The administration of medicines was regularly checked by the registered manager, so they could be assured these were being given as prescribed.

Preventing and controlling infection

- Staff were trained and understood their role and responsibilities, for example, around food safety.
- The home was clean and free of malodours when we visited. The provider and registered manager checked the home was kept clean and hygienic.

Learning lessons when things go wrong • Accidents, near misses and untoward incidents were documented and reviewed by the provider and
registered manager.



Is the service effective?

Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

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

- Most people living at Haydon Park Lodge had been there for a long time and the staff knew them very well.
- People's, their involved relatives' and other health and social care professionals' views were always obtained to inform the support provided. This helped to ensure people continued to be supported by staff who fully understood their needs and preferences.

Staff support: induction, training, skills and experience

- •Staff were supported to develop the knowledge and skills they needed to care for people. Relatives were positive about the way staff used their skills when caring for their family members.
- Staff gave us examples of the training they had undertaken, which was linked to the needs of the people they cared for. One staff member told us, "We have training with the local college." Records showed completed courses included mental health, autism, dementia, person centred care, safeguarding and medicines.

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

- The menus reflected people's known preferences and addressed where people needed specific diets. For example, softer pureed meals.
- •Staff made sure people had enough to eat and drink to remain well. We saw people's mealtimes were not rushed and alternatives were provided where someone did not like a dish. One person told us, "[The meals] are nice. I look on the menu and I can ask for something different." Another person said, "I don't like pizza. They know that and give me something else." We observed a staff member checking with people what they wanted to eat for dinner during our inspection.

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

- The home retained a very homely feel in line with its ethos and values. People using the service benefited from the use of multiple lounge areas, a bar, professional disco lighting installed for parties and a large dining space. People could decorate their bedrooms as they wished.
- •Adaptations and improvements continued to be made to meet people's needs. For example, additional shed space for storage in the garden had been recently added and plans were in place to improve the front area of the service.

Supporting people to live healthier lives, access healthcare services and support

•The registered manager had put systems in place so staff could work effectively with other health and social care professionals. For example, hospital passports helped ensure people would receive consistent

care from other organisations. The registered manager told us how they were supporting one person in hospital to help ensure the best health outcomes possible when being cared for there. Records confirmed this

• Up to date records showed that staff supported people to attend routine health appointments, for example, to see the GP or dentist.

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 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 can only be deprived of their liberty to receive care and treatment with appropriate legal authority. 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 any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- People were supported to be involved in decisions about their care. Staff gave us examples where people's decisions were respected. For example, if people did not want to do an activity or go to the day centre, staff supported people's choices.
- •One person had an advocate who met with them regularly. Advocacy services offer trained professionals who support, enable and empower people to speak up.
- •We found the MCA and associated Deprivation of Liberty Safeguards were applied in the least restrictive way, authorisations correctly obtained, and any conditions complied with.

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

People were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; equality and diversity

- People using the service lived in an exceptionally compassionate, kind and caring environment. Most people had lived together for many years and were supported by an equally longstanding core group of staff. This meant people knew each other and staff extremely well, creating a familiar, safe and nurturing space much more like a family home.
- We saw that people were happy and relaxed in 'their home', sharing jokes with staff and each other. Staff engaged with each person in a kind, friendly and familiar manner. One person told us, "The staff are lovely. They are so helpful." A relative told us "It's the best place" because of this kind, caring and homely environment provided to their family member.
- The provider, registered manager and staff integrated fully with people, sitting in the main communal lounge and dining room with them. This added to the homely and caring atmosphere, again resembling more a family home than a care home. One person commented, "I love it here. I'd give it 10 out of 10. The best." Another person said, "I like it here. They're all nice." A staff member commented, "It's very person centred. Like a big family."
- Staff actively promoted people's wellbeing. They were available to support people when they needed something and were seen to anticipate people's needs as they knew each individual so well. We saw many examples where staff recognised immediately that someone was anxious or upset and responded quickly to provide reassurance to them. These timely responses positively impacted on each person's level of wellbeing.
- Haydon Park Lodge had a strong visible person-centred culture. We observed caring, respectful and positive interactions throughout both our visits. Staff engaged meaningfully with people as individuals. They knew how to best communicate with each person and knew the things that were important to them. For example, the registered manager reassured someone about their plans for the day on several occasions, knowing this may be causing them anxiety. A care professional told us, "I am always happy that the staff have a good knowledge of the individual I visit. They are always able to give me updates and identify knowledge of person centred support." Another care professional said, "A well run home that provides person centred care to an impressive standard." We saw that a care professional had commented in a recent survey, 'A great placement. One of my top three homes in the country'.
- Staff worked to make sure that people were treated equally and that their protected characteristics under the Equality Act were respected and promoted. Staff had received training in equality and diversity and people's support plans reflected their spiritual and cultural needs. For example, some people were supported by the service to maintain their faith. The provider and one person using the service were lay Clergy and they facilitated regular Communions held in the lounge of the home. Some people using the service had been supported to go on a religious pilgrimage to Lourdes by staff in 2018. Another person was

supported by staff to say their prayers each night as part of their evening routine.

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

- People had ownership of the service. The majority of people had lived at Haydon Park Lodge for many years and the service was clearly 'their home'. People not only knew each other very well but benefited from positive and supportive relationships with a long-standing group of staff who had known most them for many years. One person said, "It's a family affair. Everything is fine. I've never been so happy." Another person commented, "I like the place. I don't want to move out of here." A relative commented in a survey," A wonderful place to live."
- The ethos of the home was to celebrate each person as a unique individual, make them feel valued and help them to achieve the things they wanted. Staff spoke respectfully to people and were clearly aware of people's individual needs and preferences. They asked the person's permission before doing something and engaged people in everything they did. They supported people to express their views and make everyday decisions for themselves. For example, about what they wanted to do, where they wanted to go and what they wanted to eat. We saw one person sitting on a sofa in the main office having an afternoon nap whilst the provider worked on the computer.
- The service had an exceptionally person-centred culture with supportive open and honest relationships between people and staff. Staff could tell us in detail about people's interests, personalities, preferences and backgrounds. Conversations took place about shared interests such as football and cinema.
- The provider, registered manager and staff promoted positive outcomes for people and upheld their well-being on a day to day basis. We saw multiple examples where people were helped to feel reassured, relaxed and comfortable through the responses of staff. Each person's daily routine was clearly known well by staff including any triggers that may cause them upset or distress. For example, facilitating people to carry out their routines on returning home from the day centre or using set phrases to reassure someone.
- People could have visitors whenever they wanted and people were supported to keep in touch with their family and friends and maintain their relationships with the people who were important to them. A relative told us the service communicated well with them and said, "You can turn up anytime you like." Another person was supported to speak to their family member by phone on a regular basis, supporting a relationship important to their individual wellbeing.
- Where possible the home involved people's relatives in planning their care. Where one person did not have relatives, an independent advocate had been accessed to support them, Advocacy services offer trained professionals who support, enable and empower people to speak up.
- People were supported when staying in hospital with the registered manager and staff making sure that their needs and preferences were being met. A care professional told us, "It is my experience that residents from the home admitted [to hospital] are frequently visited by those known to them. This is often the manager but I have also seen residents from the home come to visit their peers too."
- Some support plans were written using Makaton with pictorial illustrations to make them accessible to people and involve them in the planning process. Makaton is a language programme using signs and symbols to help people to communicate.

Respecting and promoting people's privacy, dignity and independence

- Respect for people's privacy and dignity was at the heart of the service at Haydon Park Lodge. Staff understood it was a person's human right to be treated with respect and dignity. They listened to people, respected their choices and upheld their dignity.
- People consistently told us that staff respected them and their right to privacy. One person told us, "I go to my room if I want to be alone." Another person said, "I go to my room for peace and quiet."
- Relatives confirmed to us that people's privacy and dignity was always maintained. One relative said, "They are such nice people [the staff]. [Relative] has never been happier."

- People's confidentiality was supported and information about people was held securely. Staff respected people's privacy by not talking about them in front of other people and knocking on their bedroom doors and waiting for a response before entering.
- People were encouraged to maintain and develop their independence as far as possible. For example, participating in cooking and cleaning. The approach was for staff to do things 'with' rather than 'for' people. People's support plans included goals which were meaningful to them and their progress was monitored and reviewed to help them achieve these. For example, travel training for one person and employment for another individual.



Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- •People's support plans provided staff with detailed guidance on people's care, health and well-being. They were written in the first person, documenting people's likes and dislikes and strengths and needs. For example, one person's plan gave clear guidance about how to keep them safe, the things they could do well themselves and the things they found more difficult.
- The views of people, their relatives, staff and other health and social care professionals were listened to and incorporated into the support plans.
- The support plans were regularly reviewed. This helped to ensure people's care reflected their current preferences and needs.
- •Where people wanted support to keep in touch with people who were important to them, this was reflected in their support plans. For example, one person's plan talked about how important their family relationships were to them and the support required to maintain these.
- People had a range of interesting things to do within the home and externally. Activities which reflected their interests included swimming, football, evening clubs, day centres and going out in the community doing things they liked. Some people attended day centres whilst others were in employment. One person said, "I go swimming, go shopping and watch football on Saturdays." Regular bingo, cinema and football nights were held along with parties utilising the permanent bar and disco lighting. A relative told us, "They have some great parties."
- People were supported to live as ordinary a life as any citizen. The home was registered with CQC before Registering the Right Support and Building the Right Support guidance had been developed. The support provided was consistent with this guidance promoting choice, independence and inclusion.
- •People received information in accessible formats and the registered manager knew about meeting the Accessible Information Standard. The Accessible Information Standard makes sure that people with a disability or sensory loss are given information in a way they can understand. NHS and publicly-funded adult social care services are legally required to comply with this standard. The standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of people who use services. All the policies and procedures had been made available in accessible format for people using the service. The registered manager told us that this work was on-going to make sure all documentation was all made accessible to the people living at Haydon Park Lodge.

Improving care quality in response to complaints or concerns

- People and their relatives felt able to speak to the provider and registered manager if they had any concerns or complaints. One person told us, "I'd talk to [the registered manager] or staff. They sort things out." A relative commented, "We never have any problems."
- Systems were in place to manage and respond to complaints or any concerns raised, to drive through

improvement in the home. There had not been any complaints in the last 12 months.

•The complaints procedure was available in an accessible format for people using the service.

End of life care and support

- A pack of documentation had been prepared for one person including a Do Not Attempt Cardio Pulmonary Resuscitation (DNACPR), a record of best interest decisions, an updated hospital passport and their choices and wishes for the end of their life.
- 'When I die' documents had been completed for other people with help from their relatives, capturing people's wishes following death.



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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The culture of the service was caring and person-centred. People were always at the centre of the support focusing on their needs and wishes. One staff member told us, "It's how it should be."
- The service was commended by care professionals in comments seen in recent surveys sent out by the home. A care professional wrote that Haydon Park Lodge was 'A fantastic place to live."
- •We saw people were happy and enjoyed living at Haydon Park Lodge. People's relatives were positive about the way the home was run. People, their relatives and staff all said that the provider and registered manager were approachable and responsive.
- •Staff told us they were motivated and supported to provide high-quality care. They enjoyed working at the home and said they would recommend it to other people.
- The registered manager knew their responsibilities for duty of candour and the action required to inform all the relevant people when incidents occurred.

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

- The registered manager was supported by the provider who was fully involved in the running of the service. The home was managed well and people's care needs were met. The provider and registered manager were a constant visible presence in the service. People, their relatives and staff could approach them whenever they wanted.
- The provider and registered manager had run the home successfully for many years. Staff understood their vision and ethos for the service and how they were expected to support people.
- •The registered manager regularly checked the quality of the support provided. For example, checks were made to ensure people's medicines were administered as prescribed. The registered manager also checked staff received appropriate training and supervision, that support records were up to date and that the environment was safe.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People told us they could speak with the provider, registered manager or staff if there was anything they wished to discuss or change. One person said, "I can talk to [the registered manager]. He listens to me."
- Feedback was also obtained from surveys completed by people, their relatives and care professionals was all positive. Comments included, 'We are happy and [family member] is happy", "The staff are cheerful and hardworking" and "I cannot conceive room for improvement."

- The service strong links with the local and wider community, and other organisations to support people's preferences and meet their needs. For example, with local groups, day centres and local shops.
- The registered manager and staff worked well in partnership with other services, for example, the GP, social workers and other involved healthcare professionals.