Renal Health Limited

Manor Lodge Care Home

Inspection report

32-33 Victoria Avenue
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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:
Manor Lodge is a residential care home providing accommodation and personal care to 21 adults in one adapted building. At the time of this inspection, the home was full. People who live at Manor Lodge have varied health and social care needs, such as mental health, physical, learning disabilities and dementia.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

People's experience of using this service and what we found
People had seen an improvement to the environment they lived in. The provider had invested in the home with new furniture, flooring and decoration. The maintenance work required after our last inspection was completed. Plans were in place to further enhance the communal areas.

Staffing levels had increased. People were cared for by staff who were well supported by the management team to provide high quality, person-centred care. Staff recruitment continued to be safe and staff training was up to date. Competency checks were carried out to ensure staff remained suitable for their role.

People's care needs were assessed and risks to their health, safety and well-being were identified and reduced. Staff gave support which met people's current needs. Records were well maintained to reflect this. Accidents and incidents were recorded and reported as required.

People felt safe living at Manor Lodge, with support from caring and friendly staff who knew them well. People's privacy and dignity were protected, and staff were respectful. Independence was encouraged, and people were involved in developing their care plans and making decisions.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

Staff supported people to engage in social activities and pursue their hobbies and interests. This helped to reduce loneliness and promote socialisation and community involvement.

The management team strove to achieve high standards through continuous improvement and development. The quality and safety of the service was monitored through checks and audits.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update
The last rating for this service was requires improvement (published 23 June 2018). We identified two breaches of regulations related to the premises and staffing. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection, we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected
This was a planned inspection based on the previous rating.

Follow up
We will continue to monitor information we receive about Manor Lodge until we return to visit as per our re-inspection programme. If we receive any concerning information 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?

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.

Manor 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. This inspection was planned to check 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 Care Act 2014.

Inspection team
The inspection was conducted by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type
Manor Lodge is a 'care home'. People in care homes receive accommodation and personal care as 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
This inspection was unannounced.

What we did before the inspection
We reviewed the information we had received about Manor Lodge since the last inspection. We contacted the local authority and other professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection
We spoke with six people who lived at Manor Lodge about their experience of the care provided. We spoke

with four members of care staff, the cook, the registered manager and the operations manager.

We reviewed three people's care records and medicine records. We looked at information kept regarding the management of the service. This included two staff files and records related to the quality and safety of the service.

Good

Is the service safe?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Preventing and controlling infection

At our last inspection the provider had not ensured the premises were being safely maintained, with a suitable level of hygiene. The provider had also failed to ensure staffing levels were sufficient to provide safe, effective and person-centred care. These were breaches of regulation 15 (Premises and equipment) and regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found enough improvement had been made and the provider was no longer in breach of regulations 15 and 18.

● The premises were tidy and well maintained. One person said, "It's canny! Well maintained and clean." Decoration and repair work had been completed and plans were in place to further enhance the home with new furniture in communal areas. Regular checks were carried out to ensure the premises, utilities and equipment were safe.
● The home was clean and comfortable. Staff followed best practice guidelines in relation to the control and prevention of infection. Staff wore disposable gloves and aprons when undertaking personal care tasks.
● People's needs were risk assessed and risk reduction measures were in place. The assessments promoted positive risk taking and independence.
● A record of accidents and incidents was used to monitor, and review people's care needs and update risk management plans. This helped to reduce the chances of repeat events.
● The local fire service had recently inspected the home and found no major issues. Minor actions were being addressed. Personal emergency evacuation plans ensured staff could safely support people to leave the premises in an emergency.

Staffing and recruitment
● Staffing levels had improved. There were now plenty of staff to support people safely and effectively. One person said, "There are quite a few staff and they come to help quickly."
● The staff team had a mix of skills and experience to deliver safe care. The registered manager regularly reviewed staffing levels and altered them to meet people's changing needs.
● The staff recruitment process was safe and thorough. Staff were properly checked prior to them working with people.

Systems and processes to safeguard people from the risk of abuse
● People felt safe living at Manor Lodge and were protected from avoidable harm. One person said, "Staff being around you, making sure you are alright, that makes me feel safe."

● Staff were trained and recognised the risks of harm. They acted quickly to safeguard people when necessary.
● The registered manager followed a comprehensive system to report, record and monitor matters of a safeguarding nature to reduce risks and avoid harm.

Using medicines safely
● Medicines were well managed and stored securely in line with best practice. Staff followed a clear system to ensure the safe ordering, storage, administration, recording and disposal of medicines.
● Medicine administration records were well maintained and up to date.
● Staff carried out routine checks of medicines and the registered manager had oversight of these. The registered manager carried out a monthly audit to ensure people had received their medicines as prescribed. This was overseen by the operations manager.

Learning lessons when things go wrong
● The management team had made significant improvements to the service following the last inspection. Lessons learned were shared with staff to continually improve the support they provided to people.
● The operations manager shared lessons learned throughout the provider organisation to encourage best practice amongst all services.

Good

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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
- Staff proactively supported people to set and achieve good outcomes. People's needs had been fully assessed which included, physical, mental and social needs.
- Support plans described people's needs, wishes and choices about how their care should be delivered, to enable them to have a good quality of life.
- People's care and support was regularly reviewed to ensure it reflected their current needs.
- Staff supported people in line with best practice guidance and relevant legislation.

Staff support: induction, training, skills and experience
- People were supported by trained and experienced staff whose skills and knowledge were up to date. One person told us, "Staff are fully trained."
- New staff had completed a thorough induction and, training in key topics continued to be refreshed. This included courses specifically designed to increase staff awareness of topics relevant to people's current needs, such as diabetes and epilepsy.
- Staff were well supported by the registered manager. They attended regular supervision and appraisal sessions which checked their competence, identified learning needs and development areas. The registered manager observed staff perform their duties daily.

Supporting people to eat and drink enough to maintain a balanced diet
- People's nutritional needs were met, including any specialist diets they had. There was a new cook in post who had met with people to discuss new menu plans and dietary requirements.
- People enjoyed a positive meal-time experience. Their comments included, "We have choice, we can have something else, we choose from a menu what we want and there are always snacks" and, "We have curries, full English breakfasts and puddings. (Cook) makes lovely pies, you can always have more, there is lots of choice."
- The registered manager had helped one person, with support from an occupational therapist, to access the kitchen facilities themselves. A previous safety issue had now been resolved and the person was enjoying increased independence in the kitchen, which was important to them.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support
- The registered manager had worked closely with external professionals to effectively relocate six people from the provider's sister service to Manor Lodge. People told us the move between services had been successful and they were happy with their new home.

● The registered manager understood the importance of people receiving timely interventions from external professionals when their needs changed. This helped people lead healthier lives and improve their well-being.
● The registered manager and staff had developed good links with local healthcare professionals. People had prompt access to GP's and district nurses through strong links with a neighbouring health centre.

Adapting service, design, decoration to meet people's needs
● Improvements to the premises had enhanced the service. People's bedrooms were personalised. One person said, "My room is lovely, just the way I want it." Communal areas portrayed a homely and welcoming atmosphere. Signage and other adaptations, such as new brighter corridor lighting, helped people to be more independent and reduced risks to people's safety.
● The six people relocated to Manor Lodge were integrated slowly and had spent time getting to know the other people before moving in. A relaxed and consistent approach had helped to avoid causing distress to people.
● Two people had been able to change their bedroom for one which helped improve their health, safety and well-being. One person who was a risk of falls had moved to a ground floor room to avoid unnecessary use of the stairs. Another person had chosen a bigger room with en-suite facilities. This had enabled them to re-train their bladder and reduce episodes of night-time incontinence.

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 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

● Staff were trained in the MCA and applied the principles to the support they provided, to ensure people's legal and human rights were upheld. Best interest decisions were made in accordance with legislation and people's wishes, with their families and external professionals involved.
● There were four people with legally authorised restrictions in place for their own safety and two applications were pending. Applications, authorisations and their expiry dates were tracked by the registered manager to ensure restrictions remained lawful.
● Due to recently granted restrictions, a keypad door entry system had been fitted on the front door of the home to keep people safe. People without restrictions in place had been given key fobs to exit and enter the home as they pleased.

Good

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 treated with kindness by staff who demonstrated caring values. People consistently told us staff were nice, friendly and supportive. One person said, "It really is OK living here, the staff say, if anything is bothering us, we just tell them."
- Staff displayed the right attitude and skills to deliver compassionate support which met people's individual needs. Staff knew people well and had time to understand people's wishes and choices, which they respected.
- Staff promoted people's rights and ensured they were not discriminated against in any way. An equality and diversity policy was in place and staff were trained to ensure people were treated with respect regardless of their sex, age, disability or beliefs.

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

- Staff continued to support people to be involved in and make decisions about their care. Staff recognised when people needed help from others. Staff assisted people to obtain advice, guidance and external support, such as an independent advocate. One person said, "I would go to (staff member), they would help me deal with a problem."
- Staff made sure people had the information they needed in a format they could understand to enable them to make informed decisions.
- Staff had time to engage with people and provide meaningful emotional support. One person said, "Staff are really good, if you want, you can talk to them."

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect.
- Staff were good at recognising when people were in discomfort or distress and acted to provide support. People received consistent support from regular staff who understood them. People's right to privacy and confidentiality was respected. Staff were discreet with their interventions when needed.
- People had choice and control over their lives. Staff encouraged people to maintain and develop their independence. This had helped people to achieve goals, such as accessing the community on their own.
- People were supported to maintain relationships with their family, friends and community.

Good

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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 were involved as much as possible in developing their care plans alongside relevant external professionals and family members. Care plans were regularly reviewed.

● People had choice and control over how their support was delivered. If necessary, family members or independent advocates supported people to express their views, which were listened to and acted on by staff.

● There was a holistic approach to assessments and care planning which focussed on how staff could help people to achieve personal goals and positive outcomes. Staff delivered person-centred care and support in line with people's preferred routines, wishes and choices.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

● People had communication care plans in place. Staff had identified where people had communication needs and recorded what support the person needed to communicate effectively. This included how people should be given information and how to make sure they understand it, such as verbally, written in large print or easy-read language.

● Staff ensured people's communication needs were shared appropriately with external professionals, so any information they provided to people could be clearly understood.

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

● Social care plans were developed to help reduce social isolation and provide stimulation to people. They reflected people's individual needs, wishes and preferences with regards to activities, hobbies and interests which enhanced their lives. One person said, "We play bingo, have activities and quizzes. Staff take us out. Yesterday, I went to Tynemouth."

● Staff facilitated meaningful activities and arranged for outside companies to visit the home, which engaged people, promoted socialisation and reduced loneliness. Staff encouraged people to join in with communal activities as well as supporting people to access the local community. A karaoke night was very popular with people, along with bingo and professional singers.

● Staff encouraged people to make links within the local community and forge new friendships, as well as

maintaining relationships with family and friends. Since moving to Manor Lodge, one person had started to visit more places on their own. The registered manager told us, "Moving here has opened (person's) world up a bit more. They now visit four different cafés and feels safe and comfortable, chatting with the staff there."

Improving care quality in response to complaints or concerns

● One complaint had been made about the service since the last inspection. The registered manager had recorded, responded to and resolved it promptly.

● People and their family members knew who to complain to. People told us they were confident to raise issues and felt assured the registered manager would listen and sort the problem out.

● Any learning from complaints or minor issues was shared with staff to improve their practices and the service people received.

End of life care and support

● There was currently no-one using the service who received end of life care.

● Where they chose to, people had shared their end of life wishes which included religious, cultural and spiritual preferences. This would help staff to care for people appropriately when they were no longer able to express those wishes or in an emergency.

● Advanced care planning, emergency care and resuscitation preferences were recorded, where people had chosen to share these.

Good

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to 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

- The service was operated by a reliable and experienced management team who were passionate and motivated to provide person-centred care. Their shared values, which included empowering people and promoting independence were embedded in the service and demonstrated by the staff. One person said, "The home is well-managed, they do everything well. There is nothing bad."
- The registered manager had a solid understanding of providing consistently safe, high-quality care to help people achieve positive outcomes.
- Staff felt respected and valued at work. They were listened to and supported by the management team to deliver person-centred 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 registered manager was open and honest when dealing with concerns. They had developed a trusting relationship with people and staff. People and staff were confident the registered manager would act in a responsible manner if something did go wrong.

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

- The management team and staff had a clear understanding of their roles and responsibilities. They were enabled to provide a quality service because the policies and procedures in place included best practice guidance. Staff were given time to understand and refresh themselves with policies and procedures to ensure they were clear about their role.
- Governance and quality assurance were embedded into the service. Audits were regularly completed to monitor safety and quality. The registered manager was fully involved in the daily operation of the service. Checks were thorough, and any issues raised were addressed immediately.
- Audits were analysed by the management team, to look for key themes. The registered manager acted quickly to address issues and make or initiate improvements to the service.

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

- There was regular engagement with people to keep them involved in how the service was operated. One person said, "Staff definitely listen. I suggested an activity quiz, and this was started. It made me feel good."

● The registered manager welcomed any feedback and gathered people's views to help improve the service. One person said, "We are asked what we think, if we don't like something, we just tell them."
● Plans were in place to invest in an electronic feedback system which would give people and their visitors opportunity to provide instant feedback to the provider.
● Staff meetings gave staff an opportunity to be involved in how the service was run and share their ideas for improvements. Staff said the registered manager was approachable and listened to their thoughts and suggestions.

Continuous learning and improving care
● The management team had improved the care people received following the last inspection. They told us lessons had been learned. They had a good understanding of their priorities and challenges and had taken steps to address issues. There was a clear plan in place to enhance the service further. One person said, "There is a good atmosphere now. I think the staff are happy in their work."
● The registered manager shared learning from incidents with the staff to continually improve the service and working practices.

Working in partnership with others
● The management team and staff had maintained positive relationships with external professionals and local businesses to help meet people's needs and achieve positive outcomes.
● Good links had been made with local shops and cafés, so they were familiar with people's needs and staff encouraged people to visit them. If people visited these places independently and become distressed, the staff there knew how to contact Manor Lodge for assistance.