

Liberty Lodge Limited

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Inspection report

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Date of inspection visit:
27 June 2019
01 July 2019

Date of publication:
07 August 2019

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

Liberty Lodge is a support living service providing accommodation and personal care to four people with a learning disability and a range of needs. The service is provided in one house, where up to four people live independently, and have their own tenancy agreements for the rooms they occupy. The same four active males continued to live in the service.

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 enjoyed living at the service and had done for a number of years. The staff team were committed to enhancing people's self-worth and well-being. People were living fulfilled lives and had been able to achieve things for the first time including life skills, taking part in activities and going abroad on holiday. Relatives told us of the improvements in people's quality of life because of the support provided by the staff at Liberty Lodge.

People's safety had been promoted and potential risks posed to people had been reduced. Staff understood their responsibilities about safeguarding and had been appropriately trained. People's safety in the event of an emergency had been considered. Equipment was serviced and maintained. People if required received their medicines safely as prescribed by their doctor.

Staff support was planned in conjunction with people taking into account their social activities. Staff continued to be recruited safely following the provider's policy and procedure.

People's care centred around their needs and preferences. Staff treated each person with compassion and kindness, and continuously used feedback to improve the service.

Staff felt there was an open culture where their views were listened to and respected. Staff felt supported in their role by the management team and received guidance when needed. The registered manager worked alongside the care staff to support them and observe practice.

Staff had been trained to meet people's needs and worked well together to ensure people received joined up care and support.

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.

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

Rating at last inspection

The last rating for this service was Good (published 06 December 2016).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service 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.

Liberty Lodge Limited

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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Liberty Lodge is a supported living service. People 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. Liberty Lodge provides personal care and support to people with a range of needs. The service is provided in one house, where up to four people live independently, and have their own tenancy agreements for the rooms they occupy.

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

We gave the service 48 hours' notice of the inspection. The registered manager was given notice as it is a small service where people generally go out daily.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and 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 of this information to plan our inspection.

During the inspection

We spoke with the four people who used the service and two relatives about their experience of the care provided. We spoke with four members of staff including the registered manager, the provider and two care staff.

We reviewed a range of records. This included two people's care records, which included care plans, risk assessments, daily care records and medicines records for one person. We looked at one staff file in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including a sample of audits, health and safety checks, accidents and policies and procedures.

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 Good. At this inspection this key question has remained the same, Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People had been supported to understand their rights and that discrimination was not acceptable when out in the community. If people had experienced abuse from members of the public, they had been supported by the staff to raise this with the local authority safeguarding team.
- People knew their staff team well and felt confident to speak to them about any concerns they had within the service or out in the community.
- Staff had been trained in safeguarding and understood the action they should take if they had any suspicions.
- Staff continued to follow the provider's policy and procedure.

Assessing risk, safety monitoring and management

- Potential risks posed to people had been consistently assessed and there was detailed guidance for staff to mitigate any identified risks.
- People were supported to take informed risks such as, smoking or independently using public transport. Staff worked with health professionals to inform people of the potential risks and the action they could take to reduce these. People then made an informed choice.
- Staff followed guidance to support people with behaviour that could be challenging to themselves or others. Staff knew people well and understood the strategies that were in place to reduce any potential incidents before they occurred.
- Regular checks were completed on the environment and equipment used to make sure people remained safe.

Staffing and recruitment

- People continued to receive the support to meet their needs.
- Staffing was planned in conjunction with people, taking into account their health appointments, social activities and holidays.
- The provider continued to follow safe recruitment procedures. There has been one member of staff recruited since the last inspection; their file contained the required checks such as suitable references, identity checks, a full work history and Disclosure and Barring Service (DBS) background check. DBS checks help employers to make safer recruitment decisions.

Using medicines safely

- People had been assessed and supported to manage their own prescribed medicines and self-medicate. A blister pack system was used which enabled the person to take their medicines independently.

- Systems were in place for the safe administration of medicines. Care plans contained information about the prescribed medicines, what it was for and the prescribed times.
- People's medicines were reviewed to ensure they were still required and effective.
- Staff had been trained and completed annual competency assessments with the registered manager.

Preventing and controlling infection

- Staff had been trained and understood the importance of preventing the spread of infection. Staff had access to protective equipment such as gloves when supporting people.
- The service was clean and well maintained. People were supported to clean their bedroom and the communal areas. People were supported to wash their clothes and change their bed linen.

Learning lessons when things go wrong

- Incidents and accidents involving people were recorded and monitored. The registered manager completed an analysis to identify any potential patterns or trends.
- For example, following a weekly visual safety check it was identified that a section of the stair carpet had frayed, and a window restrictor was loose. As a result, the stair carpet and window restrictors were immediately replaced; this was to prevent an accident.

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, 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

- People's needs were assessed with them prior to moving into the service. No new people had moved to the service since the last inspection. However, the registered manager told us that people living in the service would be consulted along with the potential new person to ensure their compatibility.
- Each person had been individually assessed by the registered manager with them and their relatives. People's protected characteristics such as their sexuality or religion had been explored at the assessment stage to ensure people's needs continued to be met.

Staff support: induction, training, skills and experience

- Staff told us they felt supported in their role by the registered manager and senior manager who they saw daily. Staff said everyone worked well as a team, offering support and guidance when needed.
- Staff spoke highly of the training they received which met the needs of people living in the service. One member of staff said, "The training is really good. I can ask for any courses and they will be happy to let me do it."
- New staff completed an induction which involved getting to know people, their routines and the support they wanted from staff. New staff worked alongside experienced staff, observing their practise.

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

- People were supported to maintain their nutrition and hydration with a varied healthy diet. People made their own food choices, and these were respected by the staff team.
- Staff supported people to try new foods and healthier recipes. People were able to plan their meals or chose what they wanted to eat on the day.
- People were supported to prepare their meals, and take positive risks including cooking. We observed one person preparing their lunch during our inspection.

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

- People had lived in the service for several years and were fully involved in the decoration of their home.
- People's bedrooms were individualised with photographs and pictures of family and interests.

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

- Some people had a health action plan in place which recorded the support required from staff to maintain their health. People's health needs were clearly documented within their care plans. Staff followed guidance

from health care professionals to ensure people remained as healthy as possible.

- People were supported to access a range of health care services such as, GP's and dentists to ensure they remained as healthy as possible. All appointments were clearly documented with any outcome or actions that needed to be completed.
- The registered manager and staff team had built up good working relationships with health care professionals such as the local GP. Staff were observant to changes in people's health for example, staff noticed that one person had been accessing the bathroom more frequently and supported the person to make a doctor's appointment.

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 we spoke with had a good understanding of the MCA and how to apply it. One member of staff said, "It's their choice and we respect their choices at all times."
- Staff told us they would do all they could to support the person in all decision making. Records showed where this was not possible, best interest meetings had supported the decision making.

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 remained the same 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 spoke highly of the staff team. Comments from people included, "I love it here the staff are excellent" and "The staff are very friendly, I like living here."
- Relatives spoke highly of the staff team and the support their loved one received. Comments included, "I have never known my brother to be so happy, I am so pleased he lives there" and "The staff are really good, they know him and work well with him. I haven't had to worry about him and we couldn't see him living anywhere else, neither could he."
- People had been supported to write their hobbies, interests and life histories within their care plans; staff knew people well including their likes and dislikes.
- Communication care plans included aids to assist communication such as the use of pictures as well as text. Staff understood people's preferred method of communication and supported this. For example, giving people time to answer their question in full.

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

- People were at the centre of their support and any decisions they made were respected and supported by staff. This included the activities they took part in on a day to day basis.
- Different methods were used to gather people's views and suggestions about the service. Formal tenant meetings had not been successful or well attended; instead the management team found holding ice cream and chat afternoons successful. These meeting enabled people to give their feedback in a relaxed informal way.
- People were involved in their care reviews with the local authority. Staff knew how and when to refer people to advocacy services. An advocate is a person who represents another person's interests in an independent way.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity at all times. During the inspection staff were observed knocking on bedroom doors before entering and seeking people's consent prior to any support tasks.
- Since our last inspection people had been supported to increase their independence and develop life skills. For example, one person was previously supported by staff to access public transport; however, they had been supported to gain the skills to travel independently.
- Another person was previously supported by staff with their food shopping; however, staff had explored different forms of communication aids to enable the person to complete this independently.
- People were supported to maintain relationships with people that mattered to them. Friends and family

were welcomed when they were invited by people..

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 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 individual person-centred care plans that were specific to their needs and preferences. People were supported to review their care plans and take active roles in making any changes to the care and support.
- People's support was planned to enable support at events such as festivals, air shows and local pub events. There was a flexible approach to the times of support to enable participation in events that were important to people.
- People were supported to live meaningful lives, reaching their goals to enhance their well-being. For example, one person's goal was to holiday in Mexico. Staff supported the person to budget, chose a hotel and go on their dream holiday. The person said, "I wanted to go there and I loved it."
- Another person had a passion for push bikes; the provider purchased a large outbuilding in the back garden to enable the storage of their bikes. The outbuilding was large enough to enable the person to restore and repair bikes.
- People were supported to widen their knowledge and gain work experience. One person had chosen to enrol on a French language course; another person gained gardening work experience to enhance their skills and knowledge.

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 were provided with information in a meaningful way that they understood. For example, pictorial shopping lists and easy read formats of documents.

Improving care quality in response to complaints or concerns

- People knew how to make a complaint or raise a concern to any member of staff. An accessible complaints policy and procedure was available to people. There had not been any complaints made in the 12 months prior to our inspection.
- Relatives told us they felt confident to speak with any member of staff if they were not happy and felt the matter would be dealt with promptly. Relatives told us they felt comfortable to speak with the registered manager and provider about anything.
- Any concerns were dealt with immediately so people did not need to make a formal complaint.

End of life care and support

- People living at Liberty Lodge were younger active males. However, some people had chosen to plan for care they wanted at the end of their life; this included funeral plans that had been written in conjunction with their relatives.

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 Good. At this inspection this key question has remained the same 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 registered manager promoted a positive culture, which was based on supporting people to achieve the best outcomes possible. One member of staff said, "I love working here, we are like one big family. It is such a small service and staff team, it is very intimate."
- Staff were proud to work for the organisation and were committed to empowering people to live the life they wanted. One member of staff said, "I enjoy supporting people to live the life they want. This is a lovely company to work for; there are no challenges to working here, I love working with the guys and for the company." The registered manager told us there was a commitment to build on people's self-belief to enable them to have choices and this was one of the company values.
- Staff felt there was an open culture where their opinions and suggestions were valued and acted on. The registered manager worked as part of the care team, role modelling support and empowering people to achieve their goals.
- The management team demonstrated that they knew people well and had the skills and experience to lead the service. During the inspection, people came into the lounge to speak with the management team about their day and forth coming plans. People were given the time they needed and were engaged in meaningful conversations. A relative told us they felt the management team treated people like a member of their own family and that their loved one also knew the team's family.

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 and registered manager understood their responsibility in line with the duty of candour. A policy was in place to ensure they were open and honest when things went wrong and that changes were made to prevent a reoccurrence.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager was passionate about their role, and demonstrated how they met their regulatory responsibilities, including ensuring their most recent CQC rating and inspection report was displayed.
- Staff told us they were clear about their role and responsibility as this was outlined in their job description. The registered manager used team meetings, communication books and daily handovers to provide feedback to the staff team and discuss any changes to their role.
- The registered manager and provider completed a series of checks and audits to assess the quality of the

service people received. External audits were completed by the local authority and a financial audit of people's finances. These audits generated action plans that were monitored and completed by the management team.

- The registered manager had submitted notifications to the CQC in line with their regulatory responsibility. Notifications are information we receive from the service when significant events happen, such as a serious injury.

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

- People, relatives and staff were involved in the development of the service. Annual surveys were sent out to gather feedback and enable an opportunity to make suggestions. Feedback from the 2018 survey showed people and relatives were very positive about the service.
- One person had requested some new plants for the garden and for a wall in the garden to be painted. The person was supported to choose and plant the new plants for the garden.
- People continued to be supported to be involved in the community. People were well known within the local community at pubs and shops. One person told us they were attending the local Fire Station fun day which they were looking forward to.

Working in partnership with others

- The service worked in partnerships with people, their relatives and health care professionals to ensure people received joined up care and positive outcomes. The team had formed strong working relationships with health care and other professionals.