

Linkage Community Trust

Oak Lodge

Inspection report

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Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

About the service

Oak Lodge is a residential care home providing accommodation and personal care to up to 9 people. The service provides support to people with a learning disability and autism. At the time of our inspection there were 9 people using the service.

People's experience of the service and what we found:

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessment and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support

People living at the service were supported in a safe way by staff who knew their needs well. This included supporting people with their medicines and any health needs they may have. Risks to people's safety were highlighted and measures were in place to reduce these risks. The environment people lived in was well maintained and the facilities available to people at the service enhanced their day to day lives.

Right Care

People's independence was promoted. People were encouraged, with the right support, to take ownership of daily living activities. This included helping with cooking, managing their personal care needs and cleaning their own rooms to enhance their independence. There were enough staff to support people to undertake the different activities of their choice.

Right Culture

The staff culture at the service was positive. The registered manager, their deputy and staff put the needs of people at the heart of everything they did. Staff were well supported with regular supervision and meetings; they underwent training to support them in their roles. People had been encouraged and supported to make friends and undertake a range of activities outside the service to enhance their continued independence. All the people we spoke with at the service told us they enjoyed living at Oak Lodge and staff supported them in the way they wanted to be supported.

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.

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 18 September 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service. We undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Oak Lodge on our website at www.cqc.org.uk.

Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well led.</p> <p>Details are in our well led findings below.</p>	<p>Good ●</p>

Oak 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. 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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 1 inspector.

Service and service type

Oak Lodge is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Oak Lodge is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was announced. We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed the information we held about the service including the last inspection report. We used the information the provider sent us in the provider information return (PIR). This is information providers are

required to send us annually with key information about their service, what they do well, and improvements they plan to make.

We used all this information to plan our inspection.

During the inspection

On the day of our visit we spoke with 5 people who lived at the service, the registered manager, deputy manager and a support worker. We reviewed a range of records. This included 3 people's care records and multiple medicine records. A variety of records relating to the management of the service, including quality monitoring documentation. Following our visit we telephoned 5 relatives and 3 members of staff. We also received documentation on staff recruitment.

Is the service safe?

Our findings

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

At our last inspection we rated this key question Good. At this inspection the rating is Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

People were safeguarded from abuse and avoidable harm.

- Everyone we spoke with felt safe at the service and trusted the staff who supported them. Staff were knowledgeable about their responsibilities in protecting people from abuse. They received regular safeguarding training and all were confident the registered manager would deal with any concerns raised to them.

Assessing risk, safety monitoring and management

The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.

- A number of people enjoyed accessing the community from the service. There were detailed individualised risk assessments in place to provide people with the level of support they needed to keep them safe and also promote their independence.

Staffing and recruitment

The provider ensured there were sufficient numbers of suitable staff.

The provider operated safe recruitment processes.

- People were supported by safe numbers of staff who knew them well and had received appropriate training for their roles.

Using medicines safely

People were supported to receive their medicines safely.

- There was clear information in people's medicines records to ensure people received their medicines at the times they needed them. The principles of STOMP (stopping over medication of people with a learning disability, autism or both) were used at the service.

Preventing and controlling infection

People were protected from the risk of infection as staff were following safe infection prevention and control practices.

- The service was clean and well maintained. Staff and the people who lived at the service knew what they should do to prevent the spread of infection. Staff supported people to maintain cleanliness within their

own environment.

Visiting in Care Homes

People were able to receive visitors without restrictions in line with best practice guidance.

Learning lessons when things go wrong

The provider learned lessons when things had gone wrong.

- The registered manager had robust processes in place to learn from events at the service via staff meetings, supervisions and handovers. One staff member detailed a debriefing they had received following an incident when a person was unwell during an outing in the community. They told us it was a very positive debriefing and focused on what they would do should the situation occur in the future.

Is consent to care and treatment always sought in line with legislation 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 MCA 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 Safeguarding (DoLS)

The provider was working in line with the Mental Capacity Act.

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 our last inspection we rated this key question Good. At this inspection the rating has is 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

There was a positive and open culture at the service.

The provider had systems to provide person-centred care that achieved good outcomes for people.

- People and relatives told us people had key workers who supported them achieve their own personal goals. One member of staff told us how they had supported a person to make changes to their room so it was how the person wanted. This included saving for items and supporting the person to paint the room themselves. A relative told us their family member was being supported to learn to read and write.

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 understood their responsibilities under the duty of candour.

- The registered manager made statutory notifications to the Care Quality Commission about events at the service and relatives told us staff at the service were very open with them should any issues about their family member arise.

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

The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.

- The registered manager and deputy manager undertook robust auditing processes with any actions required clearly identified. These audits fed into the provider's comprehensive electronic quality monitoring system that incorporated all aspects of people's care and the running of the service. This provided a clear oversight of the service and allowed senior managers to support the registered and deputy manager.

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

People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics.

- People were supported to have their say in the running of the service. At a resident's meeting earlier in the year they had asked for the conservatory to be turned into a games room. We saw this was in progress during our visit. Relatives told us they felt welcomed when visiting the home and were involved in their family members' lives at the service. One person was also an ambassador for the service within the Linkage group and were encouraged to act as a voice for people at the service.

Continuous learning and improving care

The provider had created a learning culture at the service which improved the care people received.

- The registered manager and their staff were supported by the provider to use the training modules in place to improve their knowledge of people's needs to support good outcomes for people. This included people's health and emotional needs.

Working in partnership with others

The provider worked in partnership with others.

- There was evidence in people's records of how staff had worked with external health professionals to improve the care people received. One person's relative told us how staff had supported their family member with numerous hospital appointments and worked collaboratively with the hospital teams. They told us this had had a very positive effect on both the person's experience and the relative's peace of mind.