

Coventry City Council

Copthorne Lodge

Inspection report

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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

Copthorne Lodge provides personal care for people, living in a purpose built scheme where there are 30 individual flats with shared facilities, such as a dining area and lounge areas. Staff provide personal care and support to people at pre-arranged times and in emergencies. Some people live at the scheme permanently whilst others live at the scheme on short term basis, whilst receiving care and support. There were 20 people receiving personal care when we inspected.

At the last inspection in March 2015, the service was rated as Good. At this inspection we found the service remained Good.

There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People continued to receive care and support from staff who understood how to keep them safe. Staff were available to meet people's needs and understood how to best support people and the risks to their health. Staff understood how to protect people from abuse and were clear about the steps they would need to take if they suspected someone was unsafe. People were supported by staff to have their medicines as prescribed and checks were made to ensure staff supported people with their medicines appropriately.

The service continued to be effective. Staff said training helped them do their job and gave them the right skills to meet the needs of the people they supported. They were supported by the management team through regular supervisions and staff meetings. Staff understood they could only care for and support people who consented to being cared for. People enjoyed choices in the meals and drinks they were offered and told us staff responded when they were unwell and staff arranged health appointments on their behalf if they asked.

The service remained caring towards people. People said staff were caring and treated them with dignity and respect. People were involved in how their care and support was received; they were given choices and said their wishes were respected by staff.

The service remained responsive. People received care that met their needs. Staff provided care that took account of people's individual needs and preferences and offered people choices. People said staff listened to them and they felt confident they could raise any issues should the need arise and action would be taken.

The service remained well led. Staff felt supported by the management team to provide good care. The registered manager and provider had systems in place to review and update people's care and to assure themselves of the quality of care being delivered. Where areas had been identified for improvement, actions had been taken.

Further information is in the detailed findings below

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 remains safe.

Is the service effective?

Good ●

The service remains effective.

Is the service caring?

Good ●

The service remains caring.

Is the service responsive?

Good ●

The service remains responsive.

Is the service well-led?

Good ●

The service remains well-led.

Copthorne Lodge

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014

At the last inspection on 31 March 2015 the service was rated as good. This was a comprehensive inspection and took place on 3 July 2017 and was announced. The provider was given 48 hours' notice because the location provides care to people in their own homes; we needed to be sure that someone was available in the office and that time could be given for arrangements to be made so we could talk with people and staff. This inspection was completed by one inspector.

As part of the inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us by law. We also spoke with Healthwatch about information they held about the provider. Healthwatch is an independent consumer champion, which promotes the views and experiences of people who use health and social care services.

We spoke with seven people who received support from the service. We spoke with the registered manager, two senior support workers, three support workers and the general manager during the inspection. We also spoke to one night support worker by telephone following the inspection.

We looked at the care records of two people, complaints and compliment records, questionnaire responses and minutes of tenants meetings. We looked at checks made by the management team to monitor the quality of the service provided and the actions they took to develop the service further.

Is the service safe?

Our findings

People were supported to remain safe in their home. People told us staff supported them to stay safe and three people told us they liked it that staff always called out when they arrived so they knew who was coming into their home. Staff we spoke with understood how to keep people safe and had received training which included recording and escalating their concerns to senior staff.

Staff we spoke with knew the type and level of assistance each person required. We reviewed two care plans and saw risk assessments that guided staff on the individual risks people lived with and staff we spoke with knew the support needed to minimise risks.

People told us that staff were available to them and arrived to calls on time to provide support. Staff also confirmed there were enough staff to meet the needs of the people they provided a service to. They told us when staff were off work, cover was provided from within the team. One member of staff said, "It's good teamwork here, we all help each other out."

Recruitment processes demonstrated how checks were made on the suitability of staff before they commenced work at the service. We saw DBS (Disclosure and Barring Service) checks were completed to check the suitability of staff to work at the service.

Some people were supported by staff to take their medicines. One person told us, "I get my medicine every morning and they [staff] record it all in my folder." Another person told us they received their medicines as required and said, "They record it all; time and date." Staff told they had received medicine training and the provider also made periodic observations of their medicine support to ensure it met the required standard. Checks of the medicine record sheets were made by the management team to ensure staff had correctly recorded the medicines they had given to people.

Is the service effective?

Our findings

People were supported by a staffing team that understood their needs and how to look after them. One person commented, "Staff all do the job well, they are always going on training. I'm amazed at how much they know." Staff told us training provided, reflected the needs of people living in the scheme and confirmed the training had enhanced or embedded their current knowledge. For example, two members of staff told us they had received training to develop their awareness, understanding and skills to support people with diabetes.

All staff told us they were supported in the role, understood their responsibilities and had regular supervision and team meetings. Staff told us they felt able to access advice and guidance on people's care whenever they needed. One member of staff said, "I can ask any questions and I get answers."

People we spoke with understood their right to make choices. One person told us, "I get choices alright and if not I'd soon tell them (staff)." 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. Staff had received MCA training and one member of staff told us how they had more understating of the rights of people to make decisions following the training.

Some people were being supported by staff to eat and drink enough to keep them well. People told us staff would give choices and ask what they would like to eat and made sure they had plenty to drink. One person said, "They (staff) make my breakfast every morning. I like the same thing but they always check." Three people told us they chose to have their lunchtime meals together with other people living in the scheme in the communal dining room.

People told us staff supported them to make medical appointments if required. One person told us when they were unwell staff called their GP. They said, "If I need a doctor they call and get on it. It's a great support when you are unwell." Another person told us when they had healthcare appointments with the district nurse or physiotherapist staff supported them by providing a reminder to prompt them. All staff were able to tell us about how people were individually supported with their health conditions that needed external professional support.

Is the service caring?

Our findings

Everyone we spoke with told us, they liked living at Copthorne Lodge and they were supported by caring staff. One person said, "All the staff are so nice. I feel at ease with all of them." Another person told us, "Staff are very obliging, I can't fault them at all." People told us that staff knew how to provide their care in the way they wanted it. One person said, "We enjoy a joke because that's the way I like things and staff know that."

We saw the provider had received written compliments about care provided. For example, one relative had written to thank staff for the, "Wonderful care and attention [family member] received." They added, "He is like a different person; well fed and happy." 'Thank you to all the staff for everything you have done for me.'

Three staff we spoke with said they enjoyed working with people and had developed good relationships. One member of staff told us, "The people are great, I love getting to know them." Staff spoke in a caring way about the people they supported. One member of staff said, "I enjoy my work. All the staff have peoples' care at heart. I wouldn't mind my parents being cared for here."

People told us staff were respectful and we made observations that supported this. One person said, "They always knock before they come in, the knock every time and don't just enter uninvited." People told us staff were unhurried in their approach and would spend time chatting to them. One person said, "It's lovely we have a chat about family and things, they show an interest in what's going on for me."

Staff also described ways in which they treated people with dignity and respect, for instance ensuring their personal information was kept confidential and not discussing their care in front of other people. One person confirmed this and told us, "I trust them all."

People told us about how much their independence was prompted and supported. One person said, "When I was unwell staff helped me more, however when I got better encouraged me to do the things I could myself again."

Is the service responsive?

Our findings

People told us staff understood their needs and they felt comfortable to discuss or share their day to day tasks with them. One person told us, "I am a quiet person but I feel I am able to speak up as they (staff) are so approachable." People told us staff were responsive and provided the care they needed. For example, one person told us night staff supported them with their medicines as they were an early riser and the earlier support suited them. Another person said, "They (staff) understand; they treat me as an individual."

People's needs were assessed when they entered the Copthorne Lodge. One person told they had a folder which contained their care plan, which they told us staff always checked at the start of a call. Staff confirmed the information was a good starting point but they felt the best way to learn about someone was talking to them. One member of staff said, "I talk to them (people) and ask what support they want."

People were fully involved in care reviews and understood their plans of care. One person told us how they met with staff to discuss any changes in their care. They told us, "It's all recorded and I sign to agree the changes." Staff told us any changes with a person's well-being would be referred to the management team or healthcare professional for review.

All people we spoke with said they would talk to any of the staff if they had any concerns. One person told us they had raised a concern and commented, "It was dealt with and I received an apology." All staff and the registered manager said where possible they would deal with any issues as they arose. Information on how to complain was available to people throughout the scheme. Complaints received had been logged and investigated. The general manager received information on complaints received across all schemes and held separate registered manager and assistant managers meetings to share learning and good practice across all of their schemes.

Is the service well-led?

Our findings

People told us they enjoyed living at the scheme. One person said, "It was the best decision I ever made moving here." Another person said, "Overall I'd give the care and everything here 10 out of 10!" There was a registered manager for the service.

A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. There had been a recent change in the management of the scheme. A new registered manager was in place and responsible for managing two different schemes, to support this arrangement there was an assistant manager in place at each scheme.

Staff told us they felt able to tell management their views and opinions at staff meetings. One staff member said, "The meetings are two way and we can raise any areas for discussion." The registered manager told us they had good support from the staffing team and the provider. They said the provider supported them through supervision, peer meetings and supported further professional training opportunities. Staff we spoke with told us the scheme was well organised and run for the people living there. They told us the management team was supportive and they felt able to approach the registered manager with any concerns they may have.

The care people received was checked and updated regularly by the management team. We saw there were systems in place to ensure people received the care they needed. The registered manager told us the results of audits were discussed in staff meetings and all staff were made aware so that any shortfalls were addressed to improve the overall quality of the service. For example, we saw that care records had been audited and actions taken where information needed updating. This was also scheduled for discussion at the next team meeting.

The management team had sent questionnaires to all people living in the scheme in June 2017 asking for their feedback and opinions on the care provided. A response was made by 15 people and showed that people were happy with the care provided. One person told us they had made a suggestion for improvement and commented, "It was done straight away."

The registered manager felt they were supported by other professionals locally, such as GP surgeries and community support nurses. These provided guidance and advice in how to support people's needs and we saw this had been used in support of people's care. The registered manager had introduced a visiting health and social care professional's feedback form to capture comments and feedback from visiting GP's, district nurses etc. We saw positive feedback had been received to date.