

MD Care Homes Limited

Aisling 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

About the service: Aisling lodge is a care home that was providing personal care to 16 older people at the time of the inspection.

People's experience of using this service:

- ☐ People felt safe living at the service. Risk assessments had been completed to ensure that action was taken to keep people safe. Staffing levels meant that people were safe and they received their care in a timely manner. People received their medication as prescribed. There were systems in place to record, monitor and learn from accidents and incidents.
- ☐ Staff had the knowledge, skills and support they required to meet people's needs effectively. People's physical, emotional and social needs were identified so staff could meet these. People received support with eating and drinking when needed. People were supported to maintain good health and were supported by or referred to the relevant healthcare professionals.
- ☐ People received care and support from staff that were kind and caring. People's privacy and dignity was protected and promoted. Staff knew people well and what made them happy.
- ☐ People received person centred care that met their needs. Most care plans were detailed so that staff knew people's preferences and how people would like to be supported. Activities were provided according to people's interests and hobbies. People knew how to make a complaint if needed.
- ☐ People's views had been sought in the running of the service. The provider and registered manager had worked hard to identify where improvements were needed and make them.

Rating at last inspection: Requires Improvement (report published August 2018)

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as scheduled in our re-inspection programme. If any concerning information is received we may inspect sooner.

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

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.

Aisling Lodge

Detailed findings

Background to this 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:

The inspection was unannounced and was carried out by one inspector and one assistant inspector.

Service and service type:

Aisling Lodge is a 'care home'. People in care homes receive accommodation and 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 the 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.

What we did:

Before the inspection we reviewed all the information that we have in relation to this service. This included notifications. A notification is information about important events which the provider is required to send us by law. We also reviewed the Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make

We observed how the staff interacted with the people who used the service and looked at how people were supported throughout the day. We spoke with four people, one relative, the registered manager, a representative of the provider, three members of staff and one visiting healthcare professional. We looked at three people's care and support records. We viewed records relating to the management of the service. These included quality audits, medication records and incident and accident records.

Is the service safe?

Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- People who lived at the service told us they felt safe.
- The provider had effective safeguarding systems in place, staff understood what to do to protect people from harm and how to report concerns.
- One staff member said, "I would speak to my manager (if they thought anyone had suffered any abuse). If I felt I couldn't approach them then I would approach the local authority or CQC."

Assessing risk, safety monitoring and management

- We identified a breach of regulation at the previous inspection. This was because people were being put at unnecessary risk. Improvements had been made.
- Staff understood when people required support to reduce the risk of avoidable harm. Assessments identified risks and the action for staff to take to keep people safe. Records used to monitor risks such as food and drink intake or regular repositioning to avoid pressure areas were consistently completed and monitored.
- The registered manager assessed risks to people's health and welfare such as moving and handling, falls and the use of oxygen.
- We discussed the free access to the kitchen with the registered manager and the risks that this may pose to people. The registered manager stated they would take action to ensure people's safety immediately.

Staffing and recruitment

- All of the required pre-employment information and checks were obtained before new staff started working for the service. People could therefore be assured newly employed staff were suitable for the role.
 - People and their visitors told us that they received care and support in a timely way. One person told us, "The response is very good. If they [staff] can't help me they check on me and come back but no longer than 15 minutes. They'd rather me ring the bell than fall."
- Staffing levels were determined according to people's assessed needs. There were sufficient staff to ensure that people were safe.
- Staff confirmed that they had time to carry out their roles.

Using medicines safely

- People told us where they required support from staff with their medicines they always received their medicines as they should. One person told us, "I get my morning ones (tablets) before breakfast."
- Medicines were safely managed, stored and administered by staff competent to do so.
- The records did not always show a clear audit trail of the medicines carried forward at the beginning of the

month. This meant that it was not always possible to check that the amount of medication in stock tallied with the records. The registered manager and provider's representative stated that they would take action immediately to ensure that the records contained full information.

Preventing and controlling infection

- The home was clean, tidy and free of unpleasant odours. People and their relatives told us that the cleanliness of the environment had improved.
- Staff had completed training in how to reduce the risk of infection and followed good practice guidance.
- There was a good supply of gloves and other protective equipment to reduce the risk of infection and we saw staff used this correctly.

Learning lessons when things go wrong

- Staff followed the providers procedures when any accidents or incidents occurred.
- The registered manager ensured that any accidents or incidents were used as a learning opportunity and shared lessons learnt with the staff team.

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

Good: ☐ 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 had been assessed prior to admission in line with legislation and up to date guidance. This enabled them to make sure they had enough staff with the right skills to people's ne them.
- Care plans contained information about people's needs and it was clear that staff knew people well.

Staff support: induction, training, skills and experience

- We identified a breach of regulation at the previous inspection which meant staff were not always receiving the training to ensure they had the right skills needs. During this inspection we found staff had received training when they first started working at the service and this was updated each year. New staff completed the Care Certificate, which identifies a set of standards and introductory skills that health, and social care workers should consistently adhere.
- People and relatives told us that staff knew how to care for people and knew how to use equipment.
- Staff told us they felt supported and received regular supervisions where they could discuss any training requests or issues they may have. Staff also confirmed that they could speak to the registered manager or the provider at any time. One member of staff said, "I have complete support. [Provider] is very caring towards her staff."

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

- People had choice and access to enough food and drink throughout the day.
- When needed people received support with eating and drinking at a pace that suited them. Staff were aware of people's dietary needs. They monitored people's intake to make sure it was sufficient to maintain a healthy weight.
- One person told us, "If you don't like something [food], they [staff] get you want you want. If you like egg sandwiches you can have them." Another person said, "We can have a drink when we like. They [staff] always make sure you've got water or juice in front of you." A relative of a person using the service said, "[Person] has put on weight since being here. The food's pretty good."

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

- Staff supported people to attend appointments with health professionals such as GPs, dentists, chiropodist, opticians and hospital consultants. A relative of a person using the service said, "They [staff]

organise for the carers to take [family member] to appointments."

- Staff told us they ensured people had the support they needed if healthcare was required. Referrals were made as necessary.
- The registered manager worked closely with other professionals to ensure people received effective care and made sure any advice received was used to improve their care.

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

- One relative told us that the environment had improved since the new provider had taken over Aisling Lodge.
- The premises were decorated to a high standard and people's room had many personal belongings in their rooms to support them to feel it was their home.
- The premises had enough amenities, such as bathrooms and communal areas, to ensure people were supported easily.
- Regular maintenance of systems and equipment was carried out to ensure it was in good working order.

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, 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."
- Where needed, DoLS had been applied for to ensure that people were kept safe.
- Staff ensure that people and/or their relatives were involved in decisions about their care.
- Where people were assessed as lacking capacity to make a certain decision, staff worked in their best interest. Best interest decisions, however, had not always been recorded. The provider sent us evidence after the inspection that action had been taken to ensure that best interest decisions had been recorded as required.
- One staff member told us, "You shouldn't assume that someone lacks capacity because they make an unwise choice. It has to be in their best interest and the decision has to be the least restrictive. Even if they don't have capacity (to make certain decisions), we still give them choice."
- We saw staff always gained people's consent before carrying out any support and assisted people to make day to day decisions as much as possible.

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

Good: 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. People and their relatives were very positive about the staff's caring attitude. Staff showed concern for one person when they became upset. They took time to reassure the person and listen to what they were worried about.

- One relative told us that staff had held a party for their family member's birthday, which they had all enjoyed. They said, "It's brilliant since [the new provider] took over. Nothing seems to be too much trouble."
- One person told us, "The carers are always cheerful and they are all very friendly."

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

- Residents meetings were held so that people could give their views about the care and support they were receiving.
- We saw from the minutes of the meetings and observations in the home that people's requests were actioned.
- Staff supported people to make decisions about their care. Decisions were recorded in their care plans such as when they liked to get up and go to bed and what they enjoyed eating and drinking.

Respecting and promoting people's privacy, dignity and independence

- People's rights to privacy and confidentiality were respected.
- Staff treated people with dignity and respect. Staff knocked on people's doors before entering their rooms. One person said, "When they [staff] are washing me they give me a cloth to wash myself." Another person told us, "They [staff] take me to the shower. They leave me for five minutes then they help me to get out."
- People were supported to maintain and develop relationships with those close to them. One person told us, "They [relatives] have never been told they can't come. They are free to come whenever. My family get on well with the staff."

Is the service responsive?

Our findings

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

Good: 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

- Care plans had improved so that they focussed on each person's likes and dislikes and how they wanted to be supported.

Some parts of the care plans would benefit from being more detailed. For example, although one care plan stated that the person needed assistance to stand it did not state what piece of equipment to use. Staff were able to tell us which equipment was to be used.

- One care plan stated that a person should be "repositioned regularly." Staff were able to tell us how often this should be and the records confirmed that this was being done.

- A visiting professional said, "They are very responsive. They always report things to us."

- People had opportunities to participate in a variety of activities over the week, including bingo, quizzes, entertainers and trips out.

Improving care quality in response to complaints or concerns

- At the previous inspection we found that the complaint procedure had not always been followed. Action had been taken to make the necessary improvements.

- The provider had a system for recording complaints and this was used to keep a check on the types of complaints received and to use this information to make improvements to the service.

- One person told us, "The Manager comes round and asks if you're alright, so it gives you the opportunity to say something."

End of life care and support

- The registered manager and staff talked to people about how they would like to be cared for and supported at the end of their life.

- Care plans included the information staff needed so that people could be supported in a kind and dignified way.

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

Good: 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 with openness; and how the provider understands and acts on their duty of candour responsibility.

- During the previous inspection it was found that the lack of leadership and inadequate staff supervision meant that risks to people's health and welfare were not closely monitored.
- The provider, registered manager and staff had worked hard since the previous inspection to make the required improvements so that people received a better quality service.
- The provider was aware of the duty of candour responsibilities and ensured where needed information was shared with the relevant people.
- The provider had employed staff in senior roles that believed in and promoted person centred care. They trained and monitored staff working to ensure support and care was offered in the way that people preferred.
- The provider had carried out detailed quality assurance visits and audits with clear action plans for improvements.

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

- The service was well-run. Staff understood their roles and responsibilities and told us that they worked well as a team. One member of staff told us, "We all work together really well."
- Audits were completed on a wide range of areas within the home. Some of the audits completed lacked detail. Action plans showed who was responsible for the actions and when they had been completed.
- Information from analysis of incidents and accident accidents, feedback from people and their relatives and complaints were used to continually improve the service being offered.
- Meetings were held for people and/or their relatives to attend to give feedback on the service.
- One relative told us, "[Registered Manager] and [provider] are approachable. They are so friendly and pleasant. You can tell that they care."

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

- One healthcare professional told us, "When I come in here it's like a breath of fresh air, staff are so attentive."
- People were involved in day to day issues at the service. The manager regularly worked with people. One

person told us, "The [Registered] Manager is very good. She does my morning tablets and makes my bed." The Registered Manager told us that this gave her a chance to monitor how people were and time to observe staff practice.

Working in partnership with others

- The service worked in partnership with health and social care professionals who were involved in people's care. This ensured everyone could check that people consistently received the support they needed and expected.