

London Borough of Waltham Forest

George Mason 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

George Mason Lodge is a care home registered to provide accommodation, personal care and support for up to 39 people, some of whom were living with dementia and mental health illness. At the time of our inspection, 37 people were living in the home.

People's experience of using this service and what we found

People told us the care they received was good, and staff treated them with dignity and respect. People and their relatives spoke positively about staff being kind and caring. People's diversity and individual needs were respected by staff.

The staff team were knowledgeable about people's support needs and knew them well, which meant that staff were able to deliver personalised care and support to people. People were supported to maintain contact with relatives and friends. The service had a range of appropriate activities people could be involved in. Staff demonstrated they knew how to raise safeguarding concerns and were aware of the processes to follow in order to keep people safe. People told us they felt safe.

Care and support plans were developed to ensure people's needs and risks were met appropriately. Risk assessments were in place to guide staff to help people manage their identified risks. The service supported people to take positive risk taking.

The provider had appropriate staffing levels in place to ensure people's needs were met in a safe and consistent way. The service followed safe practices for infection prevention and control procedures to keep people safe. The administration of medicines was managed in a safe way and people received their medicines as prescribed.

Staff were provided with the right training and support to make sure they could carry out their roles appropriately. The service worked and communicated with other professionals in the health and social care sector. People's health care needs were being met and they had access to healthcare services where needed.

People were supported to have choice and control of their lives as much as possible. Staff supported people in the least restrictive way and in their best interests. The service had up to date policies and procedures in place to manage and respond to complaints and concerns.

The provider had comprehensive and effective governance system in place. People, relatives and staff were confident about approaching the registered manager if they needed to. A wide range of comprehensive audits took place to ensure the quality of the service was maintained.

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 inspection for this service was rated good (published 17 March 2021).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

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.

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.

George Mason 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 was carried out by 1 inspector.

Service and service type

George Mason 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. George Mason Lodge Care Home 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

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 also reviewed notifications that the registered provider had sent to us since the last 6 months. A notification is information about important events which the service is required to send us by law. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager. We reviewed a range of records. This included 10 people's care records, staff files, training records, risk assessments and satisfaction surveys. We also looked at audits and a variety of records relating to the management of the service, including policies and procedures.

We spoke with 10 people during our inspection and 5 relatives by telephone to obtain their views of the service. We also spoke to 8 care members of staff and the chef during our inspection, to ask them questions about their roles.

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. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected against the risks of abuse, as staff were given up to date training, which helped staff to recognise the signs of abuse.
- People told us they felt safe living at the home. Comments included, "The staff do a good job at looking after me." "Staff make sure that I'm safe and well looked after." "I am only staying for a short time until I can go back home, staff know what they are doing. If I needed a care home this would be the home I choose to move to."
- The provider had systems to record, report and analyse any allegations of abuse.

Assessing risk, safety monitoring and management

- The provider managed risks to people's safety. They assessed and regularly reviewed people's risks assessments, which helped identified new risks. This practise kept people safe from avoidable harm.
- People and relatives told us they felt staff provided safe care. A person said, "Since I have lived at this home, I feel looked after and cared for. I have no concerns."
- The provider worked with external contractors to assess risks related to fire safety, the premises and equipment. This supported the service to ensure these risks were assessed and managed well.
- Staff were aware of potential risks to people and ensured they were safe when carrying out tasks.

Staffing and recruitment

- The provider ensured that there were enough staff on duty to ensure people's needs were met. We received positive feedback from people and their relatives about staffing. One person told us, there is enough staff to help [people], they said, "When I have pull my alarm, staff always come to see if Im okay."
- The registered manager followed robust processes for all staff before they were able to care for people. This process helped ensure staff were recruited safely and staff had the right skills and experience to meet people's needs. The checks consisted of a pre-employment check, employment references, proof of identification, criminal background checks and right to work in the UK.

Using medicines safely

- Medicines were managed safely and appropriately. Staff received training and their competency to administer medicines had been assessed and reviewed yearly.
- We reviewed people's medicine administration records (MAR), they were completed correctly by staff to evidence medicines had been administered as prescribed and medicines had opening dates recorded on them.
- The provider had a up to date medicines policy and the service completed regular medicines audits.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.

Visiting in care homes

- At the time of our inspection there were no restrictions on friends and family visiting people at the home.

Learning lessons when things go wrong

- The registered manager ensured that all accidents and incidents were reviewed and used to ensure people were kept safe and to help improve the service. Staff were clear of their responsibilities to record all accidents and incidents and to inform their line manager.
- Staff confirmed they received regular updates and meetings by the registered manager on any changes as part of lessons being learnt.
- The service had an out of hours contact number, which they were able to call for advice in the event of an emergency.

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 our last inspection we rated this key question good. The rating for this key question has remained 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

- The provider ensured people's needs were assessed prior to people moving into the home. This practice ensured the service could meet people's support needs appropriately.
- People and their relatives told us they were involved in the assessment process. One person said, "Before I moved into the home, I was visited by the manager who asked me questions, about how I wanted to be supported and what support I needed."
- From the provider's completed needs assessment, a care plan was developed, with the support from the person who used the service, which covered people's choices and preferences and how to meet their needs effectively.

Staff support: induction, training, skills and experience

- During our inspection, we found that staff were knowledgeable and had completed training, which gave them the skills they needed to carry out their role effectively. One staff member told us, "The manager supported me with my induction programme. This helped me to get to know [people's] needs and information on how to keep [people] safe."
- People told us they felt their care and support was given by staff who had the knowledge and good understanding on how to meet their individual needs. A person told us, "I have no issues or concerns with the staff that work here, the staff are nice and the manager also comes to see me to check that everything is going well."
- The provider ensured staff received appropriate training to help ensure that staff were skilled and trained before they delivered care and support to people. The provider's training records showed staff received training in first aid, Mental Capacity Act, food hygiene, infection control and safeguarding.
- Staff told us that they were well supported by senior staff and the manager, and that they received regular supervisions.

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

- Staff supported people to ensure they received a good balanced diet and had sufficient amount of fluids to maintain their health.
- People told us they were given a choice of different meals and drinks they were able to choose from. One person told us, "Staff sit with me each day and ask me what I want for my meals. They write it on a list, so the kitchen staff know what I want."
- Staff were clear about people's preferences and their likes and dislikes, or if they had any dietary requirements due to their medical condition. People had received nutritional needs assessment from health care professional, which helped give guidance to staff for people who had malnutrition or difficulties with

swallowing.

- During the inspection, we observed people's mealtime support, which was a positive experience and people's individual needs were met. People appeared relaxed and staff were encouraging people appropriately.
- We saw people's food was appetising and well presented.

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

- The provider ensured that they worked well with healthcare professionals to ensure people's healthcare needs were met effectively and consistently.
- The registered manager told us that the GP visited each week to review people's health and to review if there had been any changes to their health needs.
- The service supported people to live healthier lives. Staff supported people to access healthcare services, for example, hospital appointments, routine health check-ups and support with specialist appointments for people who were living with diabetes or epilepsy.

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

- The service was homely and was accessible to meet people's support needs. The design of the building was accessible for people who used wheelchairs and there were a lift for people to use if they needed to.
- People told us that staff involved them in making decisions on how their bedrooms and communal areas were decorated and furnished, comments included, "I chose the colours I wanted for my [bedroom]. "Some of the furniture in my room was from my home before I moved here."
- The home was over 3 floors; some people's bedrooms had an en-suite bathroom. There was a kitchen, and lounge and dining area.
- The provider had a planned maintenance programme in place to help keep the home looking nice.

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 our last inspection, we rated this key question good. At this inspection, the rating for this key question has remained 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

- We saw that people were treated as individuals and care was person centred. For example, we observed positive interaction and communication from people and staff, getting on well with each other.
- People told us they got on well with the staff. One person said, "The staff make me smile and if I'm feeling sad, they brighten up my day."
- People's equality and diversity was respected, and people were supported as individuals, as staff had a good understanding of people's care needs.
- Care plans held information on how people chose how they to be supported with their spiritual cultural beliefs.

Respecting and promoting people's privacy, dignity and independence

- People had their own bedrooms with their personal belongings, and they were adapted to meet their individual needs and to support people to be as independent as possible.
- People told us that staff respected their privacy. One person said, "Staff always knock before coming to my room or to the bathroom."
- The provider had a policy in place on confidentiality. We saw people's personal data were kept secure in the office.

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

- We saw that people were involved in their day-to-day decisions about their care and well-being. For example, a person told us, "I can go to bed when I want, I stay up late to watch TV. I do not always want to eat at the same time, so staff ask me the times I want to eat."
- The registered manager told us how people were encouraged to participate in making decisions about the day to day running of the home. "We have meeting with people to ask them for their view, like what activity's they would like to do, or what colours they prefer the home to be painted."
- The provider knew how to support people to access independent advocacy support if needed to.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained 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 received a full assessment of their needs prior to moving into the home. This helped the service to develop personalised care plans for people, which contained information relating to people's physical, emotional and mental health needs, their life histories and preferences.
- People told us that they were involved in the planning and reviewing their care plans. One person said, "Staff asked me information that I wanted in my plan. My daughter supported me and staff asked about things I like to do."
- Staff demonstrated their understanding and knowledge of delivering person centred care and respected people's choices.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The provider implemented communication plans to help meet people's preferred communication style. During the inspection, we saw positive communication between people and staff.
- Staff was able to access information in a variety of different formats and languages where required.
- Staff received training in supporting people's communication needs. One staff said, "I found the training to be very helpful and it gave me ideas on how I can support people with different communication needs."

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

- People were offered the opportunity to join in with a variety of planned activities both in and out of the home.
- People told us they were supported by staff to try new activities and to go out on day trips or to go shopping with staff. Comments included, "I like going out into the garden. I have also been on day trips to the seaside with staff.", "We do different activity here, like singing and dancing. We have also had people coming like to do different shows." and "I like animals, so the staff arrange for someone to bring in animals from a farm."
- The registered manager told us, that people were supported to keep in contact with their relatives and friends. This was by telephone and visits.

Improving care quality in response to complaints or concerns

- The provider had a policy in place to address concerns and complaints. Complaints were reviewed and investigated by the registered manager and the appropriate actions were taken.
- People and their relatives knew how to raise a concern or complaint. One relative told us, "If I had any concerns I would speak to the manager or senior staff."
- Staff were clear of the actions that were needed if a person were to make a complaint. One staff said, "I would record the concerns and inform the person of the actions that I was taking. I would also inform my line manager"

End of life care and support

- Details for people's wishes related to end of life care and preferences were recorded in their care plans.
- The provider worked closely when required with people's GP and specialist palliative care teams to make sure people who received end of life care were kept comfortable, dignified and pain-free.
- Staff received end of life training and the provider had an up-to-date policy in place to give staff guidance around people end of life care.

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 good. This meant that 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 culture within the home with a clear drive to provide high quality care. One person said, "The staff and manager is very supportive and approachable."
- Staff told us the management team was very supportive and they felt able to contribute their views and suggestions to them. A staff member told us, "We have regular meeting where we are able to express any concerns or give suggestions that will help improve the home."
- Care was person centred and reflected on people's cultural needs and held information that helped empower people to achieve positive outcomes.

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; Continuous learning and improving care

- The registered manager understood their responsibility to keep people, relatives and professionals informed when incidents happened in line with the duty of candour. The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong.
- The provider had good systems and processes in place to help monitoring the quality of the home. The systems included feedback from people who used the service and their relatives, as well as staff and stakeholders.
- The registered manager and senior staff completed spot checks and audits were carried out on care plans, medicines and IPC to improve and help develop the running of the service.

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

- Staff were clear about their roles and understood risks and regulatory requirements.
- People and relatives spoke positively about the management and staff team. For example, a person said, "All staff are nice and friendly. The manager is also easy to speak to if I wanted to discuss any concerns with them"
- People received their care and support from a service that carried out regular checks for improvements on people's lives. This practice helped people to receive a good quality of life and positive outcomes for people who used the service.
- Staff had a good understanding and were given clear guidance from the registered manager of what was expected of them. One staff said, "We receive regular supervision and staff meetings where we discuss any changes to care regulations or risks. This also helps with our development and knowledge."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager told us how they engaged with people daily and how the home kept in contact with relatives by phone calls and emails as well as meetings held at the home.
- Staff meet with people on a regularly bases to discuss their support needs and had meetings to discuss the running of the service.
- The provider insured that people's equality characteristics had been considered and people were supported with their diversity, cultural and religious beliefs, which were recorded in care plans.
- The provider worked in partnership with a number of heath care professionals. This included working with social workers, commissioners and medical practitioners. This approach helped to ensure people received the right care and support that was needed and that the service was working in line with current best practice in relation to people's specific needs.