

## Revitalise Respite Holidays

# Vitalise Jubilee Lodge

## Inspection report

Grange Farm  
High Road  
Chigwell  
Essex IG7 6DP  
Tel: 020 8501 2331  
Website: [www.vitalise.org.uk](http://www.vitalise.org.uk)

Date of inspection visit: 14 and 30 October 2015  
Date of publication: 12/11/2015

### 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 

### Overall summary

This inspection took place on 14 and 30 October 2015.

Vitalise Jubilee Lodge provides accommodation, personal care and nursing care for up to 36 people who have a physical disability, learning disability, sensory impairment or dementia. The service offers short breaks and respite care in the form of holidays. There were 18 people receiving a service on the day of our inspection.

A registered manager was in post. 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.

At our inspection on 16 April 2014 we found that the provider was not meeting the requirements of the law in relation to the safe management of medicines and staff recruitment processes. An action plan was provided on 7

# Summary of findings

May 2014 and this confirmed the actions to be taken by the provider to achieve compliance. Our observations at this inspection showed that the improvements had been made.

Medicines were safely stored, recorded and administered in line with current guidance to ensure people received their prescribed medicines to meet their needs. Procedures were in place to ensure that staff organising medicines for people's daily outings were not disturbed. Recruitment procedures were thorough and criminal history checks were in place for all people who volunteered to work at the service.

Staff were knowledgeable about identifying abuse and how to report it to safeguard people. Risk management plans were in place to support people to have as much independence as possible while keeping them safe. There were also processes in place to manage any risks in relation to the running of the service.

People had access healthcare support. People had choices of food and drinks that supported their nutritional or health care needs and their personal preferences.

People were supported by skilled staff who knew them well and were available in sufficient numbers to meet people's needs effectively. People's dignity and privacy

was respected and they found the staff to be friendly and caring. People were supported to participate in a wide range of social activities including community based outings.

Staff used their training effectively to support people. The manager understood and complied with the requirements of the Mental Capacity Act 2005 (MCA) and the associated Deprivation of Liberty Safeguards (DoLS). Staff were aware of their role in relation to MCA and DoLS and how to support people so not to place them at risk of being deprived of their liberty.

Care records were regularly reviewed and showed that the person had been involved in the assessment and planning of their care. They included people's preferences and individual needs so that staff had clear information on how to give people the support that they needed. People told us that they received the care they required.

The service was well led; people knew the manager and found them to be approachable and available in the home. People living and working in the service had the opportunity to say how they felt about the home and the service it provided. Their views were listened to and actions were taken in response. The provider and registered manager had systems in place to check on the quality and safety of the service provided and to put actions plans in place where needed.

# Summary of findings

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

The service was safe.

Staff had a good understanding of safeguarding procedures to enable them to keep people safe. Staff recruitment processes were robust.

Risks to people's safety were identified and plans were in place to limit their impact on people. There were enough staff to meet people's needs safely

Medicines were safely managed.

Good



### Is the service effective?

The service was effective.

Staff received regular supervision and training relevant to their roles.

People were supported appropriately in regards to their ability to make decisions.

People were supported to eat and drink sufficient amounts to help them maintain a healthy balanced diet. People had access to healthcare professionals when they required them.

Good



### Is the service caring?

The service was caring.

People were treated with kindness and respect.

People and their relatives were encouraged to be involved in the planning of their care.

People were encouraged to maintain their independence and individuality.

Good



### Is the service responsive?

The service was responsive.

People's care was responsive to their individual needs. Activities provided were suited to people's individual hobbies and interests.

People and their relatives were confident to raise concerns if they arose and that they would be dealt with appropriately.

Good



### Is the service well-led?

The service was well led.

People who used the service and staff found the manager approachable and available. Staff felt well supported.

Opportunities were available for people to give feedback, express their views and be listened to.

Systems were in place to gather information about the safety and quality of the service and to support the manager and staff to continually improve these.

Good



# Vitalise Jubilee 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 was planned to check 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.

This inspection was undertaken by two inspectors on 14 October 2015 and was unannounced. We completed telephone interviews with people who use the service and their relatives on 30 October 2015.

Before the inspection, we looked at information that we had received about the service. This included information

we received from the local authority and any notifications from the provider. Statutory notifications include information about important events which the provider is required to send us by law.

During the inspection process, we spoke with seven people who received a service and the relatives of two people. We also spoke with the manager, the provider's representative, five staff and two volunteers working in the service.

We looked at four people's care and medicines records. We looked at records relating to five staff. We also looked at the provider's arrangements for supporting staff, managing complaints and monitoring and assessing the quality of the services provided at the home.

# Is the service safe?

## Our findings

At our last inspection of the service on 16 April 2014, we found that the registered provider had not protected people against the risk of unsafe management of medicines. This was in breach of Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to Regulation 12(g) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The provider sent us an action plan on 7 May 2014 and this confirmed the actions to be taken to achieve compliance.

Documentation viewed and our observations at this inspection showed that the required improvements had been made. The system to support staff to safely organise medicines to accompany people going on outings was in place, known to staff and seen in practice. People received their medicines in a timely and safe manner. People received their medicines in line with the prescriber's instructions. Medication administration records were consistently completed and tallied with the medicines available. Medicines were safely stored.

At our last inspection of the service on 16 April 2014, we found that the registered provider had not protected people against the risk of receiving care and support from staff who were safely recruited. This was in breach of Regulation 21 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010, which corresponds to Regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection, we saw that the required improvements stated in the provider's action plan had been implemented. Criminal history checks were completed for all people who volunteered in the service. The service had a recruitment procedure in place to help ensure correct checks were completed on all new staff and this practice helped to keep people safe. A number of new staff had recently been recruited and the service had gained the required documentation. This included health declarations, identification, references and checks from the Disclosure and Barring service (DBS). Staff files seen had the required documentation. The service also had a disciplinary procedure in place, which could be used when there were concerns around staff practice and keeping people safe.

People felt safe in the service and told us this was because, for example, there was appropriate equipment to care for them safely and there were enough staff to meet their needs. One person said, "I felt completely and totally safe there."

The manager and staff had a good understanding and knowledge of how to keep people safe from the risk of abuse. Staff had attended training in safeguarding people. They knew how to report any suspected abuse and confirmed they would do this without hesitation to protect people. The manager had maintained clear records of any safeguarding matters raised in the service. These showed that the manager had worked with the local authority to ensure people were safeguarded. The manager had also more recently notified the commission as required of concerns raised. Procedures had been implemented to demonstrate learning from concerns raised and we saw, for example, that a system had been implemented to check comfort levels with each person in their room late in the evening.

Risks were identified and actions were planned to limit their impact. People's care plans included information about risks individual to them and guidance was in place to help staff to manage this safely. Staff were aware of people's individual risks and told us how they kept people safe, for example when assisting people with their moving and handling. The manager had appropriate procedures in place to identify and manage any risks relating to the running of the service. These included a business continuity plan for unforeseen emergencies. An emergency evacuation plan was in place for each person using the service. Staff received training in emergency procedures such as first aid and fire and were able to describe the procedures to follow in such an event.

The service had good facilities for those who were staying at the Jubilee Lodge and the rooms were bright and airy. There was plenty of room throughout the building and it was able to meet the needs of those who were mobile and those who needed assistance. The service were in the process of redecorating bedrooms and these were found to be spacious, had ensuite facilities and were clean. People spoken with were happy with the environment and felt it met their needs in terms of comfort, cleanliness and safety.

People felt there were enough staff to meet their needs well and our observations and discussions confirmed this finding. One person said, "There are always plenty of staff."

## Is the service safe?

There is always someone in the coffee and tea bar if you fancy a drink. If I buzz when I am in my room they do come straight away to support me.” Another person staying at the service said, “There are very good levels of staff support. Once you press the bell, two people arrive very quickly every time. The numbers of staff are quite high from our perspective”.

The manager advised that the rota was planned two weeks ahead in line with the planned admissions and the dependency needs of the people who would be using the service on a particular week. In addition to permanent staff, the service was supported by a large number of long term and short term volunteer support workers, which allowed additional support and flexibility to ensure people’s needs could be safely met.

# Is the service effective?

## Our findings

People were observed with staff and were able to show that they were happy with the care provided. Staff had a good understanding of people's care needs and were able to demonstrate they knew people well and ensured that their care needs were met. One person said, "The staff are very skilled and competent." Another person said, "The staff are trained well as are some of the volunteers, especially the long term ones who are able to do personal care, they are all quite good." A relative said, "The staff do know what they are doing and can give the support needed."

People were supported by staff who were well trained and supported. Newly recruited staff had completed an induction. This included information about the running of the service and guidance and advice on how to meet people's needs. Staff also completed the service's mandatory training programme. The service had introduced the new care certificate, which is a recognised induction for care workers into care. Staff members stated that the induction was very good and provided them with enough information for them to do fulfil their role as a carer.

Staff told us they had received updates to their training and it had provided them with the knowledge they required to meet people's individual needs. They confirmed they had the knowledge and skills to carry out their roles and responsibilities as a care worker. Some staff had also achieved a recognised qualification in care. Feedback from staff included, "The management are very supportive and I completed all my training last November." Staff confirmed they had received training although this was not always reflected on their personal files. It was established that the service shuts for one week every year when all staff's mandatory training was updated.

Documentation seen showed that staff had received support through one to one sessions, meetings and appraisals. Staff reported that regular team meetings had occurred and they felt the management were approachable and supportive. Staff feedback included, "I am happy with my job and the support I receive."

People told us they were asked for their consent to all aspects of their care and treatment and there were no restriction placed upon them while staying in the service.

One person told us this had included, for example, being asked for their consent for their photograph to be taken. Assessments relating to the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS) would usually be completed within the person's own home and not whilst staying at the service, but the manager and staff had been provided with training on these subjects and had a good understanding. People had been involved in the care planning process, but it was noted that there was not a place for them to sign on the care plan form or assessment to show agreed with care to be provided and medication being assisted with. People were observed being offered choices during the day and this included decisions about their day to day care needs.

People told us they enjoyed a wide choice of food and drinks while staying in the service and these were readily available to meet their needs and preferences. One person said, "There was a choice of three main meals, they had asked for my preferences or any foods I could not have before I went there. There was always someone available to get drinks for me and to help me at mealtimes. It was really good." People's nutritional requirements had been assessed before they came in for their stay and their individual needs were well documented. Staff had a very good understanding of each individual person's nutritional needs and how these were to be met. There was a clear list of people's likes, dislikes, dietary or cultural needs and staff were provided with detailed information around any individual risks that may have been identified. The service produced a photo album each week for staff to use to help identify the people who had recently arrived and any assistance or dietary needs they may have.

People had sufficient to eat and drink. People were seen going to the 'tea and coffee bar' and helping themselves to hot drinks. There was also a bar that was open in the evening where people could buy drinks and snacks. The service ensured people received a good balanced diet during their stay and had a two week menu which offered a choice of two meals plus a vegetarian choice every day. The service had a 'hotel' style system for breakfast and people could help themselves to juice, coffee, cereal and toast. There was also an option of a cooked breakfast every day. The service had a good choice at lunchtime and meals were appropriately spaced and flexible to people's needs. Those who went out on the day trips were provided with a pack lunch, fruit and drinks. People stated that the food was good and they received enough to eat. Positive

## Is the service effective?

comments were received around the food and the choice available. One person added, “The food is very good and there is plenty of it.” Those who needed assistance with eating were seen to receive this in a relaxed and personalised way.

People would gain general support for their health within the community whilst living at home, but the service did offer nursing care to those people who may need this during their stay. Information about people’s health and general needs had been gained as part of the assessment

process, which helped staff to ensure appropriate support could be maintained during their stay. People told us that the service requested written information from their GP about all aspects of their health and medication needs before they came to stay in the service for the first time and requested updates from the person for any subsequent stays. People also told us they felt reassured that their healthcare needs would be met effectively by the service as there was a qualified nurse on duty at all times.



# Is the service caring?

## Our findings

People told they found staff to be caring. One person said, “The staff are fantastic, brilliant, all so helpful and friendly. They made me feel so welcome and cared for.” Another person said, “Staff are definitely very caring, that includes the housekeeping and maintenance staff too.” A relative said, “The staff are so kind and considerate to [person]. I do feel [person] feels well cared for and the care and the kindness of staff is one of the reasons [person] has loved going there all these years.”

Some staff had worked at the service for a number of years and knew the people who stayed regularly very well. Care was provided with kindness and compassion and the staff worked hard to support people well, and it was clear that they wanted to make a difference to people’s lives and their holiday stay a memorable one. Staff had a ‘good rapport’ with the people and were seen generally chatting and talking about day to day issues and it was evident they felt comfortable in each other’s company. One staff member stated, “People are on holiday and we want to make it a good experience, some people are regulars and come and stay with us often so we know them well.”

People received good person centred care and the staff did their best to ensure that where possible people had been involved in decisions about their care and how they wanted to spend their time whilst staying at Jubilee Lodge. The service used volunteers and each individual would have at least one named person during their stay, which assisted with continuity of care and helped communication.

People told us that they were included in the planning of their care and were able to make decisions and choices about their day to day lives. This included where to spend their time, what to eat and drink, what type of room they wanted to stay in, when to get up and go to bed and which activities or trips they wanted to participate in. Communal and social areas were separate from the bedrooms so this reduced the noise levels if people wanted to stay up late.

Staff were observed interacting and helping to ensure each person understood the choices available to them and assisting them in making decisions if needed. One person told us, “You have a choice about everything. They even asked if I felt comfortable and happy with the volunteer that had been assigned to support me during outings. If I did not they would have allocated another person to suit me.” Another person said, “You can go to bed when you like. Two carers appear when you ring. They ask what I would like, even though they do really know. It is very relaxed, never rushed, you make your own decisions and choices about your day.”

People’s diversity had been respected and staff had supported people to ensure any diverse needs were met. The service had the use of a range of equipment to meet people’s needs and details of their requirements would be gained as part of the assessment process, which helped to ensure they were able to meet each person’s individual needs.

People’s privacy and dignity was respected. People told us that they had positive relationships with the staff and volunteers who were caring and respectful of their privacy and dignity. We saw that, if people were in their bedroom, staff knocked on the door and waited to be invited in. People confirmed that this always happened. One person said, “We have a key to the room and can lock the door to promote our privacy and dignity, but staff knock and wait every time.”

People were encouraged to be as independent as possible and staff were observed providing support and encouragement when needed. The care workers were seen talking with people and having general conversations about day to day life and how they were feeling and what they wanted to do. We saw that the staff on duty showed they had time for the people they cared for and also had a good understanding of each person’s care needs. Feedback from service’s own quality assurance questionnaire included, “The care is outstanding” and, “I was well looked after, lovely staff caring for me.”

# Is the service responsive?

## Our findings

Staff assisted people with their care and support and were responsive to their needs. People received the support and assistance they needed and staff were aware of how each person wanted their care to be provided and what they could do for themselves. Each person was treated as an individual and received care relevant to their needs. It was evident that people were encouraged to be independent. Feedback included, “It is a nice place, the staff are lovely and I receive the support I need.”

People’s needs had been fully assessed before they came in for their stay and staff confirmed, “We contact the people who are staying the week before to ensure the information we have is correct.” The assessment forms were easy to read and quickly helped to identify each person’s care needs and assisted the service to identify what care and assistance was required. One person told us, “The nurse telephoned before I came in. We did a detailed questionnaire and nothing I said I needed was too much trouble. I have swallowing difficulties and they made sure had the one food that I find it easy to swallow my tablets in.” Another person said, “They rang from here and asked about everything and got a doctor’s report too. I think they have my needs well covered and know that I like a lay down in the afternoon and accommodate this.”

Information was available to staff in the form of a written care plan and also more in-depth information on the computer system used. The care plans we reviewed were in-depth and contained a variety of information about each individual person including their physical, mental, social and emotional needs. Any care needs due to the person’s diversity had also been recorded and when speaking with staff they were aware if people had any dietary, cultural or

mobility needs. Staff told us how the service responded to people’s individual needs such as ensuring that medicines and dressings were provided for flexibly for those who were going on outings that day to ensure their needs were met.

People enjoyed meaningful activities and day trips out. The service had a brochure which provided details of the ‘theme’ for the week, so people could choose to stay and participate in activities they would enjoy. The themes included, music legends, wild life and nature, murder mystery and theatre week to name a few. It was clear from discussions with staff that they tried to ensure each person took part in activities they liked and had interests in and enjoyed their stay. Staff spoken with stated that there was enough staff to support the people staying at the service to participate in the daily trips and activities. One person said, “The themed weeks are a great idea so you can choose a week that suits your interests. We have really enjoyed the outings so far.” Another person said, “There is lots going on but you can also be quiet if you like. I went on four outings. Then on another day staff told me they were just going to a local café for a coffee and did I fancy it. It was great.”

The service had effective systems in place for people to use if they had a concern or were not happy with the service provided to them. Each person was given details on how to raise concerns when they came in for their stay and management were seen to be approachable. Complaints that were seen had been investigated and appropriate action taken in response to the issues being raised. The service showed they listened to people’s experiences, concerns or complaints and used these to improve their service. Staff stated that they felt able to raise any concerns they may have with management and found them supportive. People confirmed they would be able to speak with management if they had any concerns, but added that they were very happy with the service.

# Is the service well-led?

## Our findings

People made positive comments about the service and the way it was managed. One person said, “I think it is really well run and caters for everyone’s ability. We had a meeting with the manager when we first came to welcome us and tell us about things. They also asked us to tell them if we found any problems so they could sort them out.”

There was a registered manager in post who had been registered with the commission since our last inspection. The manager was supported by a deputy manager and senior members of staff. The manager and deputy knew the service and the staff well. It was clear from our discussions with the manager and from our observations that all staff were clear about their roles and responsibilities. The provider’s representative visited the service regularly. They advised they worked shifts in the service on occasions which enabled them to really see and know about the service provided to people.

There was an open and supportive culture in the service. Staff told us that the management team were approachable and supportive. Staff were provided with opportunities to express their views on the service through staff meetings and supervision meetings. Staff told us they received good support from the manager and that there was always a member of the management team available in the event of any concerns arising. The manager told us of recent links to community initiatives and services such as the planned training on tissue viability and hydration for people using the service.

People had opportunity to shape the way the service was delivered. Regular meetings with people who stayed there were not held due to the holiday and respite nature of the service. However, the provider supported a forum which took place at least 7 times a year and provided an opportunity for people who had stayed or used the service to be part of a team to look at ways of developing the service and improving it.

The manager sought people’s views on the service as a way of continuously improving people’s experience of it. People were provided with questionnaires to be completed after each stay which helped to gain feedback on people’s experiences. One person told us they had recently provided feedback on having more written information available in bedrooms to help people with cognitive impairments and who may have difficulty remembering things. The person told us the manager responded positively and had confirmed that this would be implemented. The manager advised that any negative feedback was now investigated as a complaint and a written response was sent to the person to ensure appropriate improvements were put in place.

Systems were in place to assess, monitor and improve the quality and safety of the service. These included a range of audits completed within the service as well as audits completed by external assessors such as in relation to health and safety issues. Information was fed back to the provider for analysis and review, such as relating to for example, accidents so that necessary issues could be identified and improved on. Information on outcomes of quality systems were fed back to the staff working in the service to support staff involvement and morale.