

S B Care Limited

Valkyrie 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 

Overall summary

This inspection took place on 15 December 2015.

Valkyrie Lodge provides accommodation for up to six people who are living with mental health issues. There were six people living in the service on the day of our inspection.

There was a registered manager 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.

Staff had the necessary skills and knowledge to meet people's assessed needs safely. Staff were well trained and supported. There were sufficient staff who had been recruited safely to ensure that they were fit to work with people.

People told us that they felt safe and comfortable living at Valkyrie Lodge. Staff had a good understanding of how to protect people from the risk of harm. They had been trained and had access to guidance and information to support them in maintaining good practice.

Risks to people's health and safety had been assessed and the service had support plans and risk assessments

Summary of findings

in place to ensure people were cared for safely. People received their medication as prescribed and there were safe systems in place for receiving, administering and disposing of medicines.

The registered manager and staff had an understanding of the Mental Capacity Act (MCA) 2005 and Deprivation of Liberty Safeguards (DoLS) but had not had the need to make any applications. 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. DoLS are a code of practice to supplement the main Mental Capacity Act 2005. These safeguards protect the rights of adults by ensuring that if there are restrictions on their freedom and liberty these are assessed by appropriately trained professionals.

People were supported to have sufficient amounts of food and drink to meet their needs. People's care needs had been assessed and catered for. The support plans provided staff with good information about how to meet people's individual needs, understand their preferences and how to care for them safely. The service monitored people's healthcare needs and sought advice and guidance from healthcare professionals when needed.

Staff were kind and caring and treated people respectfully. People participated in activities of their own choice that met their needs. Families were made to feel welcome and people were able to receive their visitors at a time of their choosing. Staff ensured that people's privacy and dignity was maintained at all times.

There were systems in place to monitor the quality of the service and to deal with any complaints or concerns.

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.

People were protected from the risk of harm. Staff had been safely recruited and there was sufficient suitable, skilled and qualified staff to meet people's assessed needs.

People's medication was managed safely.

Good



Is the service effective?

The service was effective.

People were cared for by staff who were well trained and supported.

The manager and staff had an understanding and knowledge of the Mental Capacity Act (2005) and the Deprivation of Liberty Safeguards (DoLS) so that people's rights were protected.

People had sufficient food and drink and experienced positive outcomes regarding their healthcare needs.

Good



Is the service caring?

The service was caring.

People were treated respectfully and the staff were kind and caring in their approach.

People had been involved in planning their care and support.

Good



Is the service responsive?

The service was responsive.

People's care plans were informative. They provided staff with enough information to meet people's diverse needs.

There was a complaints procedure in place and people were confident that their complaints would be dealt with appropriately.

Good



Is the service well-led?

The service was well led.

There was good management and leadership in the service.

The quality of the service was monitored and people were happy with the service provided.

Good



Valkyrie 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 took place on 15 December 2015, was unannounced and carried out by one Inspector.

We reviewed the Provider's Information Return (PIR). The PIR is a form that the provider completes before the inspection. It asks for key information about the service, what it does well and any improvements it plans to make.

We reviewed other information that we held about the service including notifications. A notification is information about important events which the service is required to send us.

We spoke and interacted with all six people living at Valkyrie Lodge. We spent time in communal areas to get an understanding of people's experience, and their interactions with staff. We spoke with the registered manager of the service, two support staff and a visiting mental health professional. We contacted three commissioners of the service for their feedback.

We reviewed a range of different care records relating to three people living at the service. We also looked at two staff members' records and a sample of the service's policies, audits, training records and staff rotas.

Is the service safe?

Our findings

People told us that they felt safe living at Valkyrie Lodge. One person said, “I do feel secure and safe here.” People were comfortable and relaxed in staff’s company and responded positively to staff interactions.

The registered manager and support staff demonstrated an understanding of safeguarding procedures and when to apply them. There was a policy and procedure available for staff to refer to when needed and visual reminders such as posters. Staff had been trained and had received regular updates in safeguarding people. Information was available to people using the service about what to do if they had any concerns or worries.

Risks to people’s health and safety were well managed. People were supported to take every day risks such as accessing the community. People using the service were encouraged to understand the risks that they might face and ways of managing these. One person told us, “It’s not ideal having someone with you all the time but I accept that it is needed.” Care files contained comprehensive risk assessments relating to situations that caused people to become anxious or distressed and could cause them to act in a way that could be perceived as challenging and other aspects of people’s care needs. Risks had been identified and assessed. Management plans on how the risks were to be managed were in place.

Staff had a good knowledge of each person’s identified risks. We saw that they understood people’s needs and worked in ways that ensured that people were cared for safely. For example, staff were always available in communal areas with people and ready to provide support or defuse any emerging situations.

The registered manager had ensured that other risks, such as the safety of the premises and equipment had been regularly assessed. Safety certificates for equipment and systems were in place for the premises. Fire equipment was regularly checked and tested. People understood the fire procedures so that they would understand what to do in the event of an emergency.

There were sufficient staff to meet people’s assessed needs. The registered manager explained how staffing was

managed and when additional staff would be deployed to meet people’s needs. Staff told us that there were enough staff on duty to meet people’s diverse needs. We saw that staff were not rushed and were able to spend time with people supporting them and encouraging independence. Staff were present and responsive to people’s needs at all times. The staff duty rotas showed that staffing levels had been maintained to ensure adequate support for people.

The service had recruitment processes in place to ensure that people were supported by suitable staff. The provider had obtained satisfactory Disclosure and Barring checks (DBS) and written references before staff started work. Staff told us that they had not been able to start work at the service until their pre-employment checks had been received. Neither of the files viewed contained a ‘full’ employment history and only identified work undertaken so far in the United Kingdom. The registered manager undertook to address this in future recruitment.

People told us that they were supported well with their medication and had an understanding of what they took and what it was for. People’s medicines were managed safely. Staff had been trained and had received updates to refresh their knowledge. Competency checks had been completed following training to ensure that staff managed all aspects of medication administration correctly. The registered manager told us that they did from time to time observe staff administering medication to ensure good practices were being maintained, but, that this was not recorded.

There were systems in place for ordering, receiving and storing medication. Protocols were available for the management of medicines to be used on an as and when basis. Temperatures were recorded to ensure that medicines were stored in optimum conditions. Boxed and bottled medication was not being dated on opening to provide a good audit trail and the registered manager undertook to address this.

The medication system and quantities of medication in stock was audited between each shift. The registered manager also audited the medication on a regular basis to check that no errors were occurring. This ensured that people’s medicines were being managed safely and that they received their medicines as prescribed.

Is the service effective?

Our findings

People told us that staff understood their needs and that they felt well supported. One person told us, “They have helped me a lot and I have improved a lot since being here.”

People received their care from staff who had the knowledge and skills to support them effectively. A visiting professional told us that staff at the service were very experienced and did well in managing and supporting people who have mental health needs. They told us that the service was able to manage complex cases well and effectively.

A case manager for a person living in the service told us that staff at the service managed the person’s needs very well due to their breadth of experience in secondary mental health settings. The registered manager and three other staff were Registered Mental Health Nurses. Other support staff had also had many years of experience in working in acute and other mental health environments. This gave them knowledge and skills which they brought to their roles at Valkyrie Lodge.

Staff told us that they had received good training and support. They said that the registered manager and senior staff were available for support and advice when needed. Staff told us, and the training records confirmed that they had received training which included subjects such as safeguarding people, Mental Capacity Act 2005, infection control, food hygiene and health and safety. Staff had also been trained in subjects that were more specific to people’s individual needs such as epilepsy and working with behaviours that challenge and positive behaviour support. This showed us that the provider was committed to providing a well trained staff team to support people.

Staff had received a good induction to the service. One member of staff said, “I was well supported when I started, did a lot of training and was supernumerary until I was confident.” Records showed us that new staff undertook core training, had a detailed orientation into the service and worked through the Skills for Care Common Induction Standards to build up a good foundation of skills and knowledge.

The service was small and support staff and the registered manager worked alongside each other on a day to day basis. Staff practice was therefore continually monitored.

Staff records showed that staff had also received regular opportunities to meet with their manager on a one to one basis to discuss their views and personal development needs. An annual appraisal system was also in place to encourage ongoing development.

The registered manager and staff knew how to support people in making decisions. Staff spoken with and training records confirmed that training in the Mental Capacity Act (MCA) 2005 and Deprivation of Liberty Safeguards (DoLS) had been undertaken. Staff had an understanding of the MCA and understood the requirements of DoLS. The registered manager identified on their provider information return that this was an area that they would like to further develop with a greater knowledge being built up and the implications of the act in practice being further explored.

No DoLS applications had been required or made. The service however worked to ensure that people understood their rights in relation to other restrictions that they might be subject to in relation to their mental health needs.

People told us that the staff offered them choices and sought their consent when working with them. People had given their signed consent for medication and issues such as sharing records with other professionals as needed. During our inspection we heard staff asking people for their wishes and seeking their consent before carrying out any activities. People had been involved in their care planning and risk management, and were aware of any legal restrictions associated with their care. This meant that the service worked to support people in their best interests and in line with legislation.

People told us that they enjoyed the food at the service and were given plenty of choice and involvement in menu planning. One person told us, “The food here is good, if you don’t want what is on the menu they will offer you alternatives or say is there something in your cupboard that you would prefer.” People were supported to have sufficient to eat and drink and to maintain a balanced diet. Where particular dietary needs were identified care plans highlighted the support needed to ensure the person maintained a good level of nutrition. People were encouraged to be involved in meal preparation to increase their daily living and independence skills.

People’s healthcare needs were met. Records confirmed that people had been supported to attend routine healthcare appointments to monitor and maintain their

Is the service effective?

individual healthcare needs. Everyone at the service received regular support from mental health care specialists, consultants, and community psychiatric nurses. People attended other community services such as dentist

and opticians as required. An involved professional told us that they had every confidence that any mental health deterioration would be quickly picked up on by the staff team and appropriate action taken.

Is the service caring?

Our findings

People told us that they liked and got on well with the staff at the service. One person told us, “The staff are all good and support us really well.” Another said that, “The staff, and particularly your key worker, really understand what you are going through.”

People went about their own routines during our visit and there was good staff interaction. Staff displayed kind and caring qualities. Discussions with the registered manager and staff showed that they understood the needs of people using the service very well and supported them in ways that were encouraging and positive. Staff had received training in equality and diversity. They treated everyone respectfully and understood their diverse needs.

People had been involved as far as possible in planning their care. One person told us, “Yes they ask you about things and go through it all with you to make sure you are okay with everything.” We saw from records that people’s views and wishes had been sought so that the care provided would meet their individual needs. Each care plan started with the individual person’s view of the issue and what help they thought they needed.

Care records provided information about people’s needs, likes, dislikes and preferences in relation to all areas of their

care. They showed how people’s care and welfare was monitored. From discussions with staff and observations it was clear that they had a good understanding of people’s individual needs and supported them accordingly.

Staff treated people respectfully and ensured that their privacy was maintained. People could choose when they wanted to be alone or when they wanted to mix with others and followed their own routines.

Everyone in the service was able to express their own views about their care and wishes to a greater or lesser degree. All had some level of family contact and support, and no one was currently using the services of an advocate. The registered manager was however aware of advocacy services and how to access them if needed. They gave an example of when these had been used most recently. An advocate supports a person to have an independent voice and enables them to express their views when they are unable to do so for themselves.

People told us about their families and told us that they were able to visit whenever they wished. The provider information return form told us that the service maintained an open door policy where family and friends were always made welcome.

Is the service responsive?

Our findings

People received personalised care that was responsive to their individual needs. Before moving into the service there was a lengthy assessment process and a series of trial visits and stays to ensure that the placement would be appropriate for the person, and that they would be able to be supported safely by the service. There were informative care plans in place developed from this process. Care plans were kept under regular review to ensure that they were responsive to people's changing needs. People told us that they were happy with the care and support that they received. One person said, "I have no worries or concerns about my life here, I can come and go as I wish."

People were encouraged and supported to be as independent as possible and to undertake activities to improve their abilities and mental health. For example, attending local groups run by 'Rethink,' which is an organisation working in the mental health sector. People

were encouraged to follow individual interests and told us about the things they did such as visiting the local library and shops, attending local churches, doing crosswords and going on day trips to places of their choice.

People regularly accessed the local community in line with their individual preferences and assessed risks and needs.

People maintained relationships with their family and friends as they wished. Contact was maintained through visits and telephone calls.

The service had a complaints process in place. The complaints procedure was available to people so that they would know what to do if they had any concerns. No formal complaints about the service had been made since our last inspection. We did however see that more minor day to day issues had been recorded and dealt with appropriately. This showed us that the registered manager listened to people's concerns and acted to resolve any issues. People felt that they could discuss anything with the registered manager or staff and that any issues would be addressed. One person told us, "You can always talk to, [name of manager,] about anything."

Is the service well-led?

Our findings

People told us that the service was well led and managed. People using the service and involved professionals praised the service telling us that it was well managed and communicated with them well and appropriately. One person told us, “I do think this place is well managed, it feels under control.”

People said that staff and management were approachable. Throughout the inspection we saw that the management and support staff had positive relationships with each other and with people living in the service. The service was small and it was clear that management, staff and people using the service all got on well with people’s individual needs and abilities respected and understood.

Staff were positive about the management of the service. They said that the registered manager was approachable. Staff felt that they could raise any issues and felt listened to. Staff were motivated and told us that they enjoyed their role. There was a low staff turnover which provided consistent support for people using the service and showed us that staff were settled.

The service had a Statement of Purpose and Service Users Guide available as well as a brief leaflet about the purpose and facilities of the home. All outlines the aims objectives and philosophy of Valkyrie Lodge. The registered manager was able to clearly describe to us the vision of the service and explain how this was introduced and maintained in the staff team. The aim of working in partnership with people using the service, providing a person centred approach and encouraging independence was made clear to staff from the point of recruitment and reinforced through induction, ongoing training, daily interaction and monitoring. Staff were able to demonstrate the vision in their practice and promoted positive and respectful relationships with people.

Staff told us that there was good teamwork in the service and that they all worked together for the same ends. Staff provided good support to one another. Staff meetings occurred and handovers between shifts took place. This ensured that communication within the team was good, and that staff were kept up to date with current information about the service and people’s needs.

The registered manager was aware of the responsibilities of their role. They worked to ensure that a quality service that met the needs of people was provided. There were formal processes in place to support this. Regular audits had been undertaken in relation to health and safety, the premises and medication, with any matters arising being addressed. Cleaning schedules were maintained and monitored. Accidents and incidents were well recorded and monitored to ensure that any adverse events were learnt from. This ensured that appropriate standards were being maintained across the service.

Visits from other agencies such as environmental health had found the service to be operating well and in line with their required standards.

People’s views on the service were sought through one to one interaction, review processes and regular house meetings. Formal surveys were also undertaken on an annual basis. These had last been undertaken with people in April this year. People’s responses had been analysed and an action plan put in place to address one less favourable comment. People at the service were also encouraged to be involved through planning menus, and in meeting any potential new staff and expressing their views as to their suitability.

Overall people were very satisfied with the quality of the service and made comments such as, “It has been good for me here,” and, “I do feel as though I have moved on and am in a much better place now.”