

Mr & Mrs M Delpinto

Autumn Lodge Residential Home

Inspection report

41 Moss Lane
Orrell Park
Liverpool
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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

Autumn Lodge Residential Home is a care home providing personal and nursing care to 34 people. At the time of the inspection 31 people resided in Autumn Lodge.

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

People told us that they were well cared for and looked after. Other health professionals were consulted in a timely way according to the needs of the individual. People were supported and cared for in the least restrictive way possible. The policies and systems in the service supported this practice.

Staff were recruited safely and provided with training so that they could support people effectively and meet their needs. People received their medicines as required by trained competent staff.

People's views and opinions were encouraged and listened to, so that they helped in driving up standards in the home.

Regular audits were in place to monitor safety and infection control within the home so that people lived in a safe environment.

The registered manager and providers were open and transparent and had met their legal obligations in respect of Care Quality Commission (CQC) requirements.

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 rating for this service was good (published 23 August 2017).

Why we inspected

This was a planned inspection.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Autumn Lodge Residential Home

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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Autumn Lodge Residential Home is a 'care home'. People in care homes receive accommodation and nursing or 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 this 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.

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 sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and what improvements they plan to make. This information helps support our inspections. We also spoke with the Local Authority contracting department,

who had no concerns.

During the inspection

We spoke with five people living in the home. We spoke with five members of staff including the registered manager. We also spoke with the visiting optician, the community nurse and a trainer employed by the service.

We reviewed a range of records. This included three people's care records and medication records. We looked at two staff files in relation to recruitment and staff support and supervision. A variety of records relating to the management of the service, including audits, safety certificates and policies and procedures were reviewed.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff received appropriate training to ensure that people were kept safe. People told us that they felt safe living in the home. Staff understood how they could protect people and could effectively describe the signs and symptoms of abuse.
- Staff told us that they felt confident in challenging or raising issues with the manager or outside agencies should the need arise.
- Information regarding reporting of incidents was available to both staff and those living in the home.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The environment was well maintained. Regular audits of both the environment and equipment were undertaken by the manager. We saw safety certificates for gas, electricity and fire were available and in date.
- Risk assessments relating to daily living of those people living in the home were thorough and enabled people to live as independently as possible.
- Staff meeting minutes identified what staff could do better when things had gone wrong. Showing a willingness to learn from mistakes.

Staffing and recruitment

- Staff were employed in sufficient numbers to meet the needs of those living in the home. People in the home told us that they received support when they needed it.
- Thorough recruitment processes had been used including appropriate checks to ensure that staff were suitable to work in the care environment.

Using medicines safely

- People received their prescribed medication safely. Medicines were received and securely stored in the home.
- People received their medication from staff who had undertaken training for medicines administration.
- The medicines policy supported people to self-administer medication subject to a risk assessment.

Preventing and controlling infection

- People lived in clean hygienic accommodation. The relatives we spoke with commended that cleanliness of the home.
- There were effective hygiene audits completed on a regular basis, and action taken to address any shortfalls identified.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- People told us that they were well looked after, one person saying, "I have to admit they look after me well".
- Peoples' needs were assessed before moving to the home. Lengthy assessments and risk assessments were undertaken so that the service could demonstrate they could meet peoples' assessed needs.
- Care plans demonstrated that individual's likes and dislikes were accommodated. People had choice and were supported to continue with activities they had participated in prior to coming to the home.
- Electronic care plans had been developed to identify the daily activities needed to keep people fit and well. The system was effective in alerting the manager if those tasks had not been completed to ensure that people's needs were met promptly.
- People were encouraged to stay fit and active. We observed people participating in lively chair exercises to support their well-being.

Staff support: induction, training, skills and experience

- Staff received training relevant to the needs of the people they supported.
- The induction program developed by the organisation covered the necessary skills required to ensure that staff gained suitable qualifications for the work they undertook.
- The service employed an external training officer to deliver training to staff and support in obtaining formal qualifications.

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

- People told us that the food was lovely. One relative was elated that their loved one had gained weight since moving to the home, which they said was much needed.

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

- Records demonstrated that people had access to various other health professionals including doctors, opticians, district nursing team and dentists.
- The visiting professionals survey undertaken in October 2019 recorded positive comments about the service and the outcomes for people.

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

- We observed people navigating their way around with ease. Signage was visible to assist people with this.
- Communal spaces within the home were fresh clean and suitable to the needs of the people who lived

there. Bedrooms were well decorated and showed individuals personalities.

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 when this is in their best interests and legally authorised under the MCA.

In care homes, and some hospitals, 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- We found that appropriate processes were being followed and records maintained to ensure compliance with legislation.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- People told us that they were treated well. We saw positive interactions between people living in the home and the staff.
- A relative told us that their loved one was treated with dignity, they commented, "This home should be used as a template for good quality care".
- Policy and guidance were in place to protect individual's rights in relation to equality and diversity.
- Positive relationships had been formed between staff and the people in the home, with lots of interactions and laughter.

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

- Records demonstrated that people's views were actively sought and listened to. People told us that they felt listened to and could speak with any member of staff with any concerns. Relatives told us that the staff and managers were very approachable.
- We reviewed the complaint records and found that anybody making a complaint was listened to and appropriate action taken.

Respecting and promoting people's privacy, dignity and independence

- People's privacy was respected by all staff and visitors to the home. Visiting professionals saw people in private, and staff provided personal support in a discreet manner.
- The home was well laid out and afforded people privacy not only in their bedrooms but in some communal areas.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organization and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received support from staff who knew them well.
- People's needs and wishes had been planned for and care plans identified people's involvement in planning.
- People had choice to live active social lives outside in the community.

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

- There were no restrictions to visiting times in the home. Relatives said that they were always made to feel welcome and that communication between themselves and staff was excellent.
- Community links were evident to ensure that people remained involved and part of a wider community. Primary schools, students from Liverpool university, and a local regeneration group visited regularly to share experiences and put on plays.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Literature and documents were available to meet the needs of the people in the home.

Improving care quality in response to complaints or concerns

- A complaints policy and procedure was available for everyone living in the home and those visiting the service.
- Complaints were managed in accordance with the policy.

End of life care and support

- Procedures were in place for people to receive appropriate end of life care.
- At the time of the inspection nobody was receiving 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 the same. This meant 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

- Staff told us that they worked well as a team, one person said, "We look after them as if they are our own mums".
- Staff told us that the managers and owners of the home were approachable and led the service by example.

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

- Managers and staff were open and transparent throughout the inspection process. Effective records and audits ensured the quality of the care provision in the home.
- The previous inspection rating was displayed within the service's premises in accordance with regulatory requirements.
- The manager had informed CQC of any notifiable incidents as required by the regulations.

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

- People were encouraged to put forward their opinions and suggestions to develop the service and drive up the standards within the home.
- The registered manager held regular staff meetings. Staff told us that their opinions were valued.
- Surveys from health professionals working with the service were positive.

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 under the duty of candour, which is their legal responsibility in the event incidents or the occasion of something going wrong.