

Linkage Community Trust

Spencers Lodge

Inspection report

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Date of inspection visit:
01 September 2020
02 September 2020
04 September 2020

Date of publication:
01 October 2020

Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service well-led?

Good 

Summary of findings

Overall summary

About the service

Spencers Lodge is a residential care home providing accommodation and personal care for up to eight people who experience needs related to learning disabilities. At the time of the inspection there were seven people living in the home.

The home had been developed and designed before the principles and values that underpin Registering the Right Support (RRS) had been published. This guidance aims to ensure that people who use services can live as full a life as possible and achieve the best outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice and independence.

The service is larger than recommended by best practice guidance and is situated on a campus style setting with four other homes and the provider's adult skills service. However, the service had applied the principles and values of RRS and had mitigated against environmental factors that would otherwise reduce the likelihood of being able to provide truly person-centred care.

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

People and their relatives told us Spencers Lodge was a safe place to live. People said they were happy living there and staff supported them in the ways they preferred.

Systems for managing and reporting incidents had been improved and enabled actions to be taken to reduce the likelihood of similar incidents occurring in the future. People were supported by staff who understood how to keep people safe from harm or abuse.

People were supported to take positive risks to maintain their independence and social relationships. They received their medicines in a safe way. Measures were in place to minimise the risks related to the spread of infections.

There was an open and inclusive culture which enabled people to be involved in how the home was run. Governance systems enabled a continuous learning and improvement approach for the benefit of the people who lived at Spencers Lodge.

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

Rating at last inspection (and update)

The last rating for Spencers Lodge was requires improvement (published 22 October 2019) and there was one breach of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out this focused inspection to check the provider had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions safe and well-led. The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service remains requires improvement. This is based on the findings at this inspection.

As part of this inspection we also looked at the measures in place to control and prevent the spread of infection in the home. This was part of our thematic review of infection prevention and control in care homes.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Spencers Lodge on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.

Details are in our safe findings below.

Spencers 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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Spencers Lodge 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 home 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

We gave the provider a short period of notice of the inspection. This was due to the Covid-19 pandemic to ensure we had enough information prior to inspection to promote safety.

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. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with six people who lived at the home and three relatives about their experience of the care provided. We spoke with three members of staff and the registered manager.

We reviewed a range of records. This included two people's care records and medication records. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong
At our last inspection we found the provider had failed to record, investigate, analyse and report accidents and incidents. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 12.

- At this inspection we found the registered manager had reviewed and improved the systems for managing accidents and incidents.
- The registered manager regularly analysed incident records. This enabled them to take action to reduce the occurrence of similar incidents in the future. In addition, this enabled learning within the staff team to improve the support people received.
- The registered manager demonstrated their understanding of when and to whom incidents or concerns for people's safety should be reported.
- Records were consistent with the feedback people and staff gave us. An example of this was when a person told us about a situation that staff had helped them to resolve quickly, and daily records confirmed this.
- Staff had received training about how to identify and report any situation which they felt placed a person at risk of harm or abuse. They demonstrated their practical understanding of this training during our inspection.
- People who lived at Spencers Lodge told us they felt safe living there. One person said, "I feel very safe here." Another person told us, "Yes I feel safe; they check my [health condition monitoring equipment] if I'm [unwell]."
- Relatives echoed people's views. One relative told us, "[Our loved one] is safe living there; we've always had confidence in [the provider]."

Assessing risk, safety monitoring and management

- Since our last inspection care plans and risk assessments had been reviewed with people. They reflected their needs and wishes and the support they needed to take positive risks whilst staying safe.
- New positive behaviour support plans had been developed with people. They gave clear guidance to enable staff to support people with managing anxieties and promote positive life experiences for them.
- In addition, care plans were in place to support people to manage their safety and maintain relationships with family and friends throughout the pandemic.
- Staff told us they had access to care plans and risk assessments and used them to guide the support they provided for people.

Staffing and recruitment

- At our last inspection we found that people did not always receive the additional support hours commissioned for them. At this inspection staff rotas showed additional hours were provided as commissioned and used flexibly to accommodate people's wishes and requests.
- We saw there were enough staff on duty to meet people's needs and wishes.
- Records showed staff had been recruited in a safe way and in line with the provider's policies and procedures.

Using medicines safely

- At our last inspection we found there was no on-going monitoring for people who managed their own medicines. At this inspection no-one was managing their own medicines. However, the registered manager demonstrated their understanding of the provider's policy for supporting people to ensure they took their medicines safely and as prescribed.
- At our last inspection we found the administration of homely remedies was not robustly recorded or reviewed. At this inspection we saw the provider had adopted a new medicines policy which included administration of homely remedies. Medicine administration records showed homely remedies were now managed in an appropriate and safe way.
- People told us they received their medicines when they were due and in the ways they preferred.

Preventing and controlling infection

- Prior to this inspection, we undertook a review of how Spencers Lodge had managed the risks related to the Covid-19 pandemic. They provided us with a range of information which assured us they were effectively managing infection control practices and minimising the risk of infection.
- At this inspection the home was clean and smelled fresh. People were engaging in cleaning their own rooms with the support of staff and demonstrated their understanding of why good hygiene was important.
- Staff followed national guidance in relation to the Covid-19 pandemic such as wearing personal protective equipment (PPE) appropriately and maintaining enhanced cleaning routines.
- Information, in easy to read formats, was readily available for people about how to stay safe during the pandemic and general good hygiene practice.

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 requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- At our last inspection we found governance systems had not been effective in identifying areas for improvement. In addition, the registered manager had not informed us of notifiable events or incidents which had occurred in the home.
- At this inspection we saw the registered manager had completed regular checks of areas such as care planning, medicines arrangements and people's finances. Action had been taken to address any shortfalls identified. This meant the registered manager was able to drive improvements in the services provided.
- An on-going action plan was in place for the home which was reviewed with the provider's senior managers regularly. The plan set out the required outcomes, time scales for completion of actions and who was responsible for their completion.
- The plan included recommendations from external agencies such as the local authority as well as those set by the registered manager and the provider.
- The plan demonstrated the registered manager's and the provider's commitment to promoting best practice and continuous development of the services provided for people. For example, one action point was to further develop person-centred approaches to care and support. The commentary on progress showed research of best practice initiatives had led to improvements in how people's support was planned.
- We acknowledged the impact the pandemic had on the wider organisational governance systems. The provider had amended their policy of quarterly audits to reduce footfall into the home. However, the registered manager told us senior managers continued to provide regular support and advice and responded promptly to any quality issues identified.
- Records showed, and the registered manager told us, there had been no incidents or events in the home which we needed to be notified about. The registered manager had a clear understanding of their legal responsibilities related to the duty of candour.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The provider had appointed a new registered manager since the last inspection. People were positive in their feedback about the impact the registered manager had on the home. One person said, "I live at Spencers Lodge with the gorgeous [registered manager]. She's wonderful, she's lovely and I'm very happy

here." Another person told us, "Things have got a lot better lately. [Registered manager] is my keyworker and helps me a lot."

- Relatives were equally positive about the impact the registered manager had on the home. One relative told us, "[Registered manager] goes beyond the call of duty." Another relative said, "[Registered manager] is very good at communicating with us."
- Relatives were also complimentary about the staff team with one relative saying, "Absolutely brilliant staff; I can't praise them enough."
- Staff told us the registered manager was very supportive and listened to their views and opinions. One staff member said, "I'd happily go to [registered manager] if I had and concerns or issues. Another staff member said, "We're a good team here; we all support each other."
- People and their relatives were involved with planning and reviewing their support. People told us they had time set aside regularly to spend with their keyworkers. They said they could talk about anything that concerned them or any changes they wanted to happen and felt staff listened to them. A relative told us, "We're always involved in care plans, assessments and reviews."
- The provider and registered manager promoted good working relationships with external agencies such as the local authority, healthcare professionals and a local advocacy service. We also saw they had worked with a local care provider association to improve medicines policies.