

Coventry City Council

Quinton Lodge

Inspection report

Quinton Park
Cheylesmore
Coventry
West Midlands
CV3 5HX

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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

Quinton Lodge provides assistance with personal care to people living in their own individual flats with shared facilities. The premises consist of 31 flats. At the time of the inspection all 24 people who were living at Quinton Lodge received personal care. This is where people receive help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

People said they felt safe living at Quinton Lodge and received care and support from a consistent group of staff who were kind and respectful towards them. Staff knew about people's support needs and managed risks associated with people's health and wellbeing to keep them safe from harm. Staff were aware of how to identify potential abuse and how to protect people from abuse. Staff had been recruited safely and there were sufficient numbers of staff to support people's needs.

New staff completed an induction and all staff received regular ongoing training to update their knowledge and skills. Checks were made to ensure staff followed the provider's policies and procedures to ensure care was provided to people as required. Staff received ongoing support through supervision meetings with their manager. Staff worked with other professionals to ensure people had access to healthcare support if needed.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice. Staff understood they needed to seek people's consent before providing care and knew it was important to support people's independence.

Care plans were person centred and contained instructions for staff to follow to ensure people received care safely and in accordance with choices they had made. People were supported with their medicines during specific care calls and people said they received their medicines as prescribed.

Staff followed the provider's infection control policy and procedure to prevent the spread of infection and had access to personal protective equipment to maintain good hygiene practice.

People shared positive relationships with staff and were involved in decisions about how their care was provided. People said the staff were caring, supportive and approachable and they felt at ease to raise any concerns with them if needed. Arrangements were in place to provide information in different formats to make it more accessible to people if required.

People felt the service was well managed and were complimentary of management staff. Staff told us they felt supported in their role by the management team. Quality monitoring checks were completed by the provider to ensure any areas of improvement were noted and people received the care and support they

should expect. Areas people had identified for improvement had been acted upon. Accidents and incidents people experienced were recorded and monitored by the provider to reduce the risk of reoccurrence.

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 14 September 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well led.

Details are in our well led findings below.

Good ●

Quinton 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 team consisted of one inspector, an inspection manager and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Quinton Lodge provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

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

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection. Inspection activity started and completed on 11 March 2020 when we visited the office.

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. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan

to make. This information helps support our inspections. We used the information the provider sent us in the provider information return.

During the inspection

We spoke with six people about their experience of the care provided. We spoke with the registered manager, an assistant manager supporting the inspection from another of the providers homes and four care staff. We reviewed a range of records including four people's care plans, medicine records, complaints and two staff recruitment files. We looked at records of accidents/incidents and a variety of records relating to the management of the service including policies and procedures and the provider's quality monitoring 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 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

- People felt they received a safe service. One person told us, "I feel safe here, I certainly have no concerns, I don't even think about it. They treat me well, they are really good."
- The provider had a safeguarding policy and procedure and staff completed training on how to keep people safe from harm.
- Staff understood how to recognise abuse and knew to report any concerns to their manager to ensure people were kept safe. One staff member told us, "If I saw physical abuse and found nothing had been done, I would speak to next level (staff member), I would contact CQC and deal with the issue. We learn this in the training."

Assessing risk, safety monitoring and management

- Risks associated with people's care, safety and wellbeing were identified, assessed and managed. Each person's care plan informed staff of the actions they needed to take to keep people safe and reduce the risk of harm.
- People were able to access staff in an emergency and could choose to have a 'telecare' system installed in their home. This included the use of a pendant they could press to alert staff if they needed urgent assistance.
- Staff understood risk management was an important aspect of their day to day responsibilities. One staff member told us, "If I went into a flat and saw a risk, I would report it to a senior, your eyes are always on job looking at risks."
- When people's needs increased following a hospital visit, the registered manager reassessed the person's needs. This ensured any extra support needed was organised and provided to manage any increased risks to the person's health.

Staffing and recruitment

- There were enough staff to ensure people's needs were met. People received care and support from a consistent staff team who were familiar with their needs. One person told us, "The care staff are always there and if I need any help, they are there. Being the sort of person I am, I am self-supporting. If I need any help, I know I can get it from the staff."
- People told us staff arrived when they expected them to and completed all their care tasks without rushing them. One person told us, "They never rush you, they are great."
- Staff told us there were enough of them to meet people's needs. One said, "We pretty much get to calls on time unless there is an emergency which has put staff behind, we do get there on time."
- The registered manager had processes in place to cover any staff sickness and annual leave to ensure people's needs continued to be met.

- Staff had been recruited safely. All required pre-employment checks had been carried out by the provider to ensure staff were suitable and of good character to work with people.

Using medicines safely

- People who required support to take their medicines received this support when required. One person told us, "They deal with all my medication. I get my medication when I should... They also order it."
- Staff signed medicine administration records to show the medicines given or topical creams applied.
- Staff completed medicines training to help ensure they administered medicines safely.
- The registered manager completed audit checks to make sure staff followed safe medicine management procedures consistently. They liaised with local pharmacies to ensure people had access to their medicines in a timely way.

Preventing and controlling infection

- Staff had completed infection control training and followed good infection control practice, such as washing hands and wearing gloves.
- The registered manager confirmed staff had access to personal protective equipment (PPE) when needed. They said, "We have got a good supply of gloves, aprons, masks whatever we need."
- People confirmed staff used (PPE) to help prevent the spread of any infection.

Learning lessons when things go wrong

- Care staff recorded accidents or incidents involving people and informed the registered manager. This enabled them to identify any actions needed to prevent them from happening again.
- The system for recording ongoing trends was to be reviewed to ensure any future risks were clearly demonstrated along with any lessons learnt to prevent them happening again. Handover meetings at the beginning of staff shifts enabled any immediate and important information regarding risks to people to be shared and acted upon.

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 were involved in the assessment of their needs prior to them using the service to make sure their needs could be met. People choices and preferences had been discussed with them to help ensure staff respected these when delivering their care.
- Assessment information was used to develop people's care plans with instructions for staff to follow to ensure each identified need was met.
- Staff were aware of good practice guidelines in regards to delivering care, such as those related to medicine management and moving and handling people, to ensure they worked safely and effectively.

Staff support: induction, training, skills and experience

- People told us staff knew what they were doing and were appropriately trained to support them as needed. One person said, "I think they are brilliant. It's just the way they do things." They went on to give an example of this by explaining a staff member advised them to seek GP advice for a skin problem rather than the staff member dealing with it themselves.
- Staff completed an induction when they started work at the service and training was completed on an ongoing basis for them to update their skills and knowledge.
- Ongoing support was provided to staff through supervision meetings and observations. Staff told us they felt supported in their roles by management staff. One staff member said, "They have welcomed me like a family, staff make you feel comfortable. Very supportive. I am still learning but get the support."

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

- People who needed support with their meal preparation and drinks had pre-arranged calls where staff assisted them as required. Some people chose to be assisted to a communal dining area for a meal located within the building.
- One person told us, "You can go down to the dining room for lunch. I have not been well, so they bring it up to me, I rather like it. They come back after to collect it (the food tray)."
- Where people were at risk of ill health due to nutritional concerns, staff monitored their food and fluid intake and sought the support of health professionals where appropriate.

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

- Staff assisted people to access external agencies such as GP's, district nurses and dentists for support and guidance if needed. Staff knew how to support people safely and provided consistent and timely care.
- One person told us, "They ring the doctor if I need him and they refer to the hospital when needed. I do

quite a lot myself."

- People's care records confirmed all health professionals involved in people's care to maintain their health, and where appropriate, records reflected any treatment or guidance provided. For example, a district nurse had visited one person to remove and replace a dressing.

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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA

- At the time of our inspection, the registered manager told us every person receiving support had capacity to make their own decisions about their support needs.
- Staff had received training on the MCA and understood the importance of ensuring people's rights were protected. One staff member told us, "I have done the training, the five key points, I don't assume that people lack capacity."
- People told us staff checked with them it was ok to provide care and support before providing this.
- Where people sometimes made unwise decisions, staff encouraged these people to remain safe. Some people had made arrangements to be supported by local agencies when they wanted to make outside visits to help them remain safe.

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 they were well treated by caring and considerate staff. One person told us, "The staff are definitely caring. If they have time, we have a chat and a laugh, they are lovely you can't fault one."
- Staff completed training on equality and diversity to make sure they recognised and understood people's diverse needs and how to support them.
- People received continuity of care from staff who knew about their varying needs and abilities. They understood the importance of developing positive relationships with people and their families. One staff member told us, "Here they put people in the centre (of their care). People are treated well here."
- One person had been very anxious about attending a health appointment which meant they had not received the treatment they needed. Over a period of time, a staff member had encouraged and supported the person to give them the confidence to attend. The staff member went with them to the appointment resulting in the person receiving the treatment they needed to improve their health. This showed staff were caring and considerate towards people.

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

- People told us they were involved in decisions about their care and this was confirmed in their care plans.
- Staff listened to people's views to ensure their wishes and choices were respected and they were happy with their care. One person said, "They could not be any better, the staff here are wonderful, they come in quite a bit and are so good to me."
- A staff member said, "People are involved in planning their own care and assessments with families. Things can change with planning care." They went on to explain one person had chosen to stay in a short-term flat with the hope they would improve and be able to return to their own home but had since taken the decision to stay permanently due to changes in their health.

Respecting and promoting people's privacy, dignity and independence

- People told us staff respected their privacy and dignity. One person said, "They (staff) are really polite, they treat me with dignity, there are no silly comments where they make me feel bad. They are very professional. They reassure me always and make me feel comfortable (when receiving care)."
- Staff recognised the importance of supporting people to be independent. Care plans provided staff with details of what people could do for themselves and what tasks they may need support with.
- We saw people with walking aids making their way to the dining area with staff walking alongside them demonstrating people's independence was respected.

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 organisation and delivery.

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

- People received care which was personalised to their needs because they and their relatives were involved in developing plans of care. One person told us, "They come in the morning to wash me. I know all the carers. They do your breakfast they say to me, 'What do you want?'" The person said their choices were respected.
- Care plans were person centred with instructions for staff to follow so that people's needs and preferences were met.

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.

- People's communication needs were identified, assessed and recorded in their care plans. The registered manager was aware of the need to make sure information was accessible to people by providing this in a format they could understand.
- People said staff told them any important information they needed to know. One person said, "They come and tell you if something is going on in the lounge, for example, at Christmas. They take me down in my wheelchair and bring me back again."
- The provider information return (PIR) sent to us prior to our visit told us, "Pictorial aides and different language formats, interpreters can be accessed and used for sharing information ie Comments, Compliments and Complaints leaflets are available in differing language formats."

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

- The registered manager was involved in a project to help prevent people experiencing feelings of loneliness and isolation. Positive outcomes had resulted for people. For example, one staff member had taken the time to read a letter to a person who could not do this themselves. The registered manager said this had resulted in a positive impact for the person and made them feel happy.
- During the assessment process, people had shared information about family, friends and people who were important to them. This helped to ensure they could be supported, where appropriate, to maintain contact with them.

Improving care quality in response to complaints or concerns

- People knew how to raise any concerns and felt at ease to approach staff with these if needed. One person said, "If I have any complaints, they are all too willing to listen to me and do something about it."
- Complaints records showed there had been one concern raised and this had been acknowledged, investigated and responded to with action taken to prevent it happening again.

End of life care and support

- Arrangements were in place to support people at the end of their life. Some people had ReSPECT (Recommended Summary Plan for Emergency Care and Treatment) forms stating their wishes in the event they should need emergency care. These forms contained clinical recommendations regarding any treatment.
- A staff member explained how they had supported a person who did not wish to remain in hospital when at the end of their life. The specialised equipment needed for the person had been obtained and staff had worked with the family to ensure the person could remain at Quinton Lodge.

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 now 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

- People told us, the service was managed well. One person said, "I feel it is run well here, there are no issues, it is very good."
- People received person centred care because staff knew people well and were responsive to their needs.
- People were positive about the service they received and felt it improved their lives. One person explained how staff had supported them with an ongoing health condition that had helped them to remain well. They felt happy living at Quinton Lodge.
- People felt at ease to raise any issues with the provider demonstrating the provider was open to listening to people and making any improvements necessary. One person told us, "The management is very good."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People felt engaged and involved in the service as the provider and registered manager took time to listen to them and valued their views.
- Quality monitoring checks were completed by the provider. These included meetings with people to discuss their experiences of care as well as the completion of quality satisfaction questionnaires.
- People had responded positively to satisfaction questionnaires. One person told us, "I don't go to the tenant's meetings, but I have had a questionnaire sometimes to feed back. I've got no issues."
- Records showed improvements people had requested were completed. This included implementing a staff recognition board in the reception area of the building, and changes to the dining menu.
- The provider understood the legal requirements of their role including events they were required to notify us about.

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

- The provider was aware of their responsibilities regarding the duty of candour (being open, honest open and transparent when something goes wrong). The provider had systems in place to share any learning with staff when things went wrong. Staff were provided with opportunities to share their views and any concerns with the provider.

Continuous learning and improving care; Working in partnership with others

- The registered manager told us of improvements made to the service following the implementation of various quality initiatives. For example, they were "React to Red" accredited. This is a campaign introduced to respond to any concerns regarding people's skin with the aim of preventing any skin damage developing such as pressure ulcers.
- The provider worked in close partnership with GP surgeries, community mental health teams, district nurses and many other health professionals to monitor people's health and wellbeing. This helped to reduce the need for hospital admissions.
- The provider had facilitated meetings with a local pharmacy which had helped to improve people's experience of accessing the pharmacy service.