National Autistic Society (The)

Lakeside House

Inspection report

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Ratings

Overall rating for this service	Inspected but not rated

Is the service safe?	**Inspected but not rated**

Summary of findings

Overall summary

Lakeside House is a large detached bungalow situated in the extensive grounds of Somerset Court which is owned by the provider. The home can accommodate seven people who have autism and complex support needs. At the time of the inspection four people lived in the main part of the home and one person lived in the attached self contained flat.

The service had not originally been developed and designed in line with the Registering the Right Support guidance. This was because there were five other registered care homes set in the grounds of Somerset Court in close proximity to Lakeside House. The Registering the Right Support Guidance was implemented in 2017 after the service had registered with us. The registered manager had since personalised the service to reflect the Registering the Right Support Guidance.

People's experience of using this service and what we found
There were measures in place to minimise risks to people involving the risks relating to choking and individual health needs. Staff were aware of the control measures in place. Systems had been implemented to ensure all staff working in the service were aware of the risks and how to mitigate them. Risk assessments were reviewed and updated where required. We found one person's risk assessment did not have one piece of accurate information relating to how staff should respond to their health need. The registered manager confirmed they would amend the assessment.

Rating at last inspection
The last rating for this service was good (published November 2017).

Why we inspected
We undertook this targeted inspection to check on a specific concern we had about a choking incident. A decision was made for us to inspect and examine those risks. The information the Care Quality Commission (CQC) received about the incident investigation indicated concerns about the management of choking. This inspection examined those risks and the management of health-related risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe section of this full report.

The overall rating for the service has not changed following this targeted inspection and remains good.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for

Lakeside House 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?

Inspected but not rated

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question, we had specific concerns about.

Lakeside House

Detailed findings

Background to this inspection

The inspection
This was a targeted inspection to check on a specific concern we had about assessing risk, safety monitoring and management.

Inspection team
The inspection was carried out by one inspector.

Service and service type
Lakeside House 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.

Notice of inspection
We gave the service 48 hours' notice of the inspection to ensure we could manage the risks related to COVID19.

What we did before the inspection
We reviewed information we had received about the service since the last inspection. 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.

During the inspection
Due to COVID19 guidelines around inspecting in a campus setting we did not carry out a site visit to the service. We requested the documentation we required be provided for us at a safe location provided by the service. We reviewed four people's care plans relating to specific risks. We spoke with the registered manager, lead manager, area manager and quality manager.

After the inspection
We spoke with three staff and the registered manager via video calls.

Inspected but not rated

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. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to explore the specific concerns we had about the risk of people choking. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management

- Risks relating to people choking had been assessed and mitigated. Risk assessments were completed and reviewed when required. Staff were aware of the control measures in place.
- People at risk of choking had been assessed by the Speech and Language Therapy Team (SALT) to decide the safest way to support them to eat safely whilst managing a healthy diet. The SALT guidance was available in the care plans reviewed.
- Best practice guidelines are that a SALT assessment should not be transcribed. The risk assessments and care plans were clear about directing staff to the original SALT assessment and guidance.
- We found one person's risk assessment did not have one piece of accurate information relating to how staff should respond to their health need. However, records showed that staff had taken the appropriate action. The registered manager confirmed they would amend the assessment.
- Staff told us communication was good in the home and there were systems in place to communicate any changes in people's needs.
- The registered manager demonstrated how the provider had shared learning from an incident at one of the provider's other homes.
- Staff told us that they had completed relevant training relating to people's risks.
- The registered manager told us how they had implemented systems to ensure staff had access to relevant information relating to specific risks, including agency staff. They explained how people's risks were discussed at handover, staff meetings and staff supervision.
- The registered manager had oversight of people's risk assessments and the provider had systems in place to monitor these.