Shepherds Lodge Residential Home Limited

Shepherds Lodge Residential Home

Inspection report

4 West Mount
Barrow In Furness
Cumbria
LA14 5LQ

Tel: 01229431439

Date of inspection visit:
12 October 2017

Date of publication:
07 December 2017

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

The inspection took place on 12 October 2017 and was announced. We gave the registered manager of the home 48 hours' notice of our inspection because this is a small home and we wanted to be sure people would be available when we visited.

Shepherds Lodge Residential Home provides accommodation and personal care for up to six people who have a learning disability or mental health needs. The home is in a residential area of Barrow in Furness. Accommodation is provided in single bedrooms over two floors. There are five bedrooms on the first floor of the home and one bedroom on the ground floor of the property. The home has a range of communal areas that people living there share.

There was a registered employed to oversee the day-to-day running of the home. 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.

At our last inspection of the home on 25 February and 5 March 2015, the service was rated as good. The service was meeting the fundamental standards of quality and safety. However we found one aspect of how the service was responsive to people's needs required improving. Some people who lived in the home required support from staff to manage their behaviour. People's care plans had not included guidance for staff in how to support an individual if a strategy to assist them to manage their behaviour was not effective. The lack of clear guidance could have led to staff members taking inappropriate action which would not respect a person's rights.

At this inspection in October 2017 we found the service remained good. People's care plans and the strategies to support them to manage their behaviour had been reviewed and included advice from appropriate specialist services. The staff had guidance and advice about how to support people and how to respect their rights.

People who lived in the home were safe and protected against harm. Hazards to people's safety had been identified and actions taken to manage the risks identified. People were given information about remaining safe in a way that they could understand. The staff were trained in how to identify and report abuse.

The home was safe for people to live and work in. The premises were checked regularly to ensure they were safe and effective procedures were in place to protect people in the event of a fire.

There were enough staff to provide people's support. The staff were trained and supported to give them the skills and knowledge to provide individuals' care.

People were provided with meals and drinks that they enjoyed. People were supported to have a healthy diet and this had helped people to achieve and maintain a healthy weight.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People were included in decisions about their support and the choices they made were respected.

People were supported by a range of health services and received their medicines as their doctors had prescribed. This helped people to maintain good health.

People were treated in a caring and respectful way and their privacy and dignity were maintained. They were supported to carry out tasks themselves and to develop and maintain their independence.

Care was planned and provided to meet people's needs. The staff knew people well and provided their support at the time they needed. The staff identified if people were feeling anxious and provided support and reassurance promptly to reduce their anxiety.

The registered manager worked in the home and maintained oversight of the quality and safety of the service. Where the service could be further improved the registered manager had taken action to ensure people received a high quality service.

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 remains Good.	**Good**
Is the service effective? The service remains Good.	**Good**
Is the service caring? The service remains Good.	**Good**
Is the service responsive? The service is Good.	**Good**
Is the service well-led? The service remains Good.	**Good**

Shepherds Lodge Residential Home

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 checked 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 was a comprehensive inspection.

Shepherds Lodge Residential Home, (Shepherds Lodge), is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection. Shepherds Lodge accommodates six people in one adapted building.

This inspection took place on 12 October 2017 and was announced. We gave the registered manager 48 hours' notice of our inspection because people who live in the home are often out during the day. We wanted to be sure that people would be available to speak with us when we visited the home.

The inspection was carried out by one adult social care inspector and a specialist advisor. The specialist advisor had experience of providing services to people who have a learning disability, people who have autism and people who have mental health needs.

At the time of the inspection there were six people living in the home. We spoke with everyone who lived in the home and observed how the staff interacted with people. We also spoke with the registered manager of the home and with the two staff who were on duty during our inspection. We looked at four people's care records, medication records and at the training records for three staff. We also looked at the records around staff recruitment and how the registered manager ensured the quality and safety of the service.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements

they plan to make. We reviewed the information we held about the service, including the information in the PIR, before we visited the home. We also contacted the local authority commissioning and social work teams and local health care services to obtain their views of the service.

Good

Is the service safe?

Our findings

Everyone who could share their views with us told us they felt safe living in the home. One person told us, "I feel safe" and another person said, "I'm safe here [the registered manager] and the staff keep me safe."

Two people told us they enjoyed following activities on their own, or with friends, in the local community. They told us the staff in the home gave them information about how to stay safe while following their chosen activities.

We saw that people who could not easily share their views with us were comfortable and relaxed around the staff who were working in the home.

People who could speak with us said they would speak to the registered manager of the home if they felt concerned about their safety.

The staff we spoke with told us they were confident that people were safe living in the home. They said they had completed training in how to provide people's care safely and how to identify and report abuse. This was confirmed by the training records we looked at.

Before our inspection visit there had been one concern raised regarding how people were treated in the home. The concern had been investigated by the local health and adult social care team who told us the registered manager had cooperated fully with their investigation. The registered manager told us that, although the investigation had been a challenging time for her and the staff employed in the home, she had identified how the service could be changed to ensure the quality of the service was maintained. This showed the registered manager used concerns raised as an opportunity to learn and to improve the service provided.

People's care records held information for staff about hazards to their safety and how these were to be managed. Risk assessments were in place for staff to follow to ensure people's safety. The risk assessments were reviewed regularly to ensure they provided accurate and up to date information for care staff to follow. During our inspection we saw that the staff knew how to keep people safe.

There were enough staff in the home to provide people's support at the time they needed it. People who lived in the home and the staff we spoke with told us the staffing levels were suitable to meet people's needs.

We looked at the records around staff recruitment. New staff had to provide evidence of their good character and obtain a check against records held by the Disclosure and Barring Service. These checks helped to ensure new staff were suitable to be employed in the home.

People told us they received the support they needed with taking their medicines. We saw that the staff knew how to support individuals to take their medicines safely. Records were kept of all medicines the staff

gave to people. We saw that the records were checked regularly to ensure people had received their medicines as their doctors had prescribed.

Medicines were stored securely to prevent their misuse. The registered manager of the home was arranging for people's medicines to be reviewed to ensure these were appropriate and that people received medicines in line with best practice.

The premises were safe for people to live and work in. The registered manager had arranged for a specialist company to carry out risk assessments and to audit the safety of the premises. Where areas had been identified that could be further improved we saw that the registered manager had taken action in line with the guidance given.

During our visit to the home the fire alarm sounded due to a minor incident in the kitchen. We saw that the fire detection and safety systems operated effectively and the staff gave people the support they needed to evacuate the premises promptly. The issue that had caused the fire alarm to activate was identified and addressed promptly and people were able to return to the home. The registered manager of the home gave people praise for their prompt action in following their individual evacuation plans. Effective procedures were in place to ensure people's safety in the event of a fire.

Good

Is the service effective?

Our findings

We asked people who could speak with us if the staff employed in the home knew how to provide the support they needed. Everyone we spoke with told us the staff knew them and knew how to provide their support. One person told us, "The staff look after me here, they know how to support me."

The staff we spoke with told us they had completed a range of training in how to support people. Records we looked at showed the staff had received training including supporting people who have autism, supporting people who experienced behaviour that could challenge the service and understanding the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. We saw that the staff had also received specialist training to support people who had more complex needs.

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA.

The staff working in the home and the registered manager were aware of their responsibilities under the MCA. Where the registered manager had identified a need to place restrictions on a person's movements, in order to ensure their safety, they had applied for the required authorisation. Throughout our inspection we saw that people were given information and choices in a way they could understand and the decisions they made were respected.

The registered manager worked with the care staff supporting people who lived in the home. The staff told us they felt well supported and could contact the registered manager if they needed to when she was not working in the home.

People told us they enjoyed the meals and drinks provided in the home. They said they were included in choosing the meals and planning the menu for each week. People who wished to assisted the staff with the meal preparation and told us they enjoyed doing this.

We saw that meals were planned to take account of individuals' nutritional needs. People were supported to have a healthy diet and this had helped people to achieve and maintain a healthy weight.

People were supported to access routine and specialist health services as they needed. They were supported by a range of appropriate services such as their GPs, dentists and the specialist learning disability

and mental health teams. This helped people to maintain their physical and mental health.

Good

Is the service caring?

Our findings

People who could speak with us told us they liked living at Shepherds Lodge. They told us the staff were "nice" and said they liked the staff employed in the home. One person told us, "I like it here" and another person said, "The staff treat me well."

People were comfortable and relaxed around the staff on duty. The staff knew people well and encouraged them to talk about the activities they had followed during the day. We saw that this supported people's wellbeing.

Some people who lived in the home could experience feelings of anxiety. The registered manager and staff in the home knew how people expressed their anxiety and how to support them to feel less anxious. One person had an agreed routine to follow when they felt anxious. We saw the staff supported the person to follow their routine and this decreased their levels of anxiety. People looked to the staff and registered manager for reassurance when they felt anxious and we saw this was given promptly.

The staff in the home knew each person well and were able to communicate with individuals. They understood how people who could not easily express their wishes communicated and gave people the support they needed at the time they required.

Throughout our inspection we heard people enjoying laughing and talking with the staff on duty. The staff gave people the time and support they needed and treated people in a respectful and caring way.

People's privacy and dignity were respected. The staff called people by their preferred names and supported individuals to move to a private area when they required support with their personal care.

People were supported to develop and to maintain their independence. Three people told us they enjoyed accessing the community on their own. They told us they enjoyed being able to visit the local area independently.

People were supported to carry out tasks themselves including assisting staff to prepare their meals and drinks and looking after their own bedrooms.

One person had their own flat on the ground floor of the home. They told us, "It [having their own flat] helps me be independent in my own place". We saw they were proud of their flat and the independent living skills they were gaining. People who were able to do so held keys to their own rooms and to the main entrance of the home. This helped to support people's privacy and independence.

The registered manager was knowledgeable about how to contact advocacy services if a person required support to make or to express their wishes. Advocates are people who are independent of the service who can support people to make important decisions and to share their views.

Good

Is the service responsive?

Our findings

We asked people who could speak with us if they were included in decisions about their support and their lives in the home. People told us they were included in making choices about their lives and the care they received.

Each person who lived in the home had a detailed care plan that guided staff on how to provide their support. At our last inspection of the home in February and March 2015 we found that the care plans did not include guidance for staff in how to support a person if a strategy to assist them to manage their behaviour was not effective. The lack of clear guidance could have led to staff members taking inappropriate action which would not respect a person's rights. Although the fundamental standards of quality and safety were met, we found that this aspect of the service needed to be improved.

At our inspection in October 2017 we saw that care plans held information and strategies for staff to support people whose behaviour could challenge the service. The staff we spoke with knew people who lived in the home well and knew how to support them in managing their behaviours. The care records included advice from specialist health care professionals about how to support individuals. The care plans were written in a respectful way that centred on how to support each person in a way that respected their rights and choices.

People's care plans were reviewed regularly to ensure they gave staff up-to-date information about how to support them. People who could share their views had been included in reviewing their care. Where people could not share their views, people who knew them well had been included in their care reviews.

From speaking with the staff on duty and observing how they supported people, we saw that individuals' care plans were routinely followed and the staff knew how to support each person.

Some people who lived in the home had complex needs and were supported by specialist health care services. We discussed with the registered manager how the care records could be further improved by asking the health services to develop additional specialised plans of care.

People were supported to maintain relationships that were important to them. Some people told us about activities away from the home that they enjoyed with their friends. People's friends and families could also visit them in the home and join them for a meal if they chose.

People told us they followed a range of activities they enjoyed. One person told us they liked to watch films and play music in their room. They also told us about activities they enjoyed in the local community. One person told us, "I go out on the bus on my own." Another person had returned to the home from a visit to the town centre. They showed us items they had bought and said they had enjoyed their visit.

The registered manager had a procedure for managing complaints about the service. This was displayed in a communal area of the home in pictorial format to make it accessible to people who lived there. People told us that, if they had any concerns about their support, they would speak to the registered manager.

Good

Is the service well-led?

Our findings

The registered manager was also the owner of the home. She worked with the care staff providing people's support. This meant she was accessible to people who lived in the home and we saw people knew her well.

People who could speak with us told us Shepherds Lodge Residential Home was a nice place to live. They told us they liked the registered manager. We saw that people were comfortable and relaxed approaching the registered manager and addressed her by her first name.

The registered manager was available to give direct support and guidance to the staff as she worked alongside them supporting people. This also gave her the opportunity to oversee the quality of the care provided and to monitor how staff interacted with people. The staff we spoke with told us they felt well supported by the registered manager.

People who could speak with us told us they were asked for their views about the service and were included in deciding how the service was provided. They told us this could be by group meetings with the registered manager and also meeting individually with the registered manager or with a member of the staff team. We saw people had also been asked for their views at meetings to review their support. During our visit we saw the registered manager and staff on duty asked people if they were happy with the support provided.

The atmosphere in the home was inclusive and relaxed. One person who lived in the home told us there was a "homely" feel to the service. People had chosen to share their home with a pet dog and a cat. People told us they liked the animals living with them. One person said, "I like the dog, it's soft [silly]."

The registered manager carried out regular checks to monitor the quality of the service provided. We saw these included checking that care records were up to date and that medication records were completed properly. She had also employed a specialist company to audit the safety of the service. The registered manager worked with local health and adult social care services to ensure people received support that was based on recognised best practice. A member of the health and adult social care team told us the registered manager was, "Open and honest and willing to accept any advice or suggestions."

The registered manager was very experienced. She had completed appropriate training and qualifications to ensure she had the skills to manage the service.

The registered manager had identified areas where the service could be further improved. She had arranged for areas of the premises to be renovated to ensure people were provided with safe and comfortable accommodation that met their needs and promoted their independence. We saw one bathroom had been redeveloped as a shower room to assist people to maintain their independence. The area to the front of the home had also been improved to give people level and safe access to the front of the premises. This showed the registered manager invested in the service to ensure it continued to meet people's changing needs.