

Meadow Lodge Care Limited

Meadow Lodge Care Home

Inspection report

Meadow Lodge Broach Lane, Kellington Goole North Humberside DN14 OND

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Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Meadow Lodge Care Home is a care home providing accommodation and personal care for up to 25 people aged 65 and over. At the time of inspection there were 25 people living at the service.

Meadow Lodge Care Home is over two floors and the premises are accessible throughout with a lift between floors. There is shared toilet, showering and bathing facilities. There is a separate dining room and lounge area as well as smaller seating areas throughout the service.

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

People told us they felt safe and well cared for. Relatives were happy with the care their family member received.

Meadow Lodge Care Home had good infection prevention and control practices to keep people safe.

People were protected from the risk of abuse or neglect. The service had systems in place to raise safeguarding concerns and there were enough staff to meet people's needs.

There was a positive culture in the home where the provider, registered manager and staff demonstrated good care practices which benefitted the people living at the service.

There was a registered manager in post who had a good oversight of the service. They were accessible to all people living at the service, relatives and staff.

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.

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 27 February 2019).

Why we inspected

We started this inspection to look at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively. Our inspection raised some concerns about how infection prevention and control measure were being managed so we decided to extend our inspection to look at the two key questions Is the service safe? And Is the service well led?

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.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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 •
Is the service well-led? The service was well-led.	Good



Meadow Lodge Care 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.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was completed by one inspector on the first day of the inspection, and two inspectors on the second day.

Service and service type

Meadow Lodge Care 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.

Notice of inspection

We gave a short period of notice of the inspection because of the COVID-19 pandemic. We had to arrange safe working procedures for our inspection.

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. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with four members of staff including the provider, registered manager, deputy manager and a cleaner.

We reviewed a range of records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. We reviewed accident and incident records and health and safety documentation. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We reviewed two care plans, staff meeting records, medication records and policies. We spoke with three relatives and three care staff over the telephone to obtain their view of the service.



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 were protected from the risk of abuse or neglect.
- The service had systems in place to make sure incidents of concern were reported. This helped ensure people's safety.
- Staff had a good understanding of the service's safeguarding policy and when they needed to raise a concern
- One person told us, "I feel safe here. I like it."

Assessing risk, safety monitoring and management

- The service assessed, monitored and managed people's safety.
- People who required support in managing risks had personalised risk assessments in their care plan. Meadow Lodge Care Home had systems in place to monitor ongoing risks people experienced.
- People were supported by specialist health professionals, if required, to minimise the risk of injury or harm.
- One relative told us "I ring most days and the staff are very helpful and they know [relative] very well. I have no concerns."

Staffing and recruitment

- Staff were recruited safely and there were enough staff to meet people's needs.
- The service had safe recruitment practices; new staff had a Disclosure and Barring Service (DBS) check and each member of staff had an interview to assess their suitability for the role.
- Staff had initial training which made sure they had the skills to support people living at the service.
- There were enough staff available to meet the needs of the people using the service.
- One member of staff told us, "I love my job. The staff team work really well together."

Using medicines safely

- Medicines were stored and administered safely.
- People were encouraged, where possible, to manage and take their own medication to promote their independence.

Learning lessons when things go wrong

- The provider learnt lessons when things went wrong.
- Where incidents occurred, this was reported to the Local Authority and CQC. The provider reviewed the accidents and incidents in the service to check for patterns or trends. This helped identify any changes

required and prevent a recurrence of similar incidents.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.



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

- People benefitted from a positive culture within the service.
- People were empowered to be in control of their lives and decision making. People were given choice and independence over day to day activities.
- One member of staff told us, "We are like one big family. We treat the people who live at the service like we would our own family."

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 acted within its legal responsibility to be open and honest when things went wrong and informed the relevant organisations and people.

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

- The registered manager had a good oversight of quality performance, risk management and regulations to keep people safe.
- Staff had staff supervisions, staff team handovers and team meetings in line with the provider's policy. The registered manager had oversight of the running of the service by completing audits, spot checks and monitoring care.
- The registered manager had a good understanding of the regulatory requirements.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider engaged with people and their relatives in the development of the service and ensure protected characteristics were respected.
- People using the service had a good rapport with the staff and registered manager. One person told us, "I can ask for anything. Northing is too much trouble."
- Staff had an understanding about people's individual equality characteristics and ensured people were treated with dignity and respect.

Continuous learning and improving care

• The registered manager promoted continuous learning and innovation within the service.

• Staff told us that the registered manager was open to new ideas to improve care for people living at the service. The manager and provider were accessible to people and engaged in discussion about how care could be improved.

Working in partnership with others

• There were good working relationships with commissioners, the local authority and external healthcare staff. This ensured people received the right care. Staff engaged with partners to provide a multi-disciplinary approach to support people living at the service.