

Mr & Mrs H Emambocus

Marina Lodge

Inspection report

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North Yorkshire
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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

Marina Lodge is a care home providing accommodation and personal care for up to 11 younger people requiring support with their mental health. At the time of the inspection there were seven people using the service.

The service has communal space and bedroom accommodation over two floors. A garden and courtyard were situated to the rear of the property with seating that people had access to use.

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

People told us they felt safe and that staff supported them well. The provider had robust recruitment checks in place to employ suitable staff. Staff were available to provide care and support when needed, in a timely way. People's medicines were managed safely.

Staff received training which provided them with the knowledge and skills needed to carry out their roles. Staff told us they felt supported and received regular supervisions and appraisals to support them.

People had choice and control of their lives and the staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People engaged in regular activities with staff and other people living at the service. Staff supported some people to access the community and attend activities or events outside the service.

Staff described people's individual needs which were detailed in their care plans. These were regularly updated to reflect any changes in people's needs. People told us staff treated them with dignity, respect and understood their needs. People described staff as, "Kind and caring" and, "Excellent, easy to get on with."

The service was managed well and demonstrated positive outcomes for people. The registered manager was hands on and regularly assessed the quality of care provided to people. People and staff had opportunities to voice suggestions to improve the service which the provider had taken on board and actioned.

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

Rating at last inspection

The last rating for this service was good (published April 2017).

Why we inspected

This was a planned inspection based on the previous rating. 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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Marina 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

One inspector carried out this inspection.

Service and service type

Marina 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 service had a manager registered with CQC. 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

This inspection was unannounced.

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 who works with the service. 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 all of this information to plan our inspection.

During the inspection-

We spoke with two people who used the service and one relative about their experience of the care provided. We spoke with three members of staff including the registered manager, and two care workers.

We reviewed a range of records. This included people's care and medication records. We looked at a variety of records relating to the management of the service, including quality assurance, infection control and building maintenance 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

- Staff could describe how they would protect people from harm and abuse. They understood how to report internally and to appropriate external agencies.
- People felt safe and told us they trusted the staff that supported them. One relative said, "It's very safe here, its excellent."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff regularly assessed risks and care plans provided detailed guidance for staff to meet people's needs safely. Information was available to staff about how to support people should they become anxious or upset. This meant that restrictive practices were avoided.
- Processes were in place to record accidents and incidents. These were analysed and responded to appropriately. Lessons learnt were shared with the staff team to reduce repeat incidents.
- The environment was well maintained and safe. Emergency plans were in place to ensure people were safely evacuated in the event of a fire.

Staffing and recruitment

- Recruitment checks were robust to ensure suitable people were employed.
- We observed staff meeting people's needs in a timely way. They provided guidance and support at the time it was needed. One member of staff told us staffing levels were, "Really good. We really pull together as a team."
- The registered manager was available to support staff should they need additional support at any time.

Using medicines safely

- Medicines were administered, monitored, stored and disposed of appropriately.
- The provider worked alongside health professionals to monitor and review medicines that affect people's moods and behaviours. This meant they received the right medicines at the right time and that these were reduced when this was appropriate.

Preventing and controlling infection

- The service was clean and maintained to a good standard throughout. Staff had received training in how to prevent and control infections to maintain people's health and well-being.

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

- Staff regularly assessed and reviewed people's care and support. This ensured their approach was meeting people's needs and effective outcomes were achieved for people. For example, one person's previous placement had broken down. During their stay at Marina Lodge their health and well-being had improved, and one to one support gradually reduced as they became more confident and independent.
- Staff were aware of best practice guidance to support people to achieve a good quality of life. They considered people's backgrounds and how this may affect them, they understood how to support and meet people's needs holistically. Guidance was in place, so staff were fully aware of people's needs and preferences of how they would like to be supported.
- Handovers were completed when shifts changed to ensure important information or changes were communicated to all staff.

Staff support: induction, training, skills and experience

- Staff had completed an induction and ongoing training was provided to keep people's knowledge up to date. Staff received supervisions every three months and annual appraisals were scheduled. One member of staff advised, "Yes, I find supervisions useful. They ask what they can do for me, anything I need to know and whether I need any additional training. If I need anything I ask and it's then arranged it's really good."
- Staff had the skills and experience to support people well. One relative said, "They are so understanding. Since moving here [name of person] has improved."

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

- People were supported to prepare their own meals and snacks throughout the day. They had access to a varied and nutritious diet. People told us the food is, "Excellent." One relative advised, "They are given alternative food choices if they don't want what's been cooked on the day."
- People had access to plenty of fluids throughout the day. Facilities were in place in communal areas so people could make their own refreshments at a time of their choice.
- Staff were aware to monitor any changes or issues such as weight loss so that people received the right support from health professionals without delay.

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

- Staff told us they supported people to attend healthcare appointments when needed. Any advice was documented in people's care records and followed.
- Information was shared with other agencies when appropriate to ensure people transitioned between

services, such as hospitals with little disruption to their routines.

Adapting service, design, decoration to meet people's needs

- People's rooms were decorated with personal items of their choice to personalise them.
- People were able to access outdoor space. There was easy access to the courtyard and garden to the rear of the property which included seating areas.

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.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People were involved in decisions about their care. Staff always sought people's consent and supported them to have choice and control of all their support needs.
- People's rights were protected; staff assessed people's mental capacity and made best interest decisions when needed.
- Staff recognised restrictions on people's liberty and appropriate action was taken.

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 and their relatives gave positive feedback about the service. One relative advised, "They [staff] are so understanding. This is the best home [name] had up to now, some awful in the past not caring like they are here."
- Staff were calm and understanding when responding to people. Staff described how they supported people and took time to speak with them when they asked for emotional support. This meant people's anxieties were reduced and managed well.
- Staff showed genuine respect for people and ensured their rights were upheld and that they were not discriminated against. A relative said, "Staff are attentive to [name] needs and respectful of their choices."

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

- People had support from their families or representatives if they needed support when making decisions.
- People were encouraged to make decisions and choices about their care. A relative said, "It's about them feeling supported, staff are good at providing the right support here."

Respecting and promoting people's privacy, dignity and independence

- Staff promoted people's dignity and respected their privacy. We observed staff knocking on people's doors before entering and allowing them private time alone in their rooms when they needed to be quiet.
- Staff promoted people's independence Using step by step support to build people's confidence. One person had progressed from not wanting to go out to attending various activities with support of staff within the community.
- The provider ensured people's information was stored securely to maintain their privacy and confidentiality.

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

- Staff understood how to deliver person-centred care to people. They adapted the way they worked to suit each individual's needs and listened to what was important to them. A person told us, "Staff are approachable, and they take time to talk to me. I feel at home living here."
- People and their representatives were invited to be involved in reviews of their care. Care plans were current and detailed changes in needs and people's preferences.

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.

- The provider was aware of the need to make information for people available in formats they could understand. Alternative formats or additional support was available from staff if needed.
- People were encouraged by staff to express their wishes and views; care plans were being updated to include further detail about people's communication preferences.

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

- People enjoyed social activities with friends, family and staff that supported them. One relative advised, "[Name of person] was not active in previous placements. Now they get up early, the will to live for the day is there. Outings are arranged by staff and they have things to do here."
- People had achieved more independent skills whilst living at Marina Lodge; preparing their own lunches; accessing the community with other residents they had befriended and visiting other people living at another service run by the same provider that was in close proximity.
- People chose which activities they would like each day and the provider planned outings which people told us they enjoyed. These included shopping trips; cinema outings and lunches or coffees outside the service in local towns. One person had sent a thank you card to staff, it read, "Had a nice birthday lots of food, thanks to staff who made me my cake."
- People's religious and cultural beliefs were considered at assessment stages so these could be planned for if needed. Some people chose to attend the local church services independently.

Improving care quality in response to complaints or concerns

- Information was available about how to make a complaint and people felt comfortable using this process or speaking with staff to address any concerns they may have.
- Complaints were investigated and addressed in line with the provider's policy and procedure. Two complaints had been made since our last inspection and both had positive outcomes.

End of life care and support

- End of life care plans recorded people's wishes and preferences. Staff explored what was important to people, such as where they would like to be cared for should their health deteriorate.
- No end of life care was being provided at the time of this inspection.

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

- The registered manager was passionate about provided good quality support to people. A relative told us, "The management team are calm, they are great."
- Staff felt listened to and able to make suggestions which improved the service. They understood the visions and values of the service and worked as a team to continually improve people's experiences.
- The service was well managed. The atmosphere was calm and welcoming. A relative told us, "There are no restrictions on visiting, within reason I can visit at any time."

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 registered manager communicated and recorded all incidents or concerns internally through their own procedures and when relevant, externally to the local authority or CQC as required by law.
- There was good communication with people and families. Relatives said, "I am kept informed of any issues or incidents, communication is 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; Continuous learning and improving care

- Quality assurance systems were in place which identified and actioned improvements in the service.
- People, relatives, staff and health care professionals were asked for their opinions of the service. Informal chats, meetings and satisfaction surveys were used to gather feedback. The manager analysed these and actioned anything that was required.

Working in partnership with others

- The service had good links with the local community. Staff worked in partnership with other agencies to improve people's opportunities and wellbeing. For example, the provider had been working with the local authority to improve practices within the service.