

Paradise Lodge Care Home Limited

Willow Tree Lodge

Inspection report

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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 

Overall summary

Willow Tree Lodge provides accommodation and personal care for 3 people who have a learning disability and require 24 hour support and care.

This was an unannounced inspection which meant the service and staff did not know we were visiting.

A registered manager was in post. A registered manager is a person who has registered with the Care Quality Commission (CQC) 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.

The CQC is required by law to monitor the operation of the Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DOLS) and to report on what we find. We found the location was meeting the requirements of the DOLS.

People who used the service told us that the service was a safe place to live. There were procedures in place which

Summary of findings

advised staff about how to safeguard the people who used the service from abuse. Staff understood the various types of abuse and knew who to and how to report any concerns.

There were procedures and processes in place to guide staff on how to ensure the safety of the people who used the service. These included checks on the environment and risk assessments which identified how risks to people were minimised.

There were appropriate arrangements in place to ensure people's medicines were obtained, stored and administered safely.

There were sufficient numbers of staff who were trained and supported to meet the needs of the people who used the service.

Staff had good relationships with people who used the service and were attentive to their needs. Staff respected people's privacy and dignity and interacted with people in a caring, respectful and professional manner.

People were involved in making decisions about their care and support. People's care plans had been tailored to the individual and contained information about how they communicated and their ability to make decisions. The service was up to date with recent changes to the law regarding DOLs.

People were supported to see, when needed, health and social care professionals to make sure they received appropriate care and treatment. People spoke highly about the quality of the food and the choices available.

A complaints procedure was in place. Everyone we asked said they would be comfortable to raise any concerns with the staff, manager or provider.

People, relatives and staff were complimentary about the management of the service. Staff understood their roles and responsibilities in providing safe and good quality care to the people who used the service. The service identified shortfalls in the service provision and took actions to address them.

Summary of findings

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.

There were systems in place to manage safeguarding matters. Staff understood how to recognise abuse or potential abuse and how to respond and report these concerns appropriately.

There were enough staff to meet people's needs.

There were systems in place to manage people's medicines safely and to provide their medicines as prescribed.

Good



Is the service effective?

The service was effective.

Staff were trained and supported to meet the needs of the people who used the service. The Deprivation of Liberty Safeguards (DoLS) were understood by staff and appropriately implemented. Therefore people were not unlawfully deprived of their liberty.

People were supported to maintain good health and had access to appropriate services which ensured they received on-going healthcare support.

People made choices about what they wanted to eat and drink and the quality of the food provided was good.

Good



Is the service caring?

The service was caring.

Staff were caring and considerate. They supported people to maintain their dignity and treated them with respect.

The atmosphere in the home was warm and welcoming.

Good



Is the service responsive?

The service was responsive.

People's wellbeing and social inclusion was assessed, planned and delivered to meet their needs.

Good



Is the service well-led?

The service was well-led.

Audits had been completed and the information recorded.

The management team were aware of the day to day culture in the home and staff were updated on new and changing methods to ensure best practice.

Good



Willow Tree Lodge

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 was planned to check 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 inspection took place on the 29 January 2015 and was unannounced and was undertaken by one Inspector.

Before our 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.

To help us plan what areas we were going to focus on during our inspection, we looked at the PIR and reviewed information we had received about the service such as notifications. This is information about important events which the service is required to send us by law. Information sent to us from other stakeholders for example the local authority and members of the public were also reviewed.

We spoke with three people who were able to express their views about the service and two relatives. We also spoke with one member of care staff.

We looked at records in relation to all of the people's care. We looked at records relating to the management of the service, staff recruitment and training records, and systems for monitoring the quality of the service.

Is the service safe?

Our findings

People told us they felt safe living in Willow Tree Lodge. One person told us 'I am looking forward to spending the rest of my life here'. A relative told us that they felt that their relative was well cared for, they also said 'I am confident that any issues would be addressed'.

We looked at the staffing levels in the service. We saw that there was one member of staff on duty throughout the day and at night. In addition the manager works across both homes. Staff told us that additional staff are available to support people's community participation. There was also 24 hour on-call support available in the event of an emergency. From looking at staffing rotas and talking to staff we found that appropriate staffing levels were being maintained. Our findings indicated that sufficient staffing levels were being provided to meet people's needs and care for them safely.

All newly appointed staff received awareness training around safeguarding of adults within the first week of commencing employment to ensure that they were aware of what abuse was, how to identify it what to do if they saw or suspected abuse was occurring. They then completed regular updates in order to keep them aware and alert. Staff were able to show us that they had a good awareness of what constituted abuse or poor practice and were able to describe the types of abuse that might take place. They demonstrated that they knew what to do if they saw or suspected abuse. Staff knew the processes for making safeguarding referrals to the local authority. This showed

us that staff understood their responsibilities around keeping people safe. The provider also had policies and procedures in place to guide staff on safeguarding and their responsibilities around keeping people safe.

Risks to people's safety were appropriately assessed, managed and reviewed. Care records showed that risk assessments had been completed on areas such as the environment, finances and accessing the community safely. These risk assessments enabled people to go about their day to day activities safely and enabled them to maximise their independence both within the home and in the community.

Staff recruitment records showed that all the required checks had been completed prior to staff commencing their employment including a Disclosure and Barring Service (DBS) criminal records check, previous employment references and a health check. This ensured only appropriate care workers were employed to work with people at the home.

Medicine records and storage arrangements seen were in good order and demonstrated that people received their medicines as prescribed. We were told that all staff administer medicines to people following training from the dispensing chemist. We were unable to observe an administration round because people were not due to receive their medicines during the period of our inspection. However staff described to us how they supported people with their medicines, from their description we were able to conclude that people were supported in a way that was dignified and respectful.

Is the service effective?

Our findings

People received effective care and support which took account of their wishes and personal preferences. People told us that they were happy with the service that they received, that their needs were met and the staff were competent in their roles. A relative that we spoke with told us 'Can't say anything but great things' My [Relative] has never had such a good life' They also told us that they were always kept informed about their relatives well-being.

Staff told us that access to training was good and gave them the information that they needed to be able to deliver care and support to people who used the service. They were positive about the training they received and how it helped them to support people. We saw that staff had received training in a range of areas including; safeguarding, Mental Capacity Act (2005) and Deprivation of Liberties, dignity and care, nutrition and diabetes awareness. This training helped to ensure that staff had the necessary knowledge and skills to meet people's needs.

The Care Quality Commission (CQC) monitors the operation of Deprivation of Liberty Safeguards (DOLs) which applies to care homes. Staff had a good understanding of DoLS legislation and had received training.

We spoke with a member of staff on duty. They were knowledgeable about people's individual needs and preferences. They told that "We have access to lots of training and support". Training records showed that staff had received updated training to maintain their knowledge and competency. This ensured people received care and

support from an effective team. Staff told us that the manager and the provider were very supportive. We saw that staff received one to one supervisions every six to eight weeks and annual appraisals.

Staff received a comprehensive induction to the service which included shadowing other staff for a minimum of two weeks. Reading people's care plans and related documents, such as policies and procedures. Staff told us that during their induction period they worked across all three of the providers other homes, this enabled them to be able to work flexibly in the future if required and ensured that they had a good level of knowledge and understanding of the needs of all of the people supported across the service.

People's care records showed that their day to day health needs were being met and that they had access to healthcare professionals according to their specific needs. The service had regular contact with healthcare professionals to ensure people were provided with the care and treatment they needed. Where the staff had noted concerns about people's health, such as weight loss, or general deterioration in their health, prompt referrals and requests for advice and guidance were sought.

We saw that people were provided with choices of food and drink and that they were provided with a balanced diet. The menu for the day was displayed in the service and people confirmed that they were supported to menu plan and made their choices from the menu. People told us that they played an active part in preparing their own meals with support where necessary and ate their meal in an unrushed manner and at a pace that suited them. People's care plans contained information on their dietary needs and the level of support they needed.

Is the service caring?

Our findings

People told us that staff were caring towards them and always treated them with dignity and respect. There was a warm and friendly atmosphere in the home. People who lived in the home and staff had a good rapport and it was clear to us that staff knew people very well. We observed that staff interactions with people were positive and the atmosphere within the service was seen to be welcoming and calm. Staff demonstrated affection, warmth and compassion for the people they supported. We saw that interactions between staff and people who used the service were friendly and easy-going.

Staff spoken with demonstrated an in-depth, detailed knowledge and understanding of people's needs. They were able to tell us about people's preferences, risks and how they were managed, ways of communicating and specific health issues. People told us that staff supported them to do whatever they decided they wanted to do. One person told us 'I do what I want, and when I want to.'

We looked at three care plans and saw that they contained comprehensive information about people's needs and preferences. The information was clear and there was sufficient detail to ensure staff were able to provide care consistently. We saw that people had been consulted with about their care plans and those that had chosen to, had signed their plan to confirm the consultation. Where people had chosen not to do so this was also recorded.

Throughout our inspection we saw that staff were courteous, caring and patient when supporting people. People were given time to make decisions. We saw that people's privacy and dignity was protected, for example, staff were seen to knock and wait for an answer before entering people's bedrooms.

From our observations we saw that people had a good sense of well-being, they were at ease and relaxed in their home and came and went as they chose.

Is the service responsive?

Our findings

People told us they were able to express their views about the quality of the service provided and to share ideas and suggestions with staff, in satisfaction surveys and in meetings. The minutes of these meetings showed people's feedback was taken into account and acted on. People told us that they were often asked if they remained happy with the service provided.

During our inspection we observed people being offered choices by staff about their care. For example what food they would like and how they were planning to spend their day.

We reviewed the care plans for three people. They reflected the mood of the person in a positive manner. They reflected the care given as identified in people's care plans and risk assessments and that their preferences and wishes were promoted and respected.

At the time of our arrival all of the people living in the home were out shopping and having a pub lunch. When we spoke to people upon their return they told us that they attended a good range of activities which included attending day centres, going to pottery classes and attending church services. We saw that people's activities for the week were posted on the notice board in the dinning room as a reminder to them. People told us that they felt that they had access to a good range of daytime activities.

There was an effective complaints procedure in place and the service listened to people's concerns. People and their relatives told us that if they had any concern they would discuss these with the management team or staff on duty. People told us that they felt able to talk freely to staff about any concerns or complaints and were confident that if they had a concern they would be listened too, and their concern addressed. Staff told us that they were aware of the complaints procedure and knew how to respond to people's complaints.

Is the service well-led?

Our findings

Staff told us that both the registered manager and the provider were very supportive and both had a visible presence in the home. They also told us that both the manager and the provider were approachable and would listen to any concerns or issues expressed.

We saw the registered manager worked well with staff and was available to support them when needed. The rota detailed the availability of the registered manager. Staff told that the manager was very supportive and they were clear about their responsibilities. One member of staff said, 'The manager is open and approachable and I am confident that any issues would be listened to and addressed.

Staff were clear about the process to follow if they had any concerns and knew about the whistleblowing policy and would have no hesitation to use it if the need arose. We were told by staff and relatives that the registered manager had an open door policy and they were able to speak with them at any time.

We saw that the service had recently conducted the annual survey, but at the time of our inspection these returns had not yet been received and collated. We were told that upon receipt an improvement plan would be developed if relevant. Relatives that we spoke with told us that they had recently received the above mentioned surveys and had

taken time to sit down with their relatives to complete them. One relative told us that their relative had made it clear to them that. "They were very happy living in the home and wanted to remain living there. " Another relative told us. " My [Relative] is much more outgoing."

Relatives told us that they felt that the home was. "Very well run." They also told us that. " The manager was very caring and approachable, as was the provider." The same person said I would give the home. "Ten out of Ten."

As part of the quality monitoring process the provider carried out checks to assess standards in the service. This examined areas such as the environment, food, support plans and other records, medication and social interactions. This was used to put an action plan in place to make further improvements. We saw that audits had been completed on things such as: medication, fire and health and safety. We saw that when action had been identified this was followed up to ensure that action had been taken. These checks enabled the manager to identify any areas for improvement and put measures in place to improve the quality of the service.

The management team involved people and their relatives in the assessment and monitoring of the quality of care. We saw that there were regular meetings where people who lived in the home were able to discuss how the home was being run and suggest changes.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We did not take formal enforcement action at this stage. We will check that this action is taken by the provider.

This section is primarily information for the provider

Enforcement actions

The table below shows where regulations were not being met and we have taken enforcement action.