

# Care Network Solutions Limited Avon Lodge and Avon Lodge Annex

## **Inspection report**

24-25 Harlow Moor Drive Harrogate North Yorkshire HG2 0JW Date of inspection visit: 26 July 2021

Good

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### Ratings

## Overall rating for this service

# Summary of findings

### **Overall summary**

Avon Lodge is residential care home providing personal and nursing care to 10 people living with a learning disability, in one adapted building. The service can support up to 12 people. Avon Lodge Annex is supported living accommodation in a separate building next door. At the time of inspection nobody living at Avon Lodge Annex was in receipt of a regulated activity. We therefore did not inspect this service.

People's experience of using this service and what we found There were systems in place to protect people from the risk of abuse or neglect.

People had their care needs assessed and potential risks were monitored and minimised to reduce the risk of harm. We have recommended the registered manager continues to review and update risk assessments. There were enough staff to meet people's needs. We made a further recommendation in relation to the providers quality assurance of record keeping at the service.

Medicines were administered, stored and disposed of safely. The risk of infection transmission was well managed through safe infection, prevention and control practices.

The service learnt lessons when things went wrong to minimise the risk of recurrence. Leaders within the service promoted a culture of high-quality care which provided a good quality of life for people living at the service.

There were systems in place to monitor staff competency, environmental safety and development plans where further improvement was required, for example with training and updating care plans.

People, their relatives and staff were involved and engaged in decisions, changes and development of the service.

The service worked in partnership with other agencies to enable the best possible outcomes for people.

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 did support this practice.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of Safe and Well-led, the service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

People living at the service received person centred care from staff. This maximised their choice and control around decisions made. People received care which promoted dignity and respect. People spoke positively of the care they received from staff.

Staff promoted people's independence by putting the person at the centre of their decision making. Staff knew people and their preferences well to ensure they received the right support for them.

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 14 May 2019).

#### Why we inspected

We had concerns around trends identified within reported incidents and there was no registered manager in post. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained the same. This is based on the findings at this inspection.

## 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 •



# Avon Lodge and Avon Lodge Annex

## **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 two inspectors. Following the inspection, an Expert by Experience contacted people's relatives. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Avon 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.

Avon Lodge Annex provides care and support to people living in a 'supported living' setting, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; no one received a regulated activity at the time of inspection therefore we did not inspect this aspect of the service.

The service had a manager who had applied with the Care Quality Commission for registration. 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 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 three people who used the service about their experience of the care provided. We spoke with two members of staff including the registered manager and senior care worker.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. A variety of records relating to the management of the service, including policies and procedures, audits, staff competency checks, meeting minutes, training and environmental safety checks were reviewed. We also spoke with one member of staff.

# 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. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- People lived in a safe environment. Robust systems, safety checks and risk assessments were in place.
- Staff understood what support people required to reduce the risk of avoidable harm.
- Some risk assessments in care plans were under review due to people's needs changing and newly appointed senior staff.
- The service had a robust system of safety checks to ensure people lived in a safe environment.

We recommend the service reviews and updates people's risk assessments to ensure they are all up to date.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong • People were protected from the risk of abuse or harm due to a positive culture of learning and promoting best practice. One person told us "Yes I feel very safe here. The staff are very kind." While a relative told us "[Person] has been safe there for years."

• The provider learnt lessons when there were incidents and staff had a good understanding of safeguarding vulnerable adults.

#### Staffing and recruitment

• There were enough staff to meet the needs of people living at the service. Staff were recruited safely.

• People received care and support when required and people were supported to do the things they wanted. One person told us "I like to go out for a walk. Staff take me most days. The staff are always very kind." A member of staff told us "we know what support people need. If someone needs to have additional support, we give it to them."

#### Using medicines safely

- Medicines were administered and stored safely. People were supported to have control over their medication and consent was always sought.
- Where there were medication errors, these were investigated to minimise risk of recurrence.

#### 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.

• We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

## 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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager showed commitment to providing safe, high quality care. Within a short time of being in post, the manager had identified areas for improvement. There was a plan to implement changes to improve documentation without disrupting the service.
- The registered manager carried out regular checks to make sure staff had the necessary skills to provide safe care.
- The registered manager responded immediately to incidents or where changes were required. For example, during the inspection it was identified a medicine had not been disposed of. The registered manager took immediate action to rectify this issue.
- We noted the registered manager had completed audits which identified care plans and risk assessments needed updated. Provider audits had not identified care planning and risk assessments needed review. We recommend the provider reviews how they are assured on the quality of record keeping at the service. Improvement was needed around the quality assurance checks completed by the provider. Out of date care plans and risk assessments had not been identified.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

• The registered manager promoted a culture which was person centred, empowering and prompted people's rights. One member of staff told us "The manager is very good. There have been lots of changes since they started."

• People reported positive outcomes and a service which promoted choices and respect.

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 demonstrated an open approach towards people, their relatives and staff when things went wrong. There was a culture of learning to drive improvement and staff provided positive feedback of leaders within the service. One staff member told us "If there is ever a problem, I'd just go straight to [the registered manager] or [nominated individual]."

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

• People were involved in making decision about the service. The registered manager engaged with people

on a regular basis. People could use their care flexibly depending on their preferences and needs.

• Staff reported they were involved and engaged with decisions about the service. Staff reported being able to raise concerns if needed and share ideas to improve people's quality of life.

Working in partnership with others

- People and their relatives had the opportunity to provide feedback.
- The service had good links with the local community organisations such as the GP, district nurses and social care professionals who routinely visited the service.