

Lothlorien Community Limited

Eden Cottage

Inspection report

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Dymchurch
Romney Marsh
Kent
TN29 0LR

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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

Eden Cottage is registered to accommodate up to three people and provides care and support for people with learning disabilities. The service is split over two floors which were accessible by stairs. There were three people using the service at time of inspection.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People told us they were happy, felt safe. Professionals said that staff had a good understanding of people's needs and preferences. Risks had been identified and measures put in place to keep people safe from harm. Medicines were managed safely and administered by trained staff.

Staff listened to what people wanted and acted quickly to support them to achieve their goals and outcomes. Staff offered people solutions to aid their independence and develop their skills.

Staff were well trained and skilled. They worked with people to overcome challenges and promote their independence. The emphasis of support was towards inclusion and enabling people to learn essential life skills. Equality, diversity and human rights were promoted and understood by staff.

People, and professionals described the staff as caring, kind and friendly and the atmosphere of the home as relaxed and engaging. 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.

People received pre-admission assessments and effective person-centred support. The service was responsive to people's current and changing needs. Regular reviews took place which ensured people were at the centre of their support.

People, professionals and staff spoke highly about the management and staff had a clear understanding of their roles and responsibilities. The team worked together in a positive way to support people to achieve their own goals and to be safe.

Checks of safety and quality were made to ensure people were protected. Work to continuously improve the service was noted and the registered manager was keen to make changes that would impact positively on

people's lives.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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 June 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

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.

Eden Cottage

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

This inspection was completed by one inspector.

Service and service type

Eden Cottage 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.

The service had a manager registered with the Care Quality Commission. 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

We gave the service 24 hours' notice of the inspection. This was because the service is small, and people are often out. We wanted to be sure there would be staff at home to allow us entry.

What we did before the inspection

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 reviewed information we had received about the service. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from the local authority and professionals who work with the service.

During the inspection

We spoke with two people who used the service and met with one health care professional. We spoke with the registered manager, deputy manager and senior support worker. We reviewed a range of records. This included two people's care records and three people's medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including quality audits, incident reports, health and safety checks and feedback questionnaires. We walked around the building and observed care practice and interactions between support staff and people.

After the inspection

We looked at training data and policies. We reviewed our evidence to support us with our judgements.

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.

Assessing risk, safety monitoring and management;

- Risk assessments were in place which gave clear measures for staff to follow to reduce the risk of harm. Assessments covered areas such as; epilepsy, accessing the community, falls and choking.
- Positive behaviour support plans were in place, up to date and in line with best practice. These plans gave staff clear guidelines on approaches to use if people displayed behaviours which may challenge the service.
- Regular fire and health and safety checks were completed by the staff and management at Eden Cottage.
- Annual safety checks were completed by external professionals such as gas safety and portable appliances. Gas safety checks were up to date. However, Portable appliance testing was slightly out of date. The registered manager told us that they had fixed a date for this next week.
- People had personal emergency evacuation plans which guided staff on how to help people to safety in an emergency.

Staffing levels; Learning lessons when things go wrong

- There were enough staff on duty to meet people's needs. We asked one person if there were enough staff. They said, "Enough staff for me thank you". A professional said, "Staffing levels are good and consistent. They all know people well". A relative told us, "There seems to have been a high turnover of staff recently, but the levels are ok". A staff member commented, "There are enough staff to support people here. We can meet their needs and support them with activities".
- The registered manager explained that there was a small staff team of four contracted staff. The registered manager went onto say that they monitored the amount of staff needed based on people's needs and their activities and appointments.
- The registered manager responded appropriately when accidents or incidents occurred. There was an effective system in place which meant these were reviewed, analysed and used as a learning opportunity. Learning was shared with staff during supervisions and staff meetings.

Systems and processes to safeguard people from the risk of abuse including recruitment

- People, relatives, professionals and staff were confident people were safe. For example, external doors were secure, policies were in place and care plans were clear.
- We asked a person if they felt safe with staff. The person said, "Yes, staff nice". A professional told us, "Yes this is a safe home. People are happy, and systems are in place".
- Staff could tell us signs of abuse and who they would report concerns to both internal and external to the home.
- There were effective arrangements in place for reviewing and investigating safeguarding incidents. The

service recorded all alerts, investigations and logged outcomes and learning. There were no safeguarding alerts open at the time of the inspection.

- Relatives, professionals and staff said they had no safeguarding concerns and would feel confident to use the whistleblowing policy should they need to.
- The provider operated a safe recruitment process. Recruitment checks were in place and demonstrated that people employed were safe to work with vulnerable adults, had satisfactory skills and the knowledge needed to care for people.

Using medicines safely

- We found that the service had implemented safe systems and processes which meant people received their medicines in line with best practice. This included self-administration for one person.
- The service had safe arrangements for the ordering and disposal of medicines.
- Medicines were stored securely. Daily temperature checks were completed, and records were up to date.
- The staff that were responsible for the administration of medicines, were all trained and had had their competency assessed.
- Where people were prescribed medicines that they only needed to take occasionally (typically referred to as PRN), guidance was in place for staff to follow to ensure those medicines were administered in a consistent way.
- Medicine administration records were completed and audited appropriately.

Preventing and controlling infection

- The home was visibly clean and odour free. There was an infection control policy and cleaning schedule to ensure that risks to people, staff and visitors from infection were minimised.
- Staff had received infection control training and understood their responsibilities in this area. There were hand washing facilities throughout the home and staff had access to personal protective equipment such as disposable gloves and aprons.
- People were supported to participate in keeping their home and rooms clean to minimise the risks of the spread of infection.
- The service ensured a high level of hygiene was maintained and checks were completed. Regular infection control audits were completed by the management and up to date.

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

- Although people living at Eden Cottage had lived there for many years there was a clear referral and admissions process in place. This ensured people received pre-admission assessments and effective person-centred support during transition between services.
- People's needs, and choices were assessed, and care, treatment and support were provided to achieve effective outcomes. There were actions under each outcome of care which detailed how staff should support people to achieve their agreed goals and outcomes.

Staff support: induction, training, skills and experience

- Staff told us that they felt supported and received appropriate training and supervisions to enable them to fulfil their roles. A staff member told us, "We receive good training. There is a mix of face to face and e-learning. My most recent training was fire training refresher. We got to use different extinguishers".
- There was a clear induction programme for new staff to follow which included shadow shifts and practical competency checks in line with the Care Certificate. The Care Certificate is a national induction for people working in health and social care who have not already had relevant training.
- The registered manager and deputy manager told us staff received regular one to one meetings. Staff told us that they felt supported and could request supervision or just approach the management team should they need to.

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

- People told us they enjoyed the food at Eden Cottage and some liked preparing meals. One person told us, "Like the food, favourite; sausages". Another person said, "Really nice food thank you. I like all foods".
- Staff understood people's dietary needs and ensured that these were met. Where nutritional needs had been assessed clear guidelines were in place. A professional told us, "People have balanced diets and eat well".
- The home did not have a set rolling menu. Staff sat with people and discussed meal choices daily. We observed staff talking to one person who chose to have pie on the night of the inspection.
- Staff told us people enjoyed taking part in preparing meals and shopping for food.

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

- People had access to health care services as and when needed. Health professional visits were recorded in

people's care files which detailed the reason for the visit and outcome. Recent health visits included; podiatrists, GP and dentist.

- A health professional said, "Staff know why I am visiting, and I am made to feel welcome".
- People received an annual health check as per best practice for people with a learning disability.
- Information was recorded ready to be shared with other agencies if people needed to access other services such as hospitals. For example, health action plans and hospital passports had been completed.

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

- Eden Cottage was a small two storey detached home. There were two bedrooms on the ground floor and one bedroom on the second. The lounge was open plan with a dining area at the rear and a separate kitchen.
- The home was decorated with photos of people who used the service and artwork they had created. This added to the homely atmosphere. The registered manager told us people had just chosen a new paint colour for the living room.
- People told us that they liked their home. One person said, "I am happy with my house and bedroom thank you". A professional told us, "There is a homely, comfortable feel here".
- People's rooms were painted and decorated in the way they chose.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Some people at Eden Cottage were living with a learning disability or autism, which affected their ability to make some decisions about their care and support.
- Mental capacity assessments and best interest paperwork was in place for most areas such as personal care, use of equipment and finance. However, one person was being administered medicines in soft foods. This was not done without their knowledge however, there was no record of a discussion to say this was in the persons best interest. The registered manager made a plan to meet with the person and relatives that week.
- Staff showed a good understanding of the MCA and their role in supporting people's rights to make their own decisions. During the inspection, we observed staff putting their training into practice by offering people choices and respecting their decisions.
- One person had an authorised DoLS in place and one other application had been made to the relevant local authorities. There were no conditions attached to the person's DoLS.

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 good.

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 professionals told us staff were kind and caring. One person told us, "Like staff. Nice to me." Another person said, "Staff really nice. They care about me". A professional commented, "Staff are kind and caring. They understand people's needs well".
- The care files identified people's protected characteristics, reflected their rights and what was important to them. For example; disability, right of access and use of wheelchair. These also raised staff awareness around treating people with dignity and respect and supporting them to exercise their human rights.
- People's cultural and spiritual needs were respected. Staff encouraged people to receive visitors in a way that reflected their own wishes and cultural norms, including time spent in privacy.
- Training records showed that all staff had received training in equality and diversity. A staff member told us, "We are all equal and have the same rights as each other regardless of ability".

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

- People were able to express their needs and choices and staff understood their way of communicating. A staff member said, "We give people options and information to support them to make informed decisions".
- Where needed the home sought external professional help to support decision making for people such as advocacy services. One person's advocate visited regularly to meet with the person and review their records.

Respecting and promoting people's privacy, dignity and independence

- People were treated with respect. We observed staff knocking on people's doors before entering and not sharing personal information about people inappropriately.
- A staff member said, "During personal care we close doors and curtains. We always talk people through tasks like washing and dressing".
- Independence was important to people and staff. A person said, "Independence is important to me. I like doing things for myself". A staff member told us, "Independence is important here. Promoting it helps people look understand how to look after themselves better. People appreciate doing things for themselves".

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 good.

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

- Throughout the inspection we observed a positive and inclusive culture at the service. Person centred care, involving people and using creative approaches were embedded and normal practice for staff.
- Care plans were personalised and updated in response to people's changing needs. People's likes, dislikes and preferences were known and led to the delivery of personalised care. Staff used this information to care for people in the way they wanted.
- Staff explained how they put people at the centre of their care and involved them where possible and their relatives in the planning of their care and treatment.

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 were supported to access the community and participate in activities which matched their hobbies and interests and were reflected in individual support plans. We observed two people being supported to access the community through use of the home's vehicle.
- One person had taken themselves to a day centre. They chose to walk independently to the bus stop, catch a bus and then walk to the centre. We asked the person on their return if they had enjoyed their day. The person said, "I've had an excellent day at day centre. I got there on my own".
- Staff considered how barriers due to disability and complex behaviour impacted on people's ability to take part and enjoy activities open to everyone.
- People were supported to develop and maintain relationships to avoid social isolation. This included contact with those important to them including family, friends and other people living at the home. One person said, "I have good friends around here and I get to see them. I also like my housemates".

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.

- People's communication needs were identified, recorded and highlighted in care plans. These needs were shared appropriately with others. We saw evidence that people's identified information and communication needs were met. Copies of information and procedures were also available in easy read format. For example, safeguarding, complaints and privacy and dignity. Other easy read documents included hospital

passports and health action plans.

Improving care quality in response to complaints or concerns

- The registered manager told us that they welcomed complaints and said, "I see complaints as positive. They are a way of learning and improving practice".
- The service had a complaints procedure in place; this captured the nature of complaints, steps taken to resolve these and the outcome. At the time of our inspection there were no live complaints.
- We found that complaints had been fully investigated, outcomes discussed with the complainant and where necessary improvements made.
- People and relatives told us they knew how to raise concerns and make complaints. One person told us, "If not happy I talk to staff".

End of life care and support

- People's end of life wishes had started to be explored by the service. The registered manager told us that this was an area they will focus more on going forwards.
- The registered manager understood the importance of capturing people's preferences and choices in relation to end of life care because a sudden death may occur.

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 good.

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 promoted a person-centred culture and had a passion for inclusion and making a difference to people. On several occasions during the inspection we observed people and staff accessing the manager's office and having positive open discussions.
- Staff, people and professionals were positive about the management of the home. A person said, "The manager is really good. I am happy with them".
- Staff comments included, "The registered manager is lovely. Really helpful and approachable. They do the job well. Supports me well and keeps me up to date" and, "The registered manager will always jump onto shift if they are needed. Both the registered manager and deputy manager do their jobs really well and put people first".
- A professional told us, "The registered manager is very friendly and knows the people well".

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 understood the requirements of duty of candour. They told us that being open and honest was important to them. A professional said, "The registered manager is always very transparent and never hides anything".

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

- Managers and staff were clear about their roles and responsibilities. Duties were clearly detailed in staff job descriptions which were included in personnel files.
- Staff told us they felt supported, valued and listened to by the management team. A staff member told us, "I feel valued and listened to. We all communicate well and can always approach the registered manager".
- The registered manager had ensured they had communicated all relevant incidents or concerns both internally to the provider and externally to the local authority or CQC as required by law.
- The provider and management team demonstrated a commitment to ensuring the service was safe and of high quality by completing checks and seeking feedback.
- Regular checks were completed by the registered manager and deputy manager to make sure people were

safe and that they were happy with the service they received.

- Regular areas audited included; care files, staff records, medicines, health and safety and infection control.

Working in partnership with others

- Eden Cottage worked in partnership with other agencies to provide good care and treatment to people.
- Professionals fed back positively about partnership working with the home. A professional said, "They [staff] work well in partnership with us. I regularly meet with the manage, review care records and meet with [person's name]".
- The service had good links with the local community and key organisations, reflecting the needs and preferences of people in its care. This included local day centres.