

Community Integrated Care West Lodge

Inspection report

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Date of inspection visit:
06 November 2017
14 November 2017

Date of publication:
05 January 2018

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

This inspection took place on 6 and 14 November 2017 and was announced. The provider was given 48 hours' notice because the location was a small service for people who are often out during the day; we needed to be sure that someone would be in. West Lodge 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. West Lodge accommodates 6 people in one building.

The service had a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission 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 care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

At the last inspection in August 2015, the service was rated Good. At this inspection we found the service remained Good.

People told us they were happy living at West Lodge. The service had a happy and relaxed atmosphere. Sufficient experienced and trained staff were deployed to ensure people's needs were met. Staff were knowledgeable about the people they supported, their likes and dislikes and interests. Appropriate arrangements were in place for the safe administration and storage of medicines.

People were protected from abuse and harm. The provider had a safeguarding campaign called 'Speak Out' to promote and encourage staff, people using the service and relatives to tell someone if they had any concerns. An effective recruitment and selection process was in place. The provider carried out monthly health and safety checks to ensure people lived in a safe environment.

Training was up to date and staff received support via supervision and appraisal. Relatives and people were involved in the planning of their care. Information was provided in easy read format to assist people in understanding the care available to them. The provider had an effective complaints procedure in place and people who used the service and relatives were aware of how to make a complaint.

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

People were supported in maintaining a healthy and balanced diet. People were involved in the preparation

of meals. People were supported to maintain good health and had access to health and social external professionals.

Activities were developed around people's interests. People were supported to maintain relationships, access the local community and go on holidays.

Staff were compassionate and kind. An experienced registered manager was in place and understood the importance of monitoring the quality of the service and reviewing systems to identify any lessons learnt. The service regularly consulted with people, relatives and staff to capture their views about the service.

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

West 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 6 and 14 November 2017 and was announced. The provider was given 48 hours' notice because the location was a small service for people who are often out during the day; we needed to be sure that someone would be in. On the 6 November the inspection team consisted of one adult social care inspector and an expert by experience. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service. On 6 and 14 November the expert by experience contacted relatives by telephone.

We reviewed other information we held about the service, including any statutory notifications we had received from the provider. Notifications are changes, events or incidents that the provider is legally obliged to send us within the required timescale. Before the inspection, we also contacted the local authority commissioners for the service and the local authority safeguarding team to gain their views of the service provided.

Before the 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.

We looked at two care records for people who used the service. We examined four sets of staff files which covered recruitment, supervision and training records and various records about how the service was managed.

We spoke to five people who used the service, two relatives, registered manager, and four staff members.

Is the service safe?

Our findings

At our inspection in August 2015 we rated this domain as "Good." At this inspection we found the provider was continuing to meet the requirements of this domain and acting within the regulations related to this area.

Relatives we spoke with were confident their relatives were safe living at West Lodge. One relative said, "So safe and he is always happy" and another relative commented, "Absolutely safe".

Relatives and Staff we spoke with told us there were enough staff deployed to ensure people's needs were met. One relative told us, "Staff are always available, to chat and to assist me to take [person] out." Another relative said, "I know all the staff – some have been there for a long time – it is more than just a job to them". One staff member said, "There are plenty of staff." We saw staffing levels were increased when required, for example if a number of people were being supported in the community on an activity. The registered manager told us the staffing levels were dependent on the needs of the people using the service.

The provider had a safeguarding programme including a campaign called 'Speak Out' to promote and encourage staff, people using the service and relatives to tell someone if they have any concerns. Staff we spoke with had extensive knowledge of how to ensure people remained safe. One staff member said, "I know if I raised any concerns they would be dealt with appropriately." The provider had systems for gathering, investigating, collating and analysing safeguarding concerns. The registered manager told us, "Safeguarding forms part of the management meetings we discuss incidents and review to see if there are any lessons we can learn." Care workers demonstrated a good awareness of safeguarding and whistleblowing and the process of reporting or highlighting incidents or concerns.

Accidents and incidents continued to be recorded and monitored within the service. The provider collated information regarding accidents and incidents on their centralised system called 'click.' The service had only one accident recorded, the information had been reviewed and a conclusion had been implemented. The registered manager advised that the provider had begun to collate other areas of interest such as safeguarding and complaints. It was using the data from all its services to identify areas to improve and introduce lessons learnt.

The service clearly recognised and identified people's specific risks. People had individual risk logs with control measures in place to reduce the risks. Each risk had an additional support and risk management plan. These were regularly reviewed which meant staff had current accurate information on how to keep people safe.

The provider maintained an effective recruitment process ensuring staff employed by the service had been appropriately checked and had the right skills to support people. This included undertaking Disclosure and Barring Service checks (DBS). DBS checks help employers make safer decisions and help to prevent unsuitable people from working with vulnerable adults. When necessary the service had carried out further risk assessments if criminal information was disclosed on a DBS check. People were supported to take part

in the recruitment process. The registered manager told us how one person had picked the questions for the interview and selected potential staff from applications.

The provider carried out regular health and safety checks to ensure the premises and equipment were safe for people. Regular checks had been carried out on window restrictors, water temperatures, environmental risk assessments and fire drills and training. There was also a business continuity plan in place to ensure people would continue to receive care following an emergency. Each person had a personal emergency evacuation plan (PEEP) which contained details about their individual needs, should they need to be evacuated in an emergency.

The home was clean and tidy and systems were in place to protect people and staff from infections. All staff had completed infection control and food hygiene training and procedures were in place to ensure the safe preparation and storage of food.

The service continued to have systems in place for the safe management of medicines. Staff members responsible for supporting people with medicines had completed medication training which included both knowledge based learning and competency assessments. Medicines were stored safely in each person's room. Support plans clearly outlined the supported people required to ensure they received their medicines safely. The medicines administration records (MAR) we viewed showed no gaps or discrepancies. Medicines records were up to date and accurate.

Is the service effective?

Our findings

At our inspection in August 2015 we rated this domain as "Good." At this inspection we found the provider was continuing to meet the requirements of this domain and acting within the regulations related to this area.

The provider offered staff continued professional development. Staff members told us they completed classroom based induction training covering key areas including safeguarding, equality and inclusion, health and safety, infection control, medication management, emergency first aid and moving and positioning. Training was up to date and regularly monitored. One staff member told us, "I have completed all the training, if wanted additional training I just ask [registered manager]." Supervisions and appraisals were conducted in line with the provider's policy. Staff were encouraged to reflect on their training and people's care and support provided. A staff member said, "We discuss what's working and what could be better at supervision, we are listened to."

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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation procedures for this in care homes and hospitals are 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 are being met. Staff and the registered manager had a comprehensive knowledge of the MCA. The registered manager ensured appropriate assessments were made prior to applying for DoLS authorisations. DoLS applications were monitored where people were being restricted this was done so in their best interests and the least restrictive option was always considered.

We observed interactions between staff and people using the service. Staff sought people's permission before supporting them. Support plans detailed how people were to be supported to make decisions.

People had a comprehensive communication support plan; it described how people liked to be communicated with. The communication plan covered such areas as initiating interaction, terminating a conversation and situations that cause difficulties. Staff we spoke with had a good understanding about people's individual communications needs and how people used gestures and prompts to express themselves.

The service continued to work with health and social care external professionals such as Speech and

language therapists, occupation therapists and learning disability teams to ensure people were provided with the best possible care and support. Guidance obtained from the external healthcare professionals was transferred and adopted into people's support plan; this meant staff had current and relevant information to follow.

People were supported to meet their nutritional needs. Mealtime experience was a social occasion. Staff sat the table and enjoyed their meal with people. People chatted about the day and what had been prepared. Staff repeatedly enquired if people were okay and if they needed anything. People were offered protective aprons to protect their clothes. Specialist equipment such as adapted crockery was readily available.

People were encouraged to prepare meals but only if they wished. One staff member said, "[Person] will help around the house and enjoys cooking but the lads don't so we don't make them." One person was encouraged to maintain a healthy eating programme. Staff told us how their loss in weight had impacted on the person's mobility and they had started to take part in more physical activities.

The home was clean, odour free and in good repair. The communal areas were spacious and functional for all the needs of the people living at the service. People invited us into their rooms; each person had personalised their room to their preference.

Is the service caring?

Our findings

At our inspection in August 2015 we rated this domain as "Good." At this inspection we found the provider was continuing to meet the requirements of this domain and acting within the regulations related to this area.

The home had a warm and friendly atmosphere. The registered manager showed us a chill out room, an additional lounge where people could watch TV or relax. We saw staff had created feature wallpaper out of black and white images of people living at the home. It was a talking point as people pointed to an image and told us the story behind it.

Staff were kind and compassionate. We observed staff had developed close relationships with the people living at West Lodge. It was clear both people using the service and staff enjoyed each other's company. People were at the centre of everything happening in the service from preparing a meal, to going out to the cinema to watching the television. The service was filled with laughter during our inspection. The atmosphere was one of friends gathered together rather than staff supporting people.

We noted people were carrying out gender stereotypical household tasks, for example a female service user was cleaning and cooking and a male was cleaning the car and drive. We discussed this with the registered manager. They told us, "It is pure choice [Person] loves cleaning and likes cooking. [Male] and [Male] we have tried to involve in cooking but are not interested. We still involve everyone at mealtimes by setting the tables."

Staff we spoke with were genuinely interested in people's wellbeing and happiness. They spoke with warmth as they told us about people and their families. Staff were knowledgeable about people's likes and dislikes, interests and the people important to them.

Relatives told us they were made welcome at the service and were able to visit at any time. One relative commented, "Visitors can come and go as they please." One staff member told us, "It's important for people to maintain relationships and friendships. We give people privacy when they have visitors." A number of people living at West Lodge had friends that lived locally in a different service including one person who had a girlfriend, who staff supported to see regularly. The person told us, "I see my girlfriend all the time – here is a picture of me and [person] together".

People were supported by staff who were kind, caring and respectful. Staff were attentive to people's needs and were readily available to support people. They were patient with people allowing them time to communicate their wishes. Staff sought people's permission before carrying out any support and gave encouragement and explained what they were doing as they supported people. People were supported to be as independent as much as they wanted to be.

The service had processes in place to ensure people were supported to gain access to advocacy services. People were the lead when it came to discussions regarding their care plan reviews, the service arranged for

relatives and advocates if a person did not have a representative to also take part. Regular reviews took place with the person reflecting on their achievements, goal plans, and support plans and where changes were identified these were reflected in the person's care plans.

At this inspection we found staff continued to ensure people's privacy and dignity were appropriately supported. We observed staff knocked and obtained permission before entering a person's room. Care plans detailed how staff were to support people during personal care maintaining their dignity. Staff respectfully gave people privacy when required

Is the service responsive?

Our findings

At our inspection in February 2015 we rated this domain as "Good." At this inspection we found the provider was continuing to meet the requirements of this domain and acting within the regulations related to this area.

People and relatives were involved in the creating of the person's support plans. One staff member told us, "It's a living document we are always adding to it as people's life's change." The service regularly assessed people's care and support through monitoring and observation, reviews with social workers and other professionals, key worker meetings, health-related appointments and annual reviews.

The service had extensive and comprehensive care records. A range of person centred planning tools were in place including what a good day looked like, important to/important for, relationship circles and community maps. This allowed staff to learn as much about the person as possible.

Support plans were individual to the person with specific support plans created for each part of their life. One person had a 'postural care plan' developed in relationship with the physiotherapy team. The support plan had images and clear directions for staff to support the person.

People had aspirational outcome plans in place which reported on 'hopes and dreams important to me.' One person's stated, 'Person is aiming to strengthen his community involvement.' The plan outlined the support required with 'What are the steps to get there' and monitored the progress.

People were supported to participate in their preferred activities. During our inspection people were busy in a number of activities from carrying out household tasks, preparing a meal, shopping and going to the cinema. We observed a staff member ask one person if they would like to join a shopping outing. People were not limited by staffing levels; one staff member had come in specially to support a person to the cinema.

People were involved in a range of activities including trampolining, bowling, archery, bike riding, socialising at the pub, out for a meal, going the cinema and shopping. People showed us photographs of their friends from other services. Staff had great knowledge of people's preferred activities. One staff member told us, "[Person] loves being creative." We saw the person's room was filled with items they had created.

Staff told us how they had supported people on holidays including a trip to Blackpool and a stay in Flamingo land. One person commented, "I have been on holiday for the first time ever. Here is a picture of me with my suitcase before we set off." One person told us about his impressive list of music acts he had seen in concert at Newcastle Arena. People and staff were planning this year's Christmas celebrations with a big party with a singer and inviting people from other local services.

The registered manager told us the service had Wi-Fi connection which a number of the people used to access the internet and social media.

People were encouraged and supported to develop and maintain relationships with people that matter to them by having regular contact with friends and relatives including visiting people in the service and also on outings.

The service had not received any complaints since our last inspection. A comments, complaints and compliments procedure with an easy read version readily available. A compliment had been received from a visiting health and social care professional who commented how staff were knowledgeable about people's needs and very accommodating to them during their visit. One relative said, "I have 100% no worries about raising a concern and I know it would be dealt with straight away that's the sort of place it is."

Is the service well-led?

Our findings

At our inspection in February 2015 we rated this domain as "Good." At this inspection we found the provider was continuing to meet the requirements of this domain and acting within the regulations related to this area.

People and relatives told us they were happy with the service they received. One relative we spoke with told us, "You think as a mum you can't find anyone that can care for her than you but we have and it is not just [person] that is happier now it is all of us." Another relative commented, "The manager is very approachable as are all the staff and they are a great team. Much improved from the past."

The service had a positive culture. Staff we spoke with felt supported by the registered manager. One staff member said, "I am well supported. I can discuss things with [registered manager]. Another staff member told us, "We work well together." The registered manager was complimentary about the staff working at West lodge. They said, "They are a fantastic team, they support each other and will actually praise each other."

Staff we spoke with told us they loved their jobs and the people that they worked with. They had a real enthusiasm for their work and ensured people lived full lives. Morale was high amongst the team.

The provider was committed to driving improvement with continuous reviewing and monitoring of the service. The registered manager completed regular audits in key areas including care and support plans, medication, health and safety, finance, staffing including supervision and training. In addition reviews were conducted by the Regional Manager and Quality and Excellence Partner.

The registered manager had completed a 'service leader development programme' provider training designed to ensure managers had the knowledge and skills to be an effective leader. The programmes objectives aimed at creating a culture of excellence through strong leadership, clear objectives performance measurement and continuous improvement. The registered manager said, "[The provider] is keen to learn from lessons learnt and to drive improvement."

The service promoted accessible open communication with people who used the service, their relatives and staff. People using the service, relatives and staff were regularly consulted to gather their feedback about the service including easy read format questionnaires, house meetings and individual reviews. The service encouraged staff to share their views and opinions through 'You Can' booklet, team meetings and quality auditing. Staff had access to 'Yammer' social networking site and used it to communicate good practices across the provider's services.

The registered manager has notified the Care Quality Commission of all significant events which have occurred in line with their legal responsibilities.