

Saroia Staffing Services Ltd

# Cumberworth Lodge Care Home

## Inspection report

Cumberworth Lodge, Main Street  
Graizelound, Haxey  
Doncaster  
DN9 2NB

Tel: 01427752309

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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

Cumberworth Lodge Care Home is a residential care home providing personal care to 14 people aged 65 and over at the time of the inspection. The service can support up to 30 people.

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

People felt safe and well looked after. All areas were clean, tidy and there was enough cleaning taking place to keep people safe from the risk of infection. Relatives said they were confident that staff provided good care in a safe way.

Care plans and risk assessments were personalised and in place for people's support needs. These were reviewed regularly and covered people's health conditions. People and their relatives confirmed that they were able to contribute their views on their care and support needs.

The assessment, monitoring and mitigation of risk towards people who used the service was good. The registered manager carried out regular checks and analysis of incidents to ensure learning from events was undertaken.

People received their medicines on time and when they needed them. Staff had positive links with healthcare professionals which promoted people's wellbeing.

Staff were safely recruited, staffing levels were consistent, and staff were confident they could meet people's needs.

People's nutritional needs were met. The chef had a good knowledge of people's individual nutritional needs and people confirmed the food was very good and they were able to make choices.

People were supported to have 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.

We observed staff being patient, kind and respectful towards people.

People were supported by staff to maintain relationships with relatives through window visits and telephone calls. Staff had also supported people with activities during COVID 19. The service was currently recruiting a new activities coordinator to prevent social isolation.

Complaints were managed in line with the provider's policies and procedures. People's end of life wishes was considered and recorded in their care plans.

There was a registered manager in the service with evidence of good leadership, oversight and management

within the service.

The provider and registered manager promoted a very person-centred culture which respected people's diversity. Meetings were held with people, relatives and staff to exchange information and gather feedback.

For more details, please see the full report which is on the Care Quality Commission website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

This service was registered with us on 5 April 2019 and this is the first inspection. The last rating for the service under the previous provider was Good, published on 17 December 2016.

#### Why we inspected

This was a planned inspection as the service had not been inspected since registering with CQC

For all types of inspections in care homes, we will always look at and report on S5 using the IPC assurance tool, even when the inspection has not been triggered by concerns in Safe.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

#### 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?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

# Cumberworth Lodge Care Home

## **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 carried out by two inspectors.

#### Service and service type

Cumberworth 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.

#### Notice of inspection

This inspection was unannounced.

#### What we did before 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.

#### During the inspection

We spoke with five people who used the service and four relatives about their experience of the care provided. We spoke with five members of staff including the registered manager, senior care workers, care workers and the chef. We also spoke with two professionals visiting the service.

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. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems in place. Staff knew how to identify abuse and were aware of how to report it.
- Safeguarding incidents had been reported to the local authority and the CQC appropriately.
- People were seen to be very relaxed with staff and those who were able to, told us they felt safe. One person said, "Yes, I feel safe. There is always someone on duty and I can call for staff anytime during the day and night." A relative said, "I definitely feel [Name of relative] is safe here, they had a fall and staff got the occupational therapist in."

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

- Risks to people had been identified in their care plans and regularly reviewed. These provided staff with a clear description of any risks and guidance on the support people needed.
- The environment and equipment were safe and maintained. Emergency plans were in place to ensure people were protected in the event of a fire.
- The registered manager monitored and analysed accidents, incidents and safeguarding concerns to aid learning and reduce the risk of them happening again.

Staffing and recruitment

- Staff were recruited safely; appropriate checks were carried out to protect people.
- People received patient and unrushed care and support when needed. Comments included, "Staff have time to care, they never rush me" and "I buzz the bell if I need them [staff], they always come quickly and look after us really great."
- The registered manager monitored staffing levels to ensure they were appropriate to meet people's needs. Staff confirmed there was always enough staff on duty.

Using medicines safely

- Medicines were stored, administered, recorded appropriately and destroyed when they were no longer required.
- Appropriate protocols providing staff with guidance were in place where people were prescribed 'as and when required' medicines.

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 have also signposted the provider to resources to develop their approach.

# 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. This is the first inspection for this newly registered service. This key question has been rated Good. 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

- People's needs were assessed before moving to the service. Information was sought from the person, their relatives and from care professionals which informed staff about the care people required.
- Staff understood and promoted equality and diversity. One person said, "We are all treated the same, they don't have favourites." Protected characteristics under the Equality Act (2010), such as disability and religion, were considered as part of assessment and care planning.

Staff support: induction, training, skills and experience

- A staff induction and training programme was in place.
- Staff were supported through supervision and appraisals. The provider ensured competency checks were completed with staff, for example with medicine administration, and observed their practice; they received feedback on their performance.
- Staff were confident they had the skills and knowledge to carry out their roles effectively. One member of staff told us, "There is a lot of training online and I am up to date with all my training." One person said, "The staff are very good staff, they know what they are doing."

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People were supported to eat nutritious food and maintain their hydration. Health professionals had been contacted for guidance or to complete assessments when concerns were identified.
- Staff regularly offered a choice of refreshments throughout the day. People told us they enjoyed their meals. Comments included, "Always a choice" and "The meals are nice. Just had one of my favourite teas; cheese and pickle sandwich with brown bread, it was smashing."
- People's healthcare needs were met in a timely way. Staff supported people to access healthcare services and followed professional advice. Comments from visiting professionals included, "The staff communicate well with our team and support our visits very well. They are always friendly and polite." A relative told us, "They always get the GP when they feel [name of person] needs a visit or they do a video call. They always let me know if they have contacted him, they are very thorough."

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

- The environment generally met people's needs. Areas had been redecorated and refurbished and planned improvement work was identified on the renewal programme. We discussed the space and furniture limitations in the dining area as this could only seat a maximum of eight people. The registered manager stated they would review the space next to the dining room and whether this could be used as additional

dining space to allow people to eat their meals in a sociable environment.

- People's rooms were personalised to their own tastes. Pictorial signage and personalised pictures helped people living with dementia find their way about their home.

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.

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.

- Systems and processes to assess capacity were in place. Staff assessed people's mental capacity and made best interest decisions when needed to ensure people's rights were protected
- People (and relatives with power of attorney) were routinely involved in decisions about their care; staff sought people's consent and supported them to have choice and control over all aspects of their support.

# 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. This is the first inspection for this newly registered service. This key question has been rated 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: Supporting people to express their views and be involved in making decisions about their care

- People were treated with kindness. People were positive about the staff's caring and compassionate attitude. Good relationships had been fostered between staff, people and their relatives. A relative said, "It's very good here, our relative receives beautiful care. It is like our own little family. Really amazing how staff have worked on during the last year, we are all so grateful."
- The management team and staff worked hard to ensure a person-centred culture. People were supported to live according to their wishes and values.
- Staff showed genuine affection for people and demonstrated a good knowledge of people's personalities, diverse needs, and what was important to them. One person said, "The staff know us well and listen to us."
- The atmosphere was warm and friendly. People were encouraged to maintain relationships and build new friendships. Relatives told us they had continued to enjoy window visiting through the lockdowns and were overjoyed and relieved to be able to visit their family members again.

Respecting and promoting people's privacy, dignity and independence

- Staff were respectful in their approach and people received dignified care and support. A person explained, "The staff are always kind and polite with us." A relative said, "[Name] always looks well presented, staff are great with that. They look after her very well."
- Staff encouraged people to regain and maintain their independence. A person explained, "Staff try to keep our independence, if they realise, we're struggling they will help us more. I have good and bad days with what I can do, and staff know this, they don't just take over."

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs. This is the first inspection for this newly registered service. This key question has been rated 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

- People's needs and preferences were identified, met and reviewed.
- Staff involved people and their relatives in developing care and support plans. They asked people for their views and used this information to support them in their preferred way. One person told us, "My care plan means staff can read about how I like things. If you want a lie in you can if you want, I have one every morning." Another told us, "I am involved with every aspect of my care."
- People and their relatives were involved in reviews of their care. This made sure care plans were current and reflected people's preferences as their needs changed. A relative told us, "I am aware of any changes and have been involved in reviews and discussing [Name of person] needs."

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, and reasonable adjustments were made. Information was presented in a way people could understand.

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

- Staff supported people to maintain relationships that mattered to them, and protected people from social isolation. During COVID 19 window visits had taken place and staff have kept relatives up to date by telephone and emails. A relative told us, "I have had plenty of window visits and have been kept up to date."
- People enjoyed the social interaction with other residents and staff. The service was currently recruiting a new activities coordinator. A relative told us, "The service has always had an excellent activities programme and are currently in the process of recruiting a new activity coordinator, but staff are still doing things with people though." And, "During lockdown [name of person] was asked if they wanted to move to a bigger room. The new room has a big bay window with views over the garden which is their passion. This has had a positive impact and given them a boost during this difficult time of COVID 19."

Improving care quality in response to complaints or concerns

- The provider welcomed and acted on feedback received about the service.
- Complaints were investigated and addressed in line with the provider's policy and procedure. A person told us, "I have the complaints information and I would talk with the person who is helping me."

## End of life care and support

- End of life care plans recorded people's wishes. They contained information which supported staff to provide care in line with their preferences.
- The registered manager and staff prided themselves on end of life care. Staff understood the importance of providing good end of life care. They ensured people were comforted and worked together to ensure people had company when they needed it if family were unable to visit during COVID 19.

# 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. This is the first inspection for this newly registered service. This key question has been rated 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; 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 service had a registered manager who was committed to providing good quality care to people who used the service. One relative said, "The manager is really great, they work together with us, they are very amiable and helpful."
- The atmosphere in the service was warm, happy and supportive. One person told us, "The care staff have been marvellous. I've gradually got stronger and can do a lot more for myself."
- Staff told us they felt listened to and that the registered manager was approachable. One staff member told us, "[Name of registered manager] always asks first thing in the morning if there is anything I need to know, they make us feel valued and always thanks us."
- The registered manager understood their responsibility to be open and honest with people and to apologise to them if something went wrong.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Systems to monitor and assess the safety and quality of the service were in place. Audits were completed and any actions were implemented and used to improve the service.
- The registered manager communicated all relevant incidents or concerns both internally to the provider and externally to the local authority or CQC as required by law.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care; Working in partnership with others

- People, relatives and staff were asked for their opinions of the service. Meetings, satisfaction surveys and one to one discussion were used to gather feedback which was analysed and followed up by the registered manager. One relative told us, "We have been asked to fill in surveys over the years and we also help them gain the views of our relatives by helping them complete their surveys. [Name of registered manager] always makes time for us and is interested in what we have to say."
- There was good communication with people and families. One relative said, "I ring the service every night and staff are always aware of what sort of day [Name of person] has had and take time to tell me how they are and any little anecdotes they have shared with them." Another relative told us, "[Name of person] has good and bad days, staff will phone when they are perky and we can have a chat."
- The service worked in partnership with other agencies, in particular local health and social care professionals. A health professional told us, "Staff communicate very well, we have a good rapport with staff

here. They provide excellent care and communication, if they have any concerns, they contact us."