

BRJ Support Services Ltd

The Jovial Lodge

Inspection report

The Jovial Dutchman
Cromford Road, Crich
Matlock
DE4 5DJ

Tel: 01773850020
Website: www.brjsupportservices.co.uk

Date of inspection visit:
05 January 2023

Date of publication:
18 January 2023

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

The Jovial Lodge is a residential care home providing personal care to 1 person at the time of the inspection. The service can support up to 6 people. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

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

Right Support

People had genuine choice and control over their own lives. The support people received focused on their strengths and abilities. This promoted their independence and meant people had a fulfilling and meaningful everyday life.

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.

Right Care

People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to people's individual needs.

Staff understood how to protect people from poor care and abuse. People received care that supported their needs and aspirations, was focused on their quality of life, and followed best practice. People pursued interests and took part in activities that were tailored to them. The provider ensured people had opportunities to try new activities that enhanced and enriched their lives.

Right Culture

Staff knew and understood people well and were responsive to their needs. People were supported to recognise and achieve their aspirations and to live the life they chose. People and those important to them, including advocates, were involved in planning their care. The provider placed people's wishes, needs and rights at the heart of everything they did.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 12 February 2020 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this 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 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.

The Jovial Lodge

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 Health and Social Care Act 2008.

Inspection team

This inspection was carried out by 1 inspector.

Service and service type

The Jovial Lodge is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. The Jovial Lodge is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

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, and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and

improvements they plan to make. We used information gathered as part of monitoring activity that took place on 23 November 2022 to help plan the inspection and inform our judgements. We sought feedback from the local authority. We used all this information to plan our inspection.

During the inspection

We reviewed a person's care records, including medicine administration details. We looked at staff recruitment and training records, the providers policies and governance procedures. We spoke with 1 person who used the service, the registered manager, 2 staff and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also spoke with one professional who worked with the service.

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 of 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

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse.
- Staff had training on how to recognise and report abuse and they knew how to apply it.
- Staff felt confident to raise any concerns or issues with the registered manager. One staff member said, "I am always confident with safeguarding here, we can go to the management with any concerns."

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed their safety.
- People were involved in managing risks to themselves and in taking decisions about how to keep safe.
- People's freedom was restricted only where they were a risk to themselves or others, as a last resort and for the shortest time possible. One staff member said, "We allow risks for the individual and build their support around what is best for them."

Staffing and recruitment

- The service had enough staff, including for one-to-one support for people to take part in activities and visits how and when they wanted.
- Staff recruitment and induction training processes promoted safety, including those for agency staff.
- People's records contained a clear one-page profile with essential information and dos and don'ts to ensure that new or temporary staff could see quickly how best to support them.

Using medicines safely

- People were supported by staff who followed systems and processes to prescribe, administer, record and store medicines safely.
- People received the support they needed to take their medicines safely. The provider had safe systems to support people who may have had difficulties in communicating, where people may have needed to take their medicines without their knowledge, and where people could manage their own 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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.
- The service supported visits for people living in the home in line with current guidance.

Learning lessons when things go wrong

- The provider had processes for managing incidents affecting people's safety. Staff knew to record any incidents and report them to the management team so they could be investigated, and lessons learned.

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 had care and support plans that were personalised, holistic, strengths-based and reflected their needs and aspirations. This included their physical and mental health needs.
- People, those important to them and staff reviewed plans regularly together.
- People's support plans set out their current needs, included strategies to enhance their independence and long-term aspirations.

Staff support: induction, training, skills and experience

- People were supported by staff who had received relevant training in evidence-based practice. This included training in the wide range of strengths and impairments people with a learning disability and or autistic people may have. For example, positive behaviour support, mental health needs and restrictive interventions.
- Staff completed induction training when they started their role and did not work unsupervised until the registered manager had assessed them as ready to do so.
- The registered manager regularly checked staff's competency to ensure they understood and applied training and best practice.
- Staff received support in the form of continual supervision, appraisal and recognition of good practice. One staff member said, "The training is very good, it's always ongoing. We can request more training, or if someone's needs change the management will put more training on for us."

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

- People received support to eat and drink enough to maintain a balanced diet.
- People did their own shopping, planned and prepared their own meals and ate at the times that they preferred.

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

- People played an active role in maintaining their own health and wellbeing.
- Staff worked with other services and professionals to prevent people going into hospital. One professional said, "They [The provider] are very good at sharing information with me, they keep me updated and always work in the person's best interest."
- People were referred to health care professionals to support their wellbeing and help them to live healthy lives.

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

- The design, layout and furnishings supported people's individual needs and preferences.
- There was a choice of communal and private areas of the home. This meant people could spend time out of their bedrooms and still have privacy if they wanted this.
- There was outside space available for people who wanted to use this.
- People personalised their living space to how they wanted it to be decorated and furnished.

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 MCA 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The provider worked in line with the MCA. DoLS were in place appropriately and the conditions related to these were met.
- People were empowered to make their own decisions about their care.
- Staff knew when people had or lacked mental capacity and respected the choices people made. Where staff needed to make decisions for people there were records to demonstrate why this was considered to be in the person's best interest.

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

- People received kind and compassionate care from staff who used positive, respectful language which people understood and responded well to.
- Staff showed a genuine interest in people's well-being and quality of life.
- Staff showed warmth and respect when spending time with people. One staff member said, "The team here are amazing, this is the place I always dreamed people would get to move into. It's so person-centred, people have real freedom of choice."

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

- People felt listened to and valued.
- People were supported to access independent advocacy services. An independent advocate is someone who supports people to make choices and express their views.
- People, and those important to them, took part in making decisions and planning of their care and risk assessments.

Respecting and promoting people's privacy, dignity and independence

- People had opportunities to try new experiences, develop skills and gain independence.
- Staff had assessed and documented people's goals and aspirations and supported people to work towards these.
- People's privacy was respected. Staff knew when people preferred to spend time alone and did not disturb them at this time.

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

- Staff supported people through recognised models of care and treatment for people with a learning disability or autistic people.
- People's support concentrated on their quality of life and how to make sure people achieved the best possible outcomes of their care.
- Staff felt their role was to concentrate on helping people to achieve as much independence as they wanted. One staff member said, "Everyone here has the opportunity to do what they want with their life."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard [AIS] tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The provider was working in line with the AIS.
- People had individual communication plans that detailed their preferred methods of communication, including the approach to use for different situations.
- The provider supported people to communicate with professionals. We saw they spent time after the conversations ensuring people had understood and retained the information.

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 have freedom of choice and control over what they did.
- One person told us about the social activities they had enjoyed, these included holidays, going to concerts and festivals.
- People were encouraged and motivated by staff to reach their goals and aspirations. One professional said, "It is clear they have supported [Name] to increase the activities they can safely take part in."
- People participated in their chosen social and leisure activities. The provider welcomed people's relatives to be partners in their care where people wanted this.

Improving care quality in response to complaints or concerns

- The provider ensured complaints were taken seriously and investigated.

- People, their relatives, staff and professionals were encouraged to provide feedback.

End of life care and support

- People had records in their care plans that could be taken to hospital with them if they became seriously unwell. These included information about how people would like to be cared for.

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

- The provider and registered manager instilled a culture of care in which staff valued and promoted people's individuality and empowered them to achieve their goals.
- One person told us they were very happy living there and had a positive relationship with the management team.
- The provider and registered manager led by example. They created a person-centred culture with people's wishes at the heart of the service.
- Both the provider and registered manager spent time with people. They were visible in the service and available to speak with people, staff, relatives and professionals.
- The provider ensured people's care was continually reviewed and made changes where people's wishes changed over time.

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 provider gave honest information and suitable support. They applied the duty of candour where appropriate.

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

- The governance processes were effective. The audit system used by the registered manager enabled them to review the care people received to ensure this remained of high quality.
- The registered manager had the skills, knowledge and experience to carry out their role. They maintained oversight of people's care and ensured staff were supported to prioritise people's wellbeing.

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

- The provider sought feedback from people and those important to them. They used this feedback to develop the service.
- One person told us they had a weekly meeting with the registered manager. They set the agenda and the registered manager followed their lead.
- Staff felt involved in the way the service was run. One staff member said, "It's just the best place I have ever worked, yes the manager listens to us and takes any suggestions on board."

Continuous learning and improving care; Working in partnership with others

- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible.
- The provider worked with advocacy organisations and other health and social care organisations. This helped to give people using the service a voice and improve their wellbeing.
- The provider engaged with the local and wider community. They volunteered to support community groups. This helped to ensure the service was understood by local residents and increased the potential support network for people.