

Holly Lodge (Bridlington) Limited

Lucy Lodge

Inspection report

39-41 Victoria Road
Bridlington
North Humberside
YO15 2AT

Tel: 01262676205

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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

Lucy Lodge is a residential care home providing care and accommodation for up to 16 people. The home provides care for people with needs relating to their mental health. At the time of inspection there were 16 people living at the service.

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

People living at Lucy Lodge were happy and well supported. The home provided a safe place for people to live and enjoy their lives. Risks were assessed and managed appropriately to promote independence. There were suitable numbers of appropriately recruited staff.

Staff were well trained and received suitable support. 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's diverse needs were assessed and respected.

Staff were kind and caring and promoted positive relationships with people. Staff understood their roles clearly and knew what was expected of them. The service had a warm, friendly and welcoming atmosphere with people enjoying the way staff provided them with care and support. Relatives spoke positively about the service.

People told us they were able to spend time in a way they chose to. Staff understood the importance of supporting people to be socially included and prevented them from social isolation. People were encouraged to express their feelings and were supported with bereavement.

The registered manager promoted the visions and values of the service by embedding an open and honest culture. The service was focused on people's wellbeing and having a sense of purpose. Staff felt supported in their role and had formed good working relationships. Quality assurance systems in place, monitored the service effectively and drove improvements.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 27 March 2019) and there was a breach of regulation. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

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?

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 ●

Lucy 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 Care Act 2014.

Inspection team

One inspector carried out this inspection.

Service and service type

Lucy 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.

The service had a manager registered with the CQC. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We used all of this information to plan our inspection.

During the inspection-

We spoke with the registered manager, the area manager, deputy manager and four people who use the service. We looked at two people's care records in full. We also looked at people's medication administration records and a selection of documentation about the management and running of the service. We looked at recruitment information for two members of staff, staff training records and policies and procedures.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two staff members and one healthcare professional who regularly visit the service.

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.

Systems and processes to safeguard people from the risk of abuse

- People felt the service was safe. Comments included, "I feel safe here, I am looked after well", "It's a great place" and "I am very safe here and very happy."
- People were protected from abuse and avoidable harm by staff who had been trained to recognise the signs of potential abuse.
- The service had a safeguarding policy in place and the management team followed internal and external processes to keep people safe.

Assessing risk, safety monitoring and management

- Risks to people were managed appropriately and reviewed on a regular basis. Risk assessments included details of how to support people to take positive risks to maintain independence and safety.
- Staff were familiar with people's routines and preferences. They identified situations where people may be at risk and acted appropriately to minimise those risks.
- The environment and equipment were safe and well maintained.

Staffing and recruitment

- There were enough staff to meet people's needs.
- Staff were recruited safely; appropriate checks were carried out to protect people.

Using medicines safely

- Medicines were managed safely. We identified some actions were required to ensure the safe administration of medicines. For example, the effectiveness of 'as and when' required medication was not being monitored. This was immediately rectified by the registered manager and appropriate records were put in place
- Medicines were received, stored, and disposed of safely.
- Staff involved in handling medicines had received recent training around medicines. After the inspection, the registered manager ensured the appropriate staff were assessed as competent to support people with their medicines.

Preventing and controlling infection

- The provider had systems in place to prevent and control the spread of infections. Staff received infection control training and were provided with personal protective equipment such as disposable gloves to help prevent the spread of infection.

Learning lessons when things go wrong

- Systems were in place to review and analyse accidents and incidents. These were used as learning opportunities with staff during team meetings to embed lessons learnt.

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 now 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

- People's needs were effectively assessed and met. Care plans and risk assessments provided staff with information to meet people's holistic care needs.
- People's assessed needs were reviewed periodically to make sure care and support was delivered appropriately.
- The service was adaptable to meet the needs of people, working with other services to provide a package of care and support to meet their needs in line with best practice guidance.

Staff support: induction, training, skills and experience

- People were supported by staff who had the skills, knowledge and experience to carry out their roles effectively. People told us "The staff understand my condition and they are very patient with me" and "The staff know exactly what they are doing, and they are very good with me and my troubles."
- Staff felt supported by the registered manager and received regular supervision meetings to develop their practice.

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

- People received a healthy, balanced diet which met their needs and took into consideration their preferences and any special dietary needs.
- People were supported to maintain their independence with eating and drinking.
- People gave positive feedback regarding the food. Comments included, "The food is good", "There is plenty of choice" and "I really enjoy the food here."

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 access health care professionals as and when needed. Referrals were made to a range of health and social care professionals to support people's changing health care needs.
- Care plans contained detailed information to inform staff about people's health, behaviour and wellbeing. Personalised guidance was in place for staff to recognise when there was deterioration in those needs and to provide people with the support they needed.
- Records of professional visits were maintained and outcomes of these visits were reflected in people's care plans.
- A health professional told us "The staff are lovely and follow all advice given to meet people's needs."

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

- The service was adaptable to meet the needs of people.
- Peoples rooms were personalised to their individual tastes.
- An outdoor garden area was provided along with a separate conservatory where people could choose to smoke without affecting others.

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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. 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.

- People who used the service were supported to make their own decisions about aspects of their daily lives.
- People's capacity to make day to day decisions was assessed and regularly reviewed in line with the MCA. Best interest meetings where held and recorded in detail.
- Referrals had been made to the Local Authority where people were being deprived of their liberty to ensure this was done lawfully.

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. 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's needs were met by caring, patient and considerate staff. One person told us, "I like it here, the staff are brilliant and look after me well."
- Staff were friendly and demonstrated a good understanding of people's diverse needs.
- Staff demonstrated a good knowledge of people's personalities. Interactions between staff and people were natural and showed positive relationships had been developed.
- The atmosphere of the service was relaxed and calm. People were observed to look happy and comfortable with one another.

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

- People were treated with dignity and respect by staff and were encouraged to express their views.
- People were empowered to make their own decisions. These included decisions about when to get up or go to bed and what they would like to do on a day to day basis
- People were valued as individuals and staff showed genuine concern for people. Staff were keen to ensure people's rights were upheld and that they were not discriminated against in any way.
- Staff positively welcomed the use of advocates. Advocates represent the interests of people who may find it difficult to be heard or speak out for themselves.

Respecting and promoting people's privacy, dignity and independence

- People were encouraged to be as independent as possible, and staff understood and recognised when people needed assistance.
- Staff supported people to set and achieve goals which enhanced their independence.
- People were approached by staff in a polite and respectful way to offer support and assistance.
- Systems were in place to maintain confidentiality and staff understood the importance of this. Care files and other private and confidential information was stored securely.

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. 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; 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

- The service was responsive to people's needs. Care plans were person-centred and were reviewed on a regular basis.
- Staff understood people's behaviour needs. Care plans included guidance for staff to follow to provide people with the person-centred support they needed with any behaviours that challenged the service.
- People were encouraged to socialise, pursue their interests and hobbies and try new things.
- The registered manager was focused on people's wellbeing and having a sense of purpose. All staff ensured people had access to as many opportunities as possible to aid their physical and mental health and well-being.
- The atmosphere within the service was calm and relaxed. People who used the service happily spent time in each other's company.
- People were supported to maintain contact with family and friends.

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.

- Peoples' communication needs were assessed and recognised. Information was available in an accessible format to meet peoples' needs.

Improving care quality in response to complaints or concerns

- There had been no complaints at the service since the last inspection.
- People and their relatives knew how to raise concerns and were confident these would be addressed appropriately.

End of life care and support

- The service was not currently supporting anyone with end of life care.
- People's wishes and preferences in relation to end of life care had been considered and recorded where people chose to share this information.

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 requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At the last inspection the registered manager had failed to ensure they had submitted all notifications as they are legally required to do as part of their registration with the CQC. This was a breach of Care Quality Commission (Registration) Regulations 2009 (part4). Regulation 18: Notification of other incidents.

Improvements had been made at this inspection and the provider was no longer in breach of regulation 18.

- Systems were in place to ensure all notifications were submitted to CQC; the registered manager kept us informed of information regarding the service.
- The registered manager was clear about their roles and responsibilities.
- Governance systems drove improvements in the quality of the service. Detailed action plans were completed from these to ensure the quality of the service was maintained.
- Staff were focused in developing their skills. Supervisions contained clear objectives to support staff with their continuous learning.

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

- The registered manager and all staff demonstrated a positive culture and promoted a high standard of person-centred care and support for people.
- People and their relatives spoke positively about the management of the service.
- The registered manager was clear about their role and vision for the service. This was embedded by committed, loyal staff who had worked at the service for numerous years.
- Staff were happy in their work and felt supported by the management team.
- Regular meetings took place for people, relatives and staff to keep them up to date and fully involved in the running of the service.
- People were actively encouraged to give feedback about service and completed questionnaires. The provider displayed 'you said we did' to show how the service was improving.

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

- Staff worked in partnership with people, people's relatives and health and social care professionals to make sure people's needs were met.
- People were supported to be involved in the community and completed volunteer work at various organisations.