

## Elstow Lodge Residential Home

# Elstow Lodge

### Inspection report

Wilstead Road  
Elstow  
Bedford  
Bedfordshire  
MK42 9YD

Date of inspection visit:  
02 June 2016

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11 July 2016

### Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

We carried out an unannounced comprehensive inspection of this service on 10 September 2015.

Breaches of legal requirements were found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements relating to Safe Care and Treatment Regulation 12 (2) (b) of the Health and Social Care Act 2008. People's individual risk assessment and the service's environmental risk assessment were not being followed consistently. Regulation 18 of the Care Quality Commission (Registration) Regulations 2009. The registered manager did not always comply with their CQC registration requirements to ensure that notifiable incidents in relation to people's safety and well-being were reported.

We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Elstow Lodge on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

Elstow Lodge provides care and support for up to 12 people with a learning disability. There were nine people living at the service on the day of our inspection.

The service had a registered manager. 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 and associated Regulations about how the service is run.

During this inspection, we found that staff were now following people's individual risk assessments and the environmental risk assessment, when assisting wheelchair users to enter and exit the premises to ensure their safety.

We found that the registered manager was now ensuring that notifiable incidents relating to people's safety and well-being were reported to the Care Quality Commission in line with their registration requirements.

While improvements had been made we have not revised the rating for these domains. To improve the rating to 'Good' would require consistent good practice over a longer time period. We will review our rating for safe and well-led at the next comprehensive inspection.

## 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.

Action had been taken to improve safety.

The service's environmental risk assessment as well as individuals had been reviewed, with clear guidance to promote people and staff safety.

We could not improve the rating for safe from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

**Requires Improvement** ●

### Is the service well-led?

The service was well-led

Action had been taken to ensure the service was well-led

Notifiable incidents relating to people's safety and well-being were now being reported to the Care Quality Commission.

We could not improve the rating for well-led from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

**Requires Improvement** ●

# Elstow 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.

We undertook an unannounced focused inspection of Elstow Lodge on 2 June 2016. This inspection was done to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection on 10 September 2015 had been made. The inspector inspected the service against two of the five questions we ask about services: is the service safe and is the service well-led. This is because the service was not meeting some legal requirements.

The inspection was undertaken by one inspector.

During the inspection we spoke with the registered manager to gain their views on what improvement had been made to achieve compliance. We looked at the environmental risk assessment for the service and a risk assessment for one person who used the service.

Before our inspection we reviewed the information we held about the service. This included the provider's action plan, to meet the legal requirements. We also reviewed information we held about the service that included statutory notifications, which the provider is required to send us by law.

# Is the service safe?

## Our findings

When we inspected Elstow Lodge on 10 September 2015, we found in some areas of the service adaptations in relation to the environment had been put in place. They were supported by risk assessments to promote people's safety; however, they were not being followed consistently. For example, we observed a person who was a wheelchair user was manually lifted in their wheelchair to access the premises. This placed the person and staff, at risk of harm.

This was a breach of Regulation 12 (2) (b) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider submitted an action plan detailing the actions they would be taking to minimise the risk of harm to people using the service and staff.

We inspected the service on 2 June 2016 to assure ourselves that improvements had been made.

During this inspection we looked at the service's environmental risk assessment and the risk assessment for one person. We found that both risk assessments had been reviewed and contained detailed guidelines on how staff should be assisting people in wheelchairs to enter and exit the premises by ensuring that the portable ramp was used at all times. We saw the portable ramp was now being stored at the front of the premises to ensure it was accessible when required.

We saw evidence that the registered manager had spoken to all staff during handovers as well as individually and explained the importance of ensuring that risk assessments in place were followed to protect and promote people's safety as well as their own. The registered manager told us that staff's practice was closely monitored to ensure consistency. She said, "I monitor staff practice and I tell them to monitor each other as well and to report any transgressions." It was evident that the registered manager had developed reasonably and practicable strategies to mitigate risks of harm to people who used the service as well as staff.

While improvements had been made we have not revised the rating for this key question. To improve the rating to 'Good' would require consistent good practice over a longer time period. We will review our rating for safe at the next comprehensive inspection.

## Is the service well-led?

### Our findings

When we visited Elstow Lodge on 10 September 2015, we found that incidents were being recorded in the accident and incident book; however, they were not being reported to the Care Quality Commission (CQC) as required. For example, A person had self-inflicted an injury to their eye and unexplained bruising was found on another person's arm. These incidents had not been reported to CQC or to the local safeguarding team.

This was a breach of Regulation 18 of the Care Quality Commission (Registration) Regulations 2009.

The provider submitted an action plan detailing the action they would be taking to ensure that notifiable incidents were reported to the Care Quality Commission. Since the last inspection the registered manager has submitted notifications to report incidents. This demonstrated that the registered manager was now ensuring that incidents were reported in line with their registration requirements.

While improvements had been made we have not revised the rating for this key question. To improve the rating to 'Good' would require consistent good practice over a longer time period. We will review our rating for well-led at the next comprehensive inspection.