

Higher Park Lodge Limited

Higher Park Lodge

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Higher Park Lodge is a residential care home registered to provide care and support up to 34 people who may be living with dementia and/or mental health needs. At the time of the inspection, there were 32 people living at the service.

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

People and/or their relatives told us they felt safe living at the service. Staff were aware of what action to take should they suspect someone was being abused, mistreated or neglected.

Risks associated with people's health and social care needs were confidently known by staff, and risk assessments were in place to help ensure safe and consistent care was provided to people. However, one person's care plan and their related risk assessment had not been updated following a change in their needs. Therefore, the registered manager took immediate action at the time of our inspection.

Policies and procedures were in place to keep people safe, and people lived in a safe and clean environment. Staff received training in specific subjects to ensure people's ongoing safety and wellbeing.

Staff told us they enjoyed working at the service and explained how the registered manager and management team were in attendance at the service, providing support and guidance as necessary. Staff were confident to report any worries or concerns and explained action would always be taken.

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

Rating at last inspection (and update)

The last rating for this service was Good (published 11 July 2018).

Why we inspected

We received concerns in relation to the safety of people, the cleanliness of the service, staffing, and the management, leadership and culture of the service. In addition, the police were undertaking an investigation into an incident that had occurred at the service. At the time of this report, the investigation had not yet concluded. As a result, we undertook a focused inspection to review the Key Questions of Safe and Well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other Key Questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those Key Questions were used in calculating the overall rating at this inspection.

We found no evidence during this inspection that people were at risk of harm from the concerns raised. The registered manager had acted to mitigate ongoing risks where needed. Please see the Safe and Well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Higher Park Lodge on our website at www.cqc.org.uk.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Higher Park 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

The inspection team consisted of one inspector and one expert by experience. An expert by experience is a person who has personal experience of using services or cares for someone who is living with dementia or has mental health needs.

The service had a manager who was registered with the Care Quality Commission. This meant that they and the provider were legally responsible for how the service was run and for the quality and safety of the care provided.

Service and service type

Higher Park 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.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We also looked at statutory notifications the provider had made to us about important events. In addition, we reviewed all other information sent to us from stakeholders, for example the local authority and

members of the public.

In addition, we contacted Healthwatch Plymouth and Plymouth City Council quality assurance and improvement team for their feedback about the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We used all of this information to plan our inspection.

During the inspection

During the inspection we spoke with three people, four relatives, seven members of care staff, the registered manager and provider.

We looked at four care plans for people who used the service, policies and procedures, training records, incident and accident records, and auditing and monitoring checks.

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 and/or their relatives told us they felt safe living at the service. Comments included, "Nothing is too much trouble and I feel safe with all the staff who look after us", "I feel very safe here" and "I feel safe because nobody comes in or out except people I know." One relative told us, "We know someone looks in on [Service User] regularly at night, which reassures us that they are safe and cared for."
- People approached staff without hesitation and were relaxed in their presence. A member of staff told us, "I love them all, I want to make sure they are all safe."
- There were systems in place to keep people protected from the risk of abuse.
- The registered manager used information provided as part of the pre-assessment process, to mitigate any known risks.
- Staff received safeguarding training and were confident about what action to take if they suspected someone was being abused, mistreated or neglected. One member of staff told us, "I would go to management, if they didn't do anything but I know they would, I would go to CQC or to safeguarding (local authority)."
- The registered manager had a good understanding of safeguarding procedures, and of the expectations to report allegations of abuse to the local authority safeguarding team.

Assessing risk, safety monitoring and management

- Staff were confident about the risks associated with people's care and support, and how to support them.
- People had care plans and risk assessments in place when there was a specific risk associated with their care, such as a behaviour that could challenge, mobility, or skin care. However, one out of the four care plans we looked at, had not been updated following a change in the person's needs since January 2019. The registered manager took immediate action at the time of our inspection to rectify this.
- When a person was at risk of falling, care plans and risk assessments were in place to help support people safely and consistently. Staff were confident about what action to take to help reduce ongoing risks to people, such as ensuring people wore suitable foot wear and/or people's environment was assessed for ongoing safety.
- Staff had undertaken training in subjects to keep people safe, such as first aid and helping to reduce skin damage. Staff told us they felt confident about putting their training into practice. With one member of staff telling us, "Correct procedures and good training mean that staff can deal with unexpected incidents calmly and professionally."
- Accident and incidents were recorded, and people's care plans and risk assessment were updated in response.
- Cleaning products were stored securely, and environmental risk assessments were in place as needed.

Closed circuit television (CCTV) was present in corridors to help ensure the continued safety of the premises.

Staffing and recruitment

- People were supported by suitable numbers of staff.
- The registered manager considered making referrals to external professionals when a person's care and support needs were changing. For example, to request funding for one to one support.

Preventing and controlling infection

- People lived in a clean environment. A member of staff told us, "The cleaners are always on the go!"
- People's bedding was changed daily.

Learning lessons when things go wrong

- Data analysis was effectively carried out in respect of falls to help identify useful themes and trends to minimise reoccurrences.
- The registered manager had recently acted to improve the safety of all staircases, because of a recent incident.

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 Good. At this inspection this key question has remained the same. 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

- People and their relatives told us the service was well managed, and there was a pleasant and welcoming atmosphere.
- Staff told us the registered manager and management team were supportive and present within the service. Comments included, "The managers are always making sure you are doing this and that!", "Here every day, there is always one of them [manager] in", "They are lovely. I don't think you'd get another boss like it", and "They always greet you. They are always nice."
- Staff told us they felt confident to whistle-blow if they were concerned about poor conduct within the service, and that action would be taken. With one member of staff telling us, "Yes, she [the registered manager] would definitely take action."

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 registered manager and provider recognised when mistakes had been made. They listened to people, respected their views, and apologised when they had experienced care which they believed was not appropriate or had not met their needs.
- The manager was aware of their responsibility to inform the Commission of significant events in line with statutory duties.
- The management team spoke openly and honestly throughout the inspection process. Staff told us, "They've [the managers] have always spoken the truth. Nothing is hidden", and "This is the safest place I've worked at...the managers are always on hand to help anyone and you can raise any concerns knowing they'll be taken seriously."

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

- There was a management structure in place which people and staff were aware of.
- The management team understood regulatory requirements.

Continuous learning and improving care

- The registered manager, management and staff team were distressed by two recent incidents. In response to this, debriefs, reflection and learning had and continued to take place. For example, action was being taken to review the assessment process before a person moved into the service.

- The registered manager engaged with other providers to share in best practice. For example, by attending the Skills for Care outstanding managers network forums, and local authority conferences.

Working in partnership with others

- The local authority told us there was positive engagement by the service.
- The provider continued to work in collaboration with the police following two recent incidents in respect of people's personal safety.