

Clia Care Ltd

# Clia Care (Disraeli 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

### About the service

Clia Care (Disraeli Lodge) is a 'supported living service' providing personal care to people in supported living schemes, so that people can live in their own homes as independently as possible. The service provides support to people with a learning disability or autistic spectrum disorder. At the time of our inspection 5 people were receiving personal care.

The service has 6 locations whereby people have their own bedrooms in an adapted house and share communal areas. 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

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

### Right Support

People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so. 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. People received support from staff to make their own decisions about medicines wherever possible.

### Right Care

Staff supported people to express their views using their preferred method of communication. People had the opportunity to try new experiences, develop new skills and gain independence.

### Right Culture

Staff provided people with personalised, proactive and co-ordinated support in line with their communication and support plans. The registered manager worked hard to instil a culture of care in which staff truly valued and promoted people's individuality, protected their rights and enabled them to develop and flourish. Staff felt respected, supported and valued by senior staff which supported a positive and improvement-driven culture.

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.

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

#### Rating at last inspection

The last rating for this service was good (published 10 October 2018).

#### Why we inspected

We undertook this inspection as part of a random selection of services rated Good and Outstanding.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Clia Care Disraeli Lodge on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has not changed. This is based on the findings at this inspection.

#### Enforcement and recommendations

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection.

We have made a recommendation in relation to medicines management.

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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.

# Clia Care (Disraeli 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.

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

This service provides care and support to people living in 6 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

#### 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.

Inspection activity started on 15 November 2022 and ended on 17 November 2022. We visited the location's service on 15 November 2022.

#### 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. 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 all this information to plan our inspection.

#### During the inspection

We spoke with 1 person using the service and 4 relatives to gather their views. We spoke with 6 staff members, including care workers, the I.T specialist, the service facilitator, associate director and the registered manager. We reviewed a range of records, including 3 care plans, 3 medicines administration records, 3 staff files and accident and incidents. After the inspection, we contacted 6 healthcare professionals to gather their views of the service. The provider sent us other records relating to the management of the service, including policies and procedures, rotas and audits.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- People received their medicines when they needed them. Medicines records would have benefitted from additional details to follow best practice, such as ensuring where coding was used the reason for omission was always given.
- Staff were clear on their responsibilities in relation to medicines administration. They were clear on how to liaise with other healthcare professionals if people's medication needs changed.
- Records showed staff received medicines management training.

We recommend the provider ensure medicines administration is always recorded in line with best practice.

- Notwithstanding the above, relatives confirmed people received their medicines as intended and had no concerns in this area.

### Systems and processes to safeguard people from the risk of abuse

- People were protected against the risk of abuse.
- Relatives felt their loved ones were safe. One said, "I feel [person's] really safe in this house."
- Staff were well versed in their role and responsibilities in identifying, recording, reporting and escalating suspected abuse.
- Records showed staff continued to receive safeguarding training; and the registered manager worked closely with the local authority safeguarding teams to ensure all safeguarding matters were addressed in a timely manner and in line with legislation.

### Assessing risk, safety monitoring and management

- Potential risks to people were suitably assessed with sufficient management plans in place.
- Relatives told us they were satisfied that specific risk management plans kept their family members safe. Risk assessments were clear in detailing all hazards, their effect, control measures and reactive strategies. Staff were well guided as to how to support people safely.
- Where one person sometimes presented with behaviours that could indicate anxiety or distress their relative felt they were safely monitored. They told us, "[Person's] had quite a lot of strategic management. As far as I know [that specific behaviour] has completely stopped, with support from staff here. The staff here do the best job they possibly could in managing them."
- Staff had a clear understanding of the people they supported, and could identify when people were presenting as dissatisfied, overwhelmed and/or distressed; and had the necessary skills and knowledge to support them safely.

- Staff were aware of the importance of using de-escalation techniques and confirmed, being pro-active in responding to behaviours people engaged when overwhelmed to support them to remain calm.

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.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.
- People's consent to care and treatment was sought wherever possible.
- Staff had a clear understanding of their responsibilities in line with legislation.

#### Staffing and recruitment

- People continued to receive care and support from staff that had undergone robust recruitment checks to ensure their suitability for the role.
- Records showed staff recruitment files contained an application form, satisfactory references, photographic identification and a Disclosure and Barring Services (DBS) check. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- At the time of the inspection, there were sufficient numbers of staff deployed to keep people safe and ensure people could participate in activities of their choice, both in-house and in the local community.
- Staffing levels within Clia Care Disraeli Lodge were flexible, to ensure people's changing needs could be met in a timely manner.

#### Preventing and controlling infection

- The registered manager had arrangements in place for preventing and controlling infection.
- Staff confirmed they had access to personal protective equipment (PPE), namely masks, gloves and aprons.
- We were assured that the provider was preventing visitors from catching and spreading infections.

#### Learning lessons when things go wrong

- People continued to receive a service that learned lessons when things went wrong.
- The registered manager and management team as a whole, placed great emphasis in improving the service and shared information to ensure repeat incidents were mitigated.



# 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 our last inspection we rated this key question good. The rating for this key question has remained 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 service placed significant importance on seeking positive outcomes for people living at Clia Care Disraeli Lodge.
- The culture within the service was one whereby people were at the forefront of the service. People were actively encouraged to meet goals and aims they had expressed, by staff that were compassionate and had people's best interests at heart.
- People, their relatives and staff spoke highly of the registered manager. Comments included, "[Registered manager's] a nice bloke, I can talk to him", "Very approachable, ready to engage in dialogue" and "[Registered manager's] always available, no matter the time of day he'll get back to you. If there's an issue, he'll be there."
- Staff felt well supported by the management team. They told us, "He's [registered manager] very present, if you call, he makes sure he's here. He's approachable and very easy to talk to" and "His [registered manager] main goal is to see all residents happy, comfortable and that all needs are met."
- Throughout the inspection, we observed staff interacting with people in a calm, respectful and engaging manner. People appeared at ease in staff members presence and were frequently observed laughing and joking with staff.
- The service had a welcoming, person-centred atmosphere where people were valued, respected and empowered to reach their potential in all aspects of their lives.

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 had a clear understanding of the duty of candour and their responsibilities in line with legislation.
- The registered manager gave us examples of whereby issues had arisen and they had apologised and learned lessons and taken decisive action to mitigate repeat incidents.

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

- The registered manager had oversight of the service.
- Records demonstrated the registered manager undertook regular audits of the service. Audits included, for example, care plans, risk assessments, medicines management, incidents and accidents, staffing levels and roles and responsibilities. However, the audits could benefit from further structure and clarity in relation

to what specific areas are being covered and any additional action to be undertaken following the audits.

- The registered manager was a visible presence within the service and throughout the inspection we observed people, relatives and staff members seeking guidance from the registered manager, which was readily given.
- There was a clear management structure throughout the service and people were aware of their role and responsibilities, which enabled staff members to take accountability of various aspects within the organisation.
- The registered manager understood their requirement to notify the Care Quality Commission of reportable incidents.

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

- People were placed at the forefront of the service and both their views and those of their relatives regularly sought.
- The service had developed a parents' forum, whereby people's relatives were encouraged to be involved in the development of the service, advocate for their relatives and to ensure people's voices and views were heard, especially when they weren't always able to verbally communicate their views without support.
- The parents forum was successful in ensuring all aspects of the care provision were scrutinised and issues identified addressed swiftly.
- The service also captured people's views through regular house meetings, one to one sessions and general discussions. In addition to this, the service carried out frequent surveys from people's relatives, staff and professionals.
- We reviewed the most recent relative feedback questionnaire and found comments received were positive. For example, "I think [the service] is excellent. The staff are professional and caring in what is sometimes a tough and challenging situation."

Continuous learning and improving care

- People continued to receive a service that placed great importance on continuous learning and improving.
- After the inspection the registered manager submitted additional records updating their practice as a result of this inspection. The registered manager was keen to evidence lessons were learned and shared this information with the staff team through regular meetings and discussions.

Working in partnership with others

- People continued to benefit from a service that sought partnership with healthcare professionals and external services to drive improvements.
- Records showed guidance provided by healthcare professionals was implemented into the delivery of care.