

Action for Care Limited

The Lodge

Inspection report

Milford Lodge
Westfield Lane, South Milford
Leeds
West Yorkshire
LS25 5AW

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

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

The Lodge provides residential care for younger adults with a learning disability and/or autism. The service is registered to support up to eight people in one adapted building, and eight people were using the service when we inspected.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence.

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

People received support from trained staff to reduce any anxiety or distress and help keep them safe. Professionals and relatives praised the effective support provided and the positive outcomes achieved for people who used the service. Not all records included enough information to guide staff on when they might need to use certain medicines or physical restraint to keep people safe.

We made recommendations about reviewing the approach to supporting, recording and analysing incidents of anxiety or distress, and to look at good practice on stopping over medication of people with a learning disability and/or autism.

The registered manager was responsive to feedback and committed to developing the service and improving people's quality of life.

People were kept safe by staff who had been safely recruited and trained to identify and respond to any safeguarding concerns. The registered manager made sure enough staff were deployed to meet people's needs. The environment was safely maintained and clean. People were protected from the risk of healthcare related infections.

Staff completed regular training and had supervisions and appraisals to support them in their role. They worked closely with professionals to make sure they were providing effective care and people received medical attention when needed.

People were supported to eat a varied and balanced diet, and to maintain good health.

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. Applications were made when needed to deprive people of their liberty. We made a recommendation about recording in relation to the Mental Capacity Act 2005.

Staff were kind, caring and respectful. People shared positive caring relationships with the staff who supported them and clearly valued and benefited from their company.

Staff provided support in line with the principles and values of Registering the Right Support. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

People had a good quality of life and were supported to pursue their hobbies and interests. Staff encouraged and supported people to take part in a wide range of activities to learn new skills and to reduce the risk of social isolation.

There were systems in place to manage and respond to complaints. Lessons had been learned and changes made to improve the service. People consistently told us staff and management were approachable and responsive to feedback.

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

Rating at last inspection

The last rating for this service was good (report published 3 August 2017).

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 reinspection 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 not always safe.

Details are in our safe findings below.

Requires Improvement 

Is the service effective?

The service 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 

The 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector and an inspection manager.

Service and service type

The 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

The 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 other professionals.

The provider was not asked to complete a provider information return before 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.

During the inspection

We spoke with four people who used the service, six people's relatives and received feedback from two health and social care professionals. We spoke with the registered manager, deputy manager and three members of care staff.

We reviewed two people's care records in full, including their medication administration records and daily notes. We looked at two staff's recruitment, induction, training and supervision records as well as other records relating to the management of the service.

After the inspection

We continued to review evidence from the inspection and seek clarification from the provider to validate evidence found.

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 good. At this inspection this key question was rated requires improvement. This meant some aspects of the service were not safe and there was an increased risk people could be harmed.

Using medicines safely

- People were supported by trained staff to take their prescribed medicines. Regular checks were completed to help make sure staff understood how to administer medicines safely.
- Clear information was not always recorded about when to administer medicines prescribed to be taken only when needed. We spoke with the registered manager and they acted to address this.

We recommend the provider review and implement good practice guidance on stopping over medication of people with a learning disability and or autism.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Care plans did not always include enough information to guide staff about what intervention to use and when to help reduce anxiety or distress and make sure people's support was consistent.
- Incidents of anxiety or distress were not always analysed in detail to help identify how staff could change or develop their approach in future to better meet people's needs.

We recommend the provider continue to review their approach to supporting, recording and analysing incidents of anxiety or distress.

- Staff received specialist training on how best to support people to reduce anxiety or distress.
- Relatives and professionals praised the effective support staff provided. Positive work to reduce the amount of time people were distressed had been achieved, which had enabled people to live a more ordinary life.
- People were supported by staff who understood their needs, and staff provided skilled and timely support to help keep them safe. A relative said, "The way the staff deal with things is really good. They supervise them and make sure they are safe, but treat them like an individual and an adult."
- Regular checks helped reduce the risks associated with a fire occurring, and to ensure the safety of the home environment.

Systems and processes to safeguard people from the risk of abuse

- People were protected against the risk of abuse or avoidable harm; staff had been trained to recognise and respond to safeguarding concerns.
- Safeguarding concerns were reported to and investigated by the local authority safeguarding team. Lessons had been learnt when things had gone wrong and improvements made to prevent a similar thing happening again.

Staffing and recruitment

- People were supported by safely recruited staff; interviews and recruitment checks helped to make sure new staff were suitable to work with adults who may be vulnerable.
- People received the level of support they were assessed as needing. Systems were in place to monitor and make sure enough staff were deployed to meet people's needs.
- Agency staff were used when needed to cover gaps in the rotas. Inductions had not been recorded to make sure they had been given the information they needed before starting work at the service. Following our site visit, the deputy manager sent an induction they had developed and planned to use to address this.

Preventing and controlling infection

- People benefited from a clean and tidy home environment.
- Staff followed good infection prevention and control practices; they used personal protective equipment, including gloves and aprons, to reduce the risk of spreading germs or healthcare related infections.

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 good. At this inspection this key question has remained the same. This meant people's outcomes were good, and people's feedback confirmed this.

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, 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.

- People had choices and were in control of their daily routines. For example, they made decisions about what to eat and drink or how to spend their time.
- Staff sought people's consent before providing support. People were confident in expressing their wishes and views knowing staff would listen to them and respect their choices.
- Care plans showed issues around consent and people's mental capacity were considered, although there were some gaps where clearer recording was needed.

We recommend the provider reviews good practice guidance on recording in relation to the Mental Capacity Act 2005.

- Appropriate applications had been made when necessary to deprive people of their liberty.

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

- People benefited from living in a warm, welcoming and homely environment. People's bedrooms were personalised to their individual needs and preferences, which helped them feel at home in the service.
- There were communal areas, a sensory area, and accessible outside space for people to use and enjoy.
- Locked doors restricted access to some areas of the service. The registered manager immediately disengaged these where they were no longer needed, and agreed to continually review the use of locks to make sure people were not unnecessarily restricted from moving around their home.

Staff support: induction, training, skills and experience

- People received effective care and support from staff who had been trained to meet their needs.

- New staff received an induction and completed a range of training to equip them with the skills and knowledge needed.
- Supervisions and an annual appraisal were used to monitor staff's performance, discuss any worries, issues or concerns, and support their professional development.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care

- People's needs were assessed and care plans put in place to guide staff on how best to support them.
- Staff worked closely with professionals to make sure they provided effective care. A professional said, "The staff team have continually questioned their practices and requested support to ensure they are providing the best care they could."

Supporting people to live healthier lives, access healthcare services and support;

- The provider had put in place robust systems to support people to safely move into the service. A relative explained, "They assessed [Name] to make sure they would fit in with the people living there. They went for visits over a number of weeks to get ready for the move, and the staff provided so many things so everything was there and set up for them."
- People were supported to meet their health needs and access healthcare services. A person explained, "I had a really bad cold recently and staff looked after me." A relative said, "They are very quick to spot problems and take action. They get on and do things if something seems to be wrong, they will get a doctor's appointment and contact me."

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

- People received person-centred support to help make sure they had enough to eat and drink; staff provided guidance and assistance when needed to encourage people to eat and drink regularly.
- People were involved in planning meals and choosing what they ate and drank.
- Staff encouraged a varied and balanced diet. A relative said, "They are very much on with promoting healthy eating, which has made a huge difference. Health-wise [Name] is much better, and it is down to good staff who care about what they do and provide the support that is needed."
- We spoke with the registered manager about recording in care plans how people's weight was monitored and considering how nationally recognised tools could be used to help assess whether people's weight was healthy or if they were at risk.

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 good. At this inspection this key question 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 were supported by kind and caring staff. A person told us, "I like living here, I am being well looked after." A relative said, "The staff are absolutely amazing. They are extremely professional, but it's not just that, it's the compassion, kindness and dignity they provide."
- People shared meaningful relationships with the staff who supported them. Interactions were relaxed and friendly and people clearly enjoyed staff's company. A relative told us, "The staff are passionate, they are like a family. They really do care."
- Staff showed an interest in people and treated them with kindness. A professional told us, "This is the first service [Name] has been at where we feel they are genuinely liked, loved and cared for by staff."

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity were maintained. Staff spoke with people and supported them in a respectful and dignified way.
- People were supported in private to meet their personal care needs; staff helped people to take pride in their appearance and dress according to their preferences.
- Staff supported and encouraged people to develop their independence. A relative explained, "The staff are so supportive and encouraging in helping people to be more independent. [Name's] whole perspective on life has changed, because the staff encourage them so much."
- Equipment and adaptations were in place to help people to be independent with tasks such as making drinks.
- People were supported with volunteering and into employment to help develop and maintain their independence.

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

- People had choice and control over their daily routines. Staff encouraged people to express their wishes and views and supported them to make decisions about their care.
- Staff listened to people, respected their choices and followed their instructions.
- People were confident and outgoing around staff. They had been empowered by this approach to be in control of their care and support.
- People's wishes and preferences had been recorded in their care plans showing they had been involved in important decisions.

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 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

- People received person-centred support. Staff understood people's needs and what was important to them, and provided patient and attentive support.
- People's need were assessed and person-centred care plans provided guidance for staff on how best to support them, taking into account their individual likes and personal preferences.
- Families praised the communication and were involved in continually discussing and reviewing the support provided to make sure it met people's needs. Feedback included, "The staff are in constant contact if there are any issues or concerns" and "They never fail to keep us informed about what is happening."

Support to follow interests and to take part in activities that are socially and culturally relevant to them;

Supporting people to develop and maintain relationships to avoid social isolation

- People were supported to take part in regular and meaningful activities to avoid social isolation. A person explained, "It is a nice place and the staff are nice. I get to do things; the staff try to organise activities for me."
- Activities were organised on an individual basis to reflect each person's hobbies and interests. A relative told us, "The staff are so encouraging in what they do. [Name] has got a totally different life now. They are doing so many activities and trying new things. They have got a person-centred plan and have been able to access things and reintroduce activities they used to do a long time ago."
- Staff were flexible in their approach and supported people throughout the day to go to clubs, work opportunities or local attractions. A professional said, "[Name] has a good quality of life, being supported to attend activities of their choice and at a time that suits them. If they ask to go out with staff, they never refuse."
- People were supported to maintain important relationships. Families were welcomed to the service and staff supported people to regularly visit and stay with their relatives.

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.

- People were supported to understand important information and express their wishes and views. Their communication needs had been assessed and care plans recorded information about how staff should share information in an accessible way.
- Easy read documents were available to help people understand important information. For example,

about safeguarding or how to complain.

Improving care quality in response to complaints or concerns

- People were confident approaching staff or management if they were unhappy about the service.

Relatives told us, "The systems in place seem to be good from our point of view, and If we ever have any concerns, these are dealt with quickly and professionally" and "Even silly things, I know I can phone them up and they are there if I have got any concerns."

- The provider had a complaints procedure to make sure complaints were investigated, and action was taken to make improvements when things had gone wrong.

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 good. At this inspection this key question has remained the same. This meant the service was well 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 benefited from a person-centred culture and were supported to have a good quality of life. Staff understood people's needs and were attentive and caring in the support they provided.
- Relatives and professionals praised the person-centred support and encouragement staff provided to build people's confidence and develop their independence. A relative said, "The staff are meeting [Name's] needs on every level. The Lodge is excellent, it's changed their life."
- The registered manager was person-centred in their approach to managing the service. A relative told us, "We find the manager is really, really good. They go over and above and are extremely open and honest with us. They are in constant communication and we can raise anything with them and it is dealt with."

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

- Staff had a clear understanding of their roles, responsibilities and how to provide support to meet people's needs.
- Staff and management worked closely with people, their families and professionals to reduce risks and continually review the support provided to help people achieve good outcomes and to improve their quality of life.
- The registered manager was very open to developing practice for the benefit of people who used the service. They were responsive to feedback and acted to make changes and develop the service in response to our findings.
- The provider and registered manager completed a range of audits to help monitor the service provided. We spoke with them about further developing these audits in light of our feedback and findings during the inspection.

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 and registered manager understood their responsibility to investigate and respond to any safety incidents and apologise to people if things went wrong.

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

- Management and staff worked with families and professionals to make sure they provided effective care.

There was good communication and management were responsive to any issues or concerns.

- People consistently told us management were approachable, encouraged feedback and addressed and problems that arose to improve the service.