

## Parkcare Homes (No.2) Limited

# Lammas Lodge

### Inspection report

Lugwardine  
Hereford  
Herefordshire  
HR1 4DS

Tel: 01432853185  
Website: [www.craegmoor.co.uk](http://www.craegmoor.co.uk)/[www.priorygroup.com](http://www.priorygroup.com)

Date of inspection visit:  
06 December 2019

Date of publication:  
01 January 2020

### 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

Lammas Lodge is a residential care home providing personal care and accommodation for up to seven younger people with learning disabilities and/or autistic spectrum disorder. At the time of our inspection, there were seven people living at the home.

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 that 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 using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

The service was bigger than most domestic style properties. It was registered for the support of up to seven people. This is larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the building design fitting into the residential area and the other large domestic homes of a similar size. Staff were discouraged from wearing anything that suggested they were care staff when coming and going with people.

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

Staff knew how to identify and report potential abuse involving people who used the service. The risks associated with people's individual care and support needs had been assessed, reviewed and managed. Staff received training and read people's care plans and risk assessments to enable them to work safely. Staffing arrangements at the service ensured people's individual needs could be safely met. People had support to take their medicines safely and as prescribed. Measures were in place to protect people, staff and visitors from the risk of infections. Any accidents or incidents involving people living at the home were reported, recorded and action was taken to keep people safe.

The registered manager promoted a positive and open culture within the service. People's relatives felt able to express their views to staff and management. Staff felt well-supported and were clear what was expected of them at work. Regular audits and checks were completed on the quality and safety of people's care to identify and address areas for improvement. Staff worked with a range of community health and social care professionals to ensure people's care needs were monitored and met.

### Rating at last inspection

The last rating for this service was Good (report published 19 July 2019).

### Why we inspected

This was a focused inspection to assure ourselves the service was meeting people's needs, staff had the necessary skills and experience and management processes were effective. We reviewed the key questions

Safe and Well-led only. No areas of concern were identified in the other key questions, therefore we did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection. The overall rating for the service has remained the same. This is based on the findings at this inspection.

#### 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.

# Lammas 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 was completed by one inspector.

#### Service and service type

Lammas 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 Care Quality Commission. 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 was an unannounced inspection.

#### What we did before the inspection

Before the inspection visit, we reviewed information we had received about the service since the last inspection. This included information about incidents the provider must notify us of, such as any allegations of abuse. We sought feedback on the service from the local authority.

#### During the inspection

We spoke with two people who used the service and a relative about their experience of the care provided. We also spoke with the registered manager, one senior care staff member and four care staff.

We reviewed a range of records. These included two people's care records, medicines records and two staff

recruitment records. We also reviewed incident records and records relating to the safety of the premises and the management of the service.

After the inspection

We spoke with two relatives and a community health and social care professional about their experiences of the care provided.

# 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

- Staff received training in, and understood, how to identify and report potential abuse involving people who lived at the home. They told us they would immediately report any abuse concerns to a senior colleague or the registered manager, and were confident these would be fully investigated.
- The provider had procedures in place to ensure any abuse concerns were promptly reported to the relevant external agencies, in line with local safeguarding procedures.

Assessing risk, safety monitoring and management

- People told us they felt safe living at the home.
- People's relatives were confident staff understood the risks to their family members and protected their safety and wellbeing. One relative told us, "I feel [person] is very safe. I know this from [person's] attitude when I bring them back to the home; they enjoy coming back here."
- The risks associated with the premises, equipment in use and people's individual care needs had been assessed, reviewed and plans put in place to manage these. As part of this, consideration had been given to people's health needs, mobility, nutrition and the activities they participated in.
- Clear behaviour support plans had been developed for people, with support from the provider's Positive Behaviour Support (PBS) practitioner.
- Staff confirmed they read people's care plans and risk assessments to understand how to support them safely. One staff member explained, "They [care plans and risk assessments] are all very well written and are reviewed every month by the key workers who know people best." A key worker is a member of staff who has been allocated additional responsibilities in relation to ensuring a particular person's individual needs are met.

Staffing and recruitment

- People told us staff were available to support them when needed.
- People's relatives and staff themselves were satisfied with the staffing arrangements at the home. We saw there were enough staff on duty to safely meet people's needs.
- The registered manager booked regular agency staff to cover staffing shortages whilst recruitment activities were ongoing.
- The provider carried out pre-employment checks on prospective staff to ensure they were safe work with people who lived at the home.

Using medicines safely

- People's relatives told us staff provided the level of support their family members needed to manage and

take their medicines safely.

- People received their medicines from trained staff who felt confident following the provider's medicines procedures and who maintained accurate and up-to-date medicines records.
- Staff had been provided with written guidance on the expected use of people's 'when required' (PRN) and topical medicines.
- Staff completed daily medicines stock checks to confirm people had received their medicines as prescribed.

Preventing and controlling infection

- The provider took steps to protect people, staff and visitors from the risk of infections.
- Staff maintained appropriate standards of hygiene and cleanliness at the home. We found the home was clean and fresh-smelling throughout.
- The provider supplied staff with personal protective equipment (e.g. disposable gloves and aprons) to reduce the risk of cross-infection. Staff were clear when they were expected to use this.

Learning lessons when things go wrong

- Staff recorded and reported any accidents, incidents or unexplained injuries involving people who lived at the home.
- The registered manager and provider reviewed these reports and took action to reduce the risk of things happening again.
- The provider's PBS practitioner reviewed reports of any behaviour incidents on a weekly basis, to provide staff with any additional advice needed and ensure people's behaviour support plans remained effective.

# 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's relatives described the open communication they had with the registered manager and staff team. They were confident they would be informed of any significant changes in their family members' health or wellbeing, and felt able to approach the registered manager with any issues or concerns.
- People's relatives spoke positively about their direct dealings with the registered manager to date. One relative told us, "[Registered manager] has always been very pleasant and helpful." Another relative described the registered manager as, "extremely friendly and approachable".
- Staff felt the registered manager was approachable, fair, supportive and willing to listen to their views. One staff member told us, "[Registered manager] is very organised and communicates very well with staff. She will also step in and help staff whenever necessary." Another staff member said, "I think it [service] is run really well. [Registered manager] listens to staff and is quick to act on our ideas or concerns. She is also very understanding with any personal issues we have."

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 understood the legal requirement upon them to inform people and relevant others in the event something went wrong with their care.

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

- The registered manager and staff were clear about their respective roles and responsibilities within the service.
- The registered manager understood their regulatory responsibilities, including the need to inform the Care Quality Commission (CQC) of certain incidents affecting the service and the people who used it. They kept themselves up to date with legislative changes and best practice guidelines through, amongst other things, regular updates from the provider and attending monthly managers' meetings.
- Governance meetings were held with staff on a monthly basis, to ensure there was a shared understanding of risks and quality performance issues within the service.

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

- Individual 'equality and human rights profiles' had been developed with people to ensure their protected

characteristics were taken into account in the planning and delivery of their care.

- Staff felt engaged in the service and spoke about people's care with enthusiasm. One staff member told us, "I love my job. I enjoy helping the people we support and making their lives better. It's quite a rewarding job."
- The provider actively sought the views of people, their relatives and staff on the service through, for example, distributing annual feedback surveys. Feedback received was analysed to identify and address any potential areas for improvement in the service.
- Links between the service and the local community were maintained and, where possible, developed to benefit people living at the home. This included contact with a local church, school, residential care home and farm project.

Continuous learning and improving care

- The provider had effective quality assurance systems and processes in place to enable them to assess, monitor and improve the quality and safety of people's care.
- A rolling programme of audits and checks were completed on key aspects of the service. This included monthly 'quality walkarounds' by the registered manager focusing on health & safety arrangements and the safe management of people's medicines. The provider's internal compliance inspector and the quality improvement lead for the service also completed audits at the home and reported their findings to the registered manager.

Working in partnership with others

- The registered manager and staff team worked with a range of community health and social care professionals to ensure positive outcomes were achieved for people. A community professional spoke positively about their working relationship with the registered manager. They told us, "[Registered manager] is always very amenable. I can ring her up at any time and am confident she will get back to me on any issues raised."