

Review of compliance

Mrs C Chesyre Lilibet Lodge	
Region:	East
Location address:	6 Rothsay Road Bedford Bedfordshire MK40 3PW
Type of service:	Care home service without nursing
Date of Publication:	October 2011
Overview of the service:	Lilibet Lodge is a care home without nursing, registered to provide accommodation and care for up to 25 mainly older people.

Summary of our findings for the essential standards of quality and safety

Our current overall judgement

Lillibet Lodge was meeting all the essential standards of quality and safety.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 1 July 2011, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

What people told us

During our visit to Lillibet Lodge on 01 July 2011, people told us that they were happy at this home and they felt safe. They got on well with the staff, felt they were treated well and with respect, and were able to make choices about their lives.

What we found about the standards we reviewed and how well Lillibet Lodge was meeting them

Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run

The provider was compliant with this outcome. Care was provided in a respectful way which involved people and promoted their dignity.

Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

The provider was compliant with this outcome. The care people received was based on up to date information and guidance given to staff.

Outcome 06: People should get safe and coordinated care when they move between different services

The provider was compliant with this outcome. Systems were in place to ensure that people received coordinated care, treatment and support.

Outcome 07: People should be protected from abuse and staff should respect their human rights

The provider was compliant with this outcome. Staff had good knowledge and training in safeguarding adults and procedures were in place to make sure that people were kept safe from abuse and harm.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

The provider was compliant with this outcome. Staff were well trained and supported, and there were enough staff on duty to meet people's needs.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

The provider was compliant with this outcome. There were systems in place to gather information about the quality of the service and to make improvements when needed.

Other information

Please see previous reports for more information about previous reviews.

**What we found
for each essential standard of quality
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

Outcome 01: Respecting and involving people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

- * Understand the care, treatment and support choices available to them.
- * Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- * Have their privacy, dignity and independence respected.
- * Have their views and experiences taken into account in the way the service is provided and delivered.

What we found

Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

Our findings

What people who use the service experienced and told us

During our visit to Lillibet Lodge on 01 July 2011 people we spoke with told us "It's a nice atmosphere here" and "I'm well happy here". They said they were able to make choices about how they lived their lives. During our observations we saw that staff and people who live at Lillibet Lodge treated each other with respect and enjoyed each other's company.

Other evidence

During our visit we noted that everyone had warm, friendly, caring relationships with each other. People treated each other with respect and everyone seemed very comfortable in each other's company.

Staff confirmed that people have choices about all aspects of their daily lives.

One person told us that they make their own choices, however they were "not allowed" to have their meals in their bedroom. The manager explained that people were encouraged to eat their meals in the main dining room or in the lounge, but could have their meals in their bedroom if they wished to. She said she would talk to this person about this.

The home has involved an organisation called 'Friends for Life' in the home, so that people who have no regular visitors can have a Friend visit regularly if they would like them to.

Our judgement

The provider was compliant with this outcome. Care was provided in a respectful way which involved people and promoted their dignity.

Outcome 04: Care and welfare of people who use services

What the outcome says

This is what people who use services should expect.

People who use services:

* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

Our judgement

The provider is compliant with Outcome 04: Care and welfare of people who use services

Our findings

What people who use the service experienced and told us

During our visit to Lillibet Lodge on 01 July 2011 people we spoke with told us "It's a nice atmosphere here" and "I'm well happy here". They said they got help with personal care when they wanted it and staff were very good. During our observations we saw that care was provided in a sensitive way. Staff said the standard of care was very good and "everything possible is done here to make people's lives as good as possible".

Other evidence

We looked at care records for two people and found that a 'needs assessment' had been carried out which formed the basis for the care plans.

One person had a care plan in place regarding nutrition which said the person needed full support so that their nutritional needs would be met. Food and fluid charts were in place, which staff were completing. The records of the person's weight showed that the person was receiving adequate nutrition. This person's doctor had made a referral to the speech and language therapist (SALT), but the SALT had not visited. The manager was chasing this up.

Another person's care records also showed that food and fluid charts were completed in good detail. The manager told us that the local authority had carried out a visit to the home a few weeks before our visit and had recommended more detail should be included on the food and fluid charts, which the staff were now doing.

Risk assessments, for example about falls, nutrition and pressure sores had been completed, and guidance written for staff on how to reduce the risks for each person.

We saw that staff had written daily notes which gave a good description of how people had spent their day. Care plans had been reviewed and revised when there had been any change in the person's needs and therefore a change in the care needed to meet those needs.

Our judgement

The provider was compliant with this outcome. The care people received was based on up to date information and guidance given to staff.

Outcome 06: Cooperating with other providers

What the outcome says

This is what people who use services should expect.

People who use services:

* Receive safe and coordinated care, treatment and support where more than one provider is involved, or they are moved between services.

What we found

Our judgement

The provider is compliant with Outcome 06: Cooperating with other providers

Our findings

What people who use the service experienced and told us

During our visit to Lillibet Lodge, one person told us that they were able to see their doctor when they needed to, and the district nurse came regularly to change the dressings on their legs.

Other evidence

Care records we looked at showed that people had seen a range of healthcare professionals, and that staff had put their advice into practice where they could. One person had been seen by a dietician and a weight-reducing diet had been recommended which the person was now following. However, another person had been given an exercise programme to follow but in spite of the staffs' best efforts, the person had chosen not to follow this very often.

People had seen other professionals such as opticians and dentists regularly.

Our judgement

The provider was compliant with this outcome. Systems were in place to ensure that people received coordinated care, treatment and support.

Outcome 07: Safeguarding people who use services from abuse

What the outcome says

This is what people who use services should expect.

People who use services:

* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us

People we spoke with during our visit to Lillibet Lodge told us they were happy here and felt safe.

Other evidence

There were systems and procedures in place to make sure that people living at Lillibet Lodge were kept safe. The manager had demonstrated she had a good understanding of safeguarding protocols as she had raised issues with the local authority safeguarding team. For example, one person fell earlier in the year and fractured their hip, and another person had fractured their wrist. These incidents were reported as people had suffered a serious injury.

Staff we spoke with were very clear about the procedures to follow, which included immediately reporting any issue they were worried about to the managers or the provider. They also knew not to start any investigation. The manager told us that the staffs' knowledge and understanding of safeguarding was constantly checked, and they had all undertaken regular training in safeguarding adults.

The manager showed that she also had a good understanding of the Deprivation of Liberty standards. She had made an application to 'restrain' one of the people who lives at Lillibet Lodge by preventing them from leaving the building. The Local Authority considered that the action was restriction, not restraint, so the application was not needed.

One of the staff told us that they and some of the other senior care workers had recently been on Mental Capacity Act and Deprivation of Liberty standards training.

Our judgement

The provider was compliant with this outcome. Staff had good knowledge and training in safeguarding adults and procedures were in place to make sure that people were kept safe from abuse and harm.

Outcome 14: Supporting staff

What the outcome says

This is what people who use services should expect.

People who use services:

* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement

The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us

People we spoke with during our visit told us that staff were "very friendly, helpful and pleasant", and "they treat me properly". Staff said "I get on well with the staff and the management is great" and "I love the job, I really enjoy it – the staff are lovely, the residents are lovely".

Other evidence

The manager and staff told us that there were always enough staff on duty to meet people's needs. One of the staff added 'even at weekends'. There were always four care workers on duty in the mornings, five in the afternoons (because there were two people who needed to be occupied more in the afternoons) and two at night. Some of these staff were senior care workers so were 'in charge' when the manager or deputy manager were not on duty. During our observations we saw that staff were calmly and efficiently going about their work. We noted that people's needs were met quickly and well, and staff had time to chat to people, offer food and drinks at regular intervals and complete paperwork. The home also employed a number of other staff, including a cook, a domestic assistant, a gardener and a maintenance person.

We spoke with two members of staff who told us that the company was good and offered lots of training. They told us that new staff had to do all the 'mandatory training', which included topics such as moving and handling, first aid, fire safety, food hygiene, infection control and safeguarding as part of their induction, and all staff had undertaken regular refresher courses. One member of staff said that staff know their limitations and have asked for any training they felt they needed. End of Life training was currently being undertaken by some staff, and some of the senior staff had recently

done Mental Capacity Act and Deprivation of Liberty standards training. One of the staff said they were just completing a National Vocational Qualification (NVQ) in care level 3. Most staff had done dementia and challenging behaviour training.

The training matrix shown to us by the manager confirmed that a lot of training has been offered and that the majority of staff were up to date with all the courses.

A 'handover' was held at the start of each shift so the staff coming on duty were brought up to date with what was happening for each of the people who lived at Lillibet Lodge, by the staff who were finishing their shift. Staff told us that they also had regular one to one supervision and that the managers were very supportive.

Our judgement

The provider was compliant with this outcome. Staff were well trained and supported, and there were enough staff on duty to meet people's needs.

Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says

This is what people who use services should expect.

People who use services:

* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

Our judgement

The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision

Our findings

What people who use the service experienced and told us

People told us they were given the care they need and they could make choices about their lives. They were involved in deciding what activities they would like to do and they have meetings with the manager. Staff said that "the owner expects a lot [from us] because she expects the best for the residents".

Other evidence

The manager told us that there were a number of systems in place to audit the quality of the service that was provided at Lillibet Lodge. The manager said that she and the deputy manager carried out spot checks on numerous areas, such as moving and handling, medication, staffs' appearance, cleanliness, maintenance/decoration of the building and the care provided on a daily basis.

The manager said that every effort was made to seek people's views. Regular residents' meetings and discussion groups were held, questionnaires were sent to all relatives/friends and people would often come to the office to have their say. A copy of the complaints procedure was given to each person who lived at the home, and a copy to their families.

The owner was very involved in the home and visited regularly to monitor the service. Some of these visits were unannounced.

Staff, especially senior staff, had some additional responsibilities. For example, they audited care plans each month and brought the audits to discuss in supervision. Staff

meetings were held regularly and made more 'interactive' by introducing some role play, doing quizzes and showing DVDs to generate discussion. The manager also said that the staff discussed the 'Essential standards of quality and safety' at staff meetings, to ensure all staff were working in the same way and the outcomes were being met.

After our visit the manager contacted us to say that she had received a number of questionnaires back from relatives which she had collated and put the results on the notice board. Any suggestions for improvement would be considered.

Our judgement

The provider was compliant with this outcome. There were systems in place to gather information about the quality of the service and to make improvements when needed.

What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

Improvement actions: These are actions a provider should take so that they **maintain** continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

Compliance actions: These are actions a provider must take so that they **achieve** compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

Enforcement action: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

Information for the reader

Document purpose	Review of compliance report
Author	Care Quality Commission
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Care Quality Commission

Website	www.cqc.org.uk
Telephone	03000 616161
Email address	enquiries@cqc.org.uk
Postal address	Care Quality Commission Citygate Gallowgate Newcastle upon Tyne NE1 4PA