

Cumbria County Council

Park Lodge

Inspection report

Outgang Road
Aspatria
Wigton
Cumbria
CA7 3HP

Tel: 01697320636

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

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

Park Lodge is a residential care home for up to 15 older people. There were nine people in the home during the inspection. People had single bedrooms, some with ensuite facilities. There were suitable shared facilities and a pleasant garden. The home does not provide nursing care.

People's experience of using this service

People told us they felt safe. Staff understood their responsibilities in protecting people from harm and abuse. New members of staff had been suitably vetted. Accidents and incidents were responded to appropriately.

Staff understood people's needs and had suitable training and experience in their roles. The service employed enough staff by day and night to meet people's needs.

People saw their GP and health specialists when necessary. Medicines were suitably managed with people having reviews of their medicines on a regular basis. Staff took the advice of nurses and consultants. The staff team had good working relationships with local GP surgeries. Nutritional planning and special diets were in place. People told us they really enjoyed the food provided.

Park Lodge is a purpose-built home that has been modernised and adapted to meet the needs of older adults. The house was warm, clean and comfortable on the day we visited. The home had equipment in place to support care delivery.

The staff team were aware of their responsibilities under the Mental Capacity Act 2005. 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.

People told us the staff were very caring. We observed kind and patient support being provided. Staff supported people in a respectful way and made sure confidentiality, privacy and dignity were maintained.

Care plans provided detailed guidance for staff in the home. People in the service or their relatives, as appropriate, had influenced the content. The registered manager ensured the plans reflected the person-centred care that was being delivered.

Staff could access specialists if people needed communication tools like sign language or braille.

People told us they enjoyed the activities, interests and hobbies on offer. The home was part of the local community with involvement in local activities.

The service had a quality monitoring system and people were asked their views in a number of different ways. Quality assurance was used to support future planning.

The registered manager understood how to manage concerns or complaints appropriately. There had been no complaints in this service.

Records were well organised, easy to access and stored securely.

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

Rating at last inspection: Good (Published 4 May 2017).

Why we inspected:

This inspection was part of our scheduled plan of visiting services to check the safety and quality of care people received.

Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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 safe.

Details are in our safe findings below.

Good 

Is the service effective?

The service was 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 

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 was carried out by one inspector.

Service and service type

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.

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 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 professionals who work with the service. The provider was not asked to complete a provider information return prior to 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. We used all of this information to plan our inspection.

During the inspection

We spoke with eight people who used the service and three relatives about their experience of the care

provided. We spoke with seven members of staff including the registered manager, supervisors, care workers and the cook.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at two staff files in relation to recruitment, training and staff supervision. A selection of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We received information related to training data, quality assurance records and meetings with staff.

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

- Systems were in place to protect people from harm and abuse.
- People said they felt safe. One person said, "Better than at home" and their relative said, "I no longer worry as she is perfectly safe here."
- Staff were knowledgeable about protecting adults and told us they had regular training, updates and the contact details for making referrals.

Assessing risk, safety monitoring and management

- Risk was lessened and people were kept as safe as possible because good management systems were in place.
- Detailed risk assessments were in place related to the delivery of care, moving and handling, trips out, fire and food safety. These had been routinely updated.
- One person said, "I did fall a lot before I came in and they have done a lot of things to help me. Touch wood I haven't fallen as much recently."

Staffing and recruitment

- Staffing levels were monitored and recruitment completed effectively, following the procedures of Cumbria County Council.
- We met a prospective bank worker who confirmed the recruitment was fair and references and checks were underway.
- Two people confirmed that staffing was suitable, "We think the staff come quickly when the bell is rung". Another person said, "The staff are there when I want help with something. I don't have to wait when I want to go to bed or need a drink - or anything really."

Using medicines safely

- Medicines were appropriately managed.
- Medicines were stored securely, closely monitored, ordered, administered and disposed of safely. People had regular reviews of medicines to make sure they had the right medicines for their needs.
- One person said, "They do my pills, no problems with that!" Another person said, "They helped me at the start but the staff are making sure I understand what I take as I am going home in a few days."

Preventing and controlling infection

- Suitable arrangements were in place to prevent cross infection and to ensure the home was clean and hygienic.

- The home was clean and fresh on the day of our visit. Staff used personal protective equipment and chemicals to lessen the risk of cross infection. The senior team monitored infection control and ensured staff followed the policies and procedures about this.
- One person said, "I like things 'just so' and the house is very clean. Lovely clean sheets on my bed."

Learning lessons when things go wrong

- The provider and the registered manager ensured they had a focus on improving systems if things went wrong.
- The team had recently discovered a minor issue around an alarm system. Changes had been made and all staff made aware.
- People considered that the team would respond to anything going wrong, "They would sort it!"

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

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were suitably assessed and their choices respected. This was done in line with standards, guidance and the law.
- Detailed assessments were completed prior to admission and this was ongoing ensuring people's changing needs were understood.
- People who came in for rehabilitation had thorough, joint assessments. One person said, "I have been assessed throughout my stay. The occupational therapists and nurses come in and together with the staff they now think I am able to go home."

Staff support: induction, training, skills and experience

- Staff were supported through good induction, support and ongoing training.
- Staff said, "We get regular training and if anyone comes into rehabilitation with different needs we get training specific to their needs right from the start."
- One person said, "These girls know what they are doing, some have been here a long time and I think they are well trained."

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

- People were given a varied and nutritious diet and encouraged to maintain their hydration.
- Nutritional plans were in place and the cook and the care staff knew people's needs and preferences. Soft diets, vegetarian diets and individual preferences were catered for.
- People said, "The food is very good, I have put on weight since I came" and "You get choices the day before but you can still change your mind. The food is fine I have no complaints."

Staff working with other agencies to provide consistent, effective, timely care

- People were supported because the staff team worked well with health and social care agencies
- We met a health care professional who said, "The staff are very good here. I would come in here myself. Very caring team."
- People told us about prompt and appropriate support from other health and social care professionals.

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

- Park Lodge is a purpose built home situated near the centre of Aspatria. It has been modernised and adapted to meet the needs of older people.
- The home was well decorated and furnished. Suitable equipment and adaptations were in place. People

said, "The home is very comfortable. I feel relaxed here."

- The garden was easy to access with sheltered seating areas. People told us they enjoyed sitting out when the weather was good.

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

- People were supported because the staff team worked well with health and social care agencies.
- People told us, "The nurse comes in and they get the doctor if needed." People who were admitted for rehabilitation saw physiotherapists and occupational therapists during their stay.
- Records showed regular visits from chiropodists, GPs, community nurses and other specialists.

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, and some hospitals, 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 and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People were asked for consent and, if necessary, their capacity had been assessed.
- People told us, "They ask us all the time" and we observed staff asking for consent before any interactions.
- Detailed records relating to 'best interest' meetings and DoLS authorisations were in place. Deprivations of liberty were managed in the least restrictive way possible.

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 as good. At this inspection this key question has 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 in the service were treated well and were given full psychological and emotional support as part of their holistic care.
- Every person we spoke to was keen to tell us the staff were caring, kind and respectful. People said the staff were, "Lovely, nice polite girls and there isn't one of them I could find fault with." Another person said, "They are so nice and kind to me and my [relative]."
- Staff confirmed they had received equality and diversity training and spoke about how they applied this in practice.

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

- People were supported to express their views and told us they made their own decisions.
- The registered manager held regular meetings with everyone in the service and also consulted visiting relatives, where appropriate.
- People had influenced the menus, outings and entertainments. They told us, "We get to say what we think."

Respecting and promoting people's privacy, dignity and independence

- The staff team treated people with dignity, supported independence and encouraged independence.
- One person said, "Staff are very understanding and they give me privacy." Another told us, "I can do some things for myself. I like to do what I can and the staff let me have a go."
- People were supported to maintain a good standard of personal appearance. One person said, "They make sure I look nice, hair done and clean clothes every day. I like to look nice."
- We observed staff treating people with a respectful and empathic approach. They were friendly and kind without being patronising or over familiar.

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 as 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

- Assessment and care planning were detailed and ensured people had their needs met in the way they preferred.
- The care plans covered people's needs and wishes. This included social and psychological needs as well as their personal care and health care needs. Staff knew the contents and said they monitored the plans and changed them when necessary.
- One person told us, "I came here from hospital for rehabilitation. The girls made sure I did my exercises, had the right kind of [health care] and I am much better and will be going home in the next few days."

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's communication needs were met by the team with support from the provider and external providers.
- Staff told us no one needed specialist support but that they knew the registered manager would provide them with training and resources if necessary.
- The provider had policies and procedures in place and would provide things like signage and technology if a person had these needs.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The home ensured that people were involved in the life of the home and social isolation was lessened.
- Visitors, entertainers and members of the public came into the home and people went on trips out and for meals. There were regular activities like reminiscence, music and movement and crafts in the home.
- One person said, "I am quite happy spending time on my own but they always ask me to join in." Another said, "We have parties and entertainers and exercise classes. I like the TV and spend time in my own room too."

Improving care quality in response to complaints or concerns

- The provider ensured that complaints and concerns were dealt with and care quality improved, when necessary.

- The provider had a suitable complaints policy and procedure. No complaints had been received. People told us, "No complaints here", "Nothing to complain about" and "Mustn't grumble...it's very nice here nothing to complain about."
- Staff told us there was a procedure to follow. One staff member said, "People do change and want different things but we can sort them. We write changes into the care plan so that people get person-centred care".

End of life care and support

- The home provided end of life care with the support of health care professionals.
- One person said, "I have been here for years and I plan to end up here with these girls looking after me to the end."
- A member of staff spoke about how satisfying it was to support people at the end of life but that it was also emotional. They said, "If the death of one of our residents stops hurting its time to leave".

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 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

- This home had a positive culture. It was operated by Cumbria County Council - Cumbria Care and the home reflected the positive and empowering vision and values of the provider.
- People said they were well cared for and their well-being had improved because of, "The really good care we get."
- Staff told us, "We are proud to give person-centred care. We are a small team and we know people really well. We do the best we can."

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 duty of candour was followed in this service with the provider and the team fully aware of their responsibilities.
- People told us they were kept fully informed. One person said, "The staff are very honest people and I trust them." Another person said, "I would talk to the manager and she would sort it."

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

- The staff team understood their roles and were committed to running a high quality service that met with regulatory requirements.
- Cumbria Care had a detailed quality monitoring system and both internal and external audits were completed. An annual quality report had been completed and actions taken to ensure continuing high standards of care and support.
- Staff said they were aware of their role and how it fitted into the whole team. They also had a good understanding of legislation, good practice and the need to maintain standards.

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

- Good systems were in place to engage with people, the public and staff both formally and informally.
- People and their families received regular surveys and these were analysed and changes made where necessary. Review meetings were arranged and informal discussions held with people, their visitors and visiting professionals.
- People confirmed they were treated equally and told us, "The staff are lovely. We are well treated." Staff

confirmed they had attended Cumbria County Council equality and diversity training and management would ensure they complied with these policies.

Continuous learning and improving care; Working in partnership with others

- The home had a focus on improving care through quality monitoring, listening to people, training staff and developing the team.
- The registered manager had taken advice from other professionals and had kept up to date with current good practice.
- We met a health care professional who worked with the home to support people discharged from hospital and they said, "We have had really good outcomes with people going home after a good recovery. The staff work with us and follow our guidelines."