

Pilkington Retirement Services Limited

Ruskin Lodge

Inspection report

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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 

Overall summary

The inspection was unannounced and took place on 19 and 25 January 2016.

Ruskin Lodge is owned and managed by the Pilkington Family Trust. The building is purpose built and is located in a residential area of St. Helens. It provides short breaks and respite care for up to 23 people.

The last inspection of Ruskin Lodge was carried out on 13 December 2013 and we found that the service was meeting all the regulations reviewed.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

Summary of findings

People told us they felt safe when they stayed at Ruskin Lodge. Comments from people at the service included, “Staff will do anything for you”, “Nothing is too much trouble” and “I feel safe and secure when I am here. I get panicky when I go out”.

Staff had received training in how to recognise and report abuse. All staff were clear about how to report concerns and were confident that any allegations made would be fully investigated to help ensure people were protected. There were sufficient numbers of suitably qualified staff to meet the needs of the people who used the service.

People were supported to take their medicines by staff that were appropriately trained. People received care and support from regular staff that knew them very well, and had the knowledge and skills to meet people’s individual needs. People spoke very positively about staff; their comments included; “The staff are great” and “Every member of staff is wonderful, tip top”.

Before people started to use the service the registered manager overviewed and approved all assessments and referrals to ensure the service could meet the

person’s needs. From these assessments individualised care plans were developed with the person and where appropriate, with their relatives to agree how the care and support would be provided.

Care plans provided staff with clear direction and guidance about how to meet people’s individual needs. People told us that the manager was always approachable.

People said they would not hesitate to speak to the manager or any staff member if they had any concerns about the service they received. People and their relatives knew how to make a formal complaint if they needed to. One person said, “I did have cause to raise a small complaint and the manager dealt with it to my satisfaction”.

There was a positive culture and strong leadership within the service and staff said the manager led by example. Staff said, “Ruskin Lodge is a wonderful place to work” and “I feel the company welcomes and listens to suggestions”.

There were quality assurance systems in place to make sure that any areas for improvement were identified and addressed.

Summary of findings

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.

There were good systems in place to ensure risks to people's safety and wellbeing were identified and addressed.

Staff knew how to recognise and report the signs of abuse. They knew the correct procedures to follow if they thought someone was being abused.

There were sufficient numbers of suitably qualified staff to meet the needs of the people who used the service.

Good



Is the service effective?

The service was effective.

People told us that they experienced positive outcomes as a result of the support they received.

People received support from staff that knew them well, and had the knowledge and skills to meet their needs.

People told us they enjoyed visiting Ruskin Lodge and that they had developed friendships. People enjoyed the activities undertaken there.

Good



Is the service caring?

The service was caring.

Staff were kind and compassionate and treated people with dignity and respect.

People were involved in their support and were asked about their preferences and choices.

Staff built meaningful relationships with people who used the service and were given ample time to meet people's needs and provide companionship

Good



Is the service responsive?

The service was responsive.

Changes in people's needs were promptly recognised and acted upon with the involvement of external professionals where necessary.

People were regularly encouraged to give their views and raise concerns or complaints to improve the service.

There were systems in place to help ensure staff were up to date with meeting people's needs.

Good



Is the service well-led?

The service was well-led.

Good



Summary of findings

The manager promoted strong values and a person centred culture. Staff were proud to work for the service and were well supported.

People and staff were consulted and involved in the running of the service; their views were sought and acted upon.

There were effective quality assurance systems in place to make sure that any areas for improvement were identified and addressed.

Ruskin Lodge

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 19 and 25 January 2016 and was unannounced. One adult social care inspector undertook the inspection.

Before the inspection, we checked the information that we held about the service including notifications we had

received. A notification is information about important events which the registered provider is required to send us by law. We contacted the local authority, healthwatch England and the local authority infection control team to gain their views of the service.

During the inspection we spoke with the registered manager and five staff. We also spoke with nine people who used the service. We looked at three care records including daily records, medication administration records (MAR) and financial records. We also looked at other records relating to the management of the service. These included three staff training, support and employment records, quality assurance audits and findings from questionnaires the registered provider had sent to people and relatives.

Is the service safe?

Our findings

People told us they felt safe when they stayed at Ruskin Lodge. One person said “I don’t know where I’d be without Ruskin Lodge, I visit as often as I can”, “When I am here my daughter is happy knowing I am safe and alright” and “I became unwell while I was staying at Ruskin Lodge, they extended my respite, looked after me and the care and attention aided my recovery”.

Risk assessments were carried out to identify risks to people who used the service and to the staff supporting them. Staff had access to clear guidance about risks that needed to be considered and the procedure for managing these. Individual risk assessments were observed including falls, slip and trips, sensory and medication. Consideration was demonstrated for additional measures to be put in place following any change to each person’s care needs. The registered manager demonstrated a clear process for the management of risk while they encouraged people to engage in a variety of activities.

Staff recruitment was managed safely. We reviewed recruitment records for three staff. They included a completed application form, interview records, employment checks, such as two valid references from previous employers and confirmation of identity and right to work. Necessary vetting checks had been carried out through the Disclosure and Barring Service (DBS). These checks identified if prospective staff had a criminal record or were barred from working with vulnerable people.

Staff had received training in safeguarding adults and they demonstrated a good understanding of abuse. They described the different types of abuse and signs which indicate abuse may have taken place. They talked about the steps they would take to respond to allegations or suspicions of abuse. Staff were aware of their own responsibilities to raise a safeguarding concern with the local safeguarding team. A copy of the local authority safeguarding policy and procedure was available to all staff. The registered provider had a safeguarding policy.

There were enough staff on duty to keep people safe and meet their individual needs. Staff told us the staffing levels were adjusted depending on the people visiting the service for respite. If people had higher level support needs the

staffing levels were increased. Staff rosters for the previous month showed that there had been a consistent number of staff on duty over this period. The registered provider did use occasional agency staff and had an arrangement with the agency provider to have regular staff that knew the service well. Staff retention was high and staff turnover was very low. Staff said that they were happy and felt supported working at the service.

The registered provider had an appropriate system in place for the management and administration of people’s medicines. There was one person staying at the service that required assistance with medication. The Medication Administration Record (MAR) was reviewed and found to be completed correctly. The medication policy had a clear process to be followed in the event of any errors occurring. Staff followed current regulation and good practice guidance. Staff administering medicines had undertaken appropriate training for this role. This included competency assessments which were repeated annually. Medicines were stored appropriately in a locked medication room. People received their medication on time and in a safe manner.

Incidents and accidents were clearly documented and signed by the registered manager. All incidents and accidents were reviewed regularly by the registered manager. Risks were highlighted and consideration was given for the reduction of future risk.

The environment was clean and hygienic. Staff had completed infection control training and they had access to information and guidance in relation to the prevention and control of the spread of infection. Personal protective equipment (PPE) including disposable gloves and aprons were located around the service and readily available to staff. Staff used PPE as required, for example when they assisted people with personal care. One person told us “The place is always spotless”.

A contingency plan was in place for staff to follow in the event of an emergency. An up to date fire risk assessment was in place to protect people for potential harm. Regular fire evacuations were undertaken. The registered provider ensured staff and people at the service were prepared for emergency situations.

Is the service effective?

Our findings

One person who regularly stayed at Ruskin Lodge told us that they were always well looked after at Ruskin Lodge and enjoyed visiting as often as possible. Another person said “Coming in to Ruskin Lodge for respite gives my wife a break as she does everything for me at home. The staff look after me and my wife gets looked after too”, and “I don’t know where I would be without them, I have been visiting for 16 years”. Other people spoken with said, “If you need or want anything you just have to ask” and “I have developed lots friendships here and enjoy visiting. We co-ordinate to visit together whenever we can and Ruskin Lodge always work hard to accommodate this”.

Staff completed a comprehensive induction when they commenced employment. People were supported by staff who had the knowledge and skills required to meet their needs. The registered provider closes the service for one week every January and all staff attended mandatory training updates as well as role specific training. Training included fire safety with evacuation practice and actual use of fire extinguishers, manual handling, food hygiene, health and safety, safeguarding, infection control and emergency aid. Specific training relevant to their service user groups visiting for respite included deaf awareness, stroke awareness, dementia and use of a nebuliser.

One member of staff said “The training was interesting and the time flew by as I found it so useful. The registered manager always invites feedback regarding the training”.

Staff said they were fully supported by the registered manager. Staff received regular supervision and an annual appraisal from the registered manager and team seniors. This gave staff an opportunity to discuss their performance and identify any further training or skills development they required. Individual work based objectives were set each year at appraisal and were discussed at each supervision to ensure they were achieved. Staff comments included “The manager is a good listener”, “I can talk to the manager about anything and she has an open door policy” and “When I required time off the management team were extremely supportive and understanding”.

Staff demonstrated a good understanding of people’s needs. Staff explained their role and responsibilities and how they would report any concerns they had about a person’s health or well being. Care plans reflected the

support being offered. Information was up to date and reviewed every time a person was admitted for respite at the service. All staff were informed of any changes or significant information to ensure they were kept fully up to date.

Staff worked successfully with healthcare services to ensure people’s health care needs were met. They supported people to access a variety of healthcare professionals including GP’s, hospital appointments and dental visits as required. Care records demonstrated that staff shared information effectively with professionals and involved them appropriately.

People were observed being offered choice and support with food and drink. This meant their independence was promoted. Meal times were observed as sociable and friendly. There was lots of positive interaction seen between staff and people at the service. The dining area was light and spacious. People were offered choice where to sit and who they would like to sit with. People commented positively about the food and these comments included “The food is out of this world”, “10 out of 10 for the food”, “Food is absolutely lovely” and “They accommodate my lactose free diet very well”. People told us choice was always offered and the cook would prepare a different meal if you didn’t like the menu on offer.

Daily records showed how staff used encouragement and involvement to enhance choice making, in particular in relation to the preparation of food and drink as well as undertaking activities.

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. The application procedures for this in care homes are called the Deprivation of Liberty Safeguards (DoLS).

Is the service effective?

The registered manager had a clear understanding of the Mental Capacity Act 2005 (MCA) and how to make sure people who did not have the mental capacity to make decisions for themselves had their legal rights protected.

Training in the Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS) was included in the training programme that all staff were required to participate in.

The registered manager told us that they had not had anybody stay at the service that required a DoLS but they understood all that was required should this become necessary in the future.

Is the service caring?

Our findings

People said the staff were nice. Comments from people spoken with included “The staff are fabulous”, “Everyone is very friendly” and “Staff are smashing”.

Quotes from the quarterly guest questionnaires included “It was the first time I had stayed for respite over New Year. It has been the best New Year I have had for many years. Thank you to all the staff”, “No complaints at all, my stay at Ruskin Lodge was first class, that is why I keep coming back and that’s the truth” and “I am satisfied with everything that has been done for me. Thank you”.

Staff interacted positively with people. People were offered choice and encouraged to participate at all times. One person said they enjoyed the Tuesday and Friday outings when they had the opportunity to visit local markets and areas of interest. One person told us “I had my 80th birthday party at Ruskin Lodge and they organised everything. Nothing was too much trouble”. This person also said “When I wasn’t well after a fall and had an admission to hospital they were fantastic looking after me before I went home”.

People received care and support from a regular team of staff that were familiar to them. People told us the staff knew and understood them really well. Staff said that they felt they had opportunities to develop good relationships with people. One member of staff said “Having the time to talk about people’s histories has been wonderful” and “New care plans have a personal profile and it’s been very interesting and helpful to discover more about people”.

Daily records were maintained of the care and support people had received or had been offered throughout the day. They included choices of activities, food, drinks, as well as what time people wanted to get up and go to bed.

The staff had good knowledge and understanding of people. Staff spent time getting to know individuals and understood the best way to support them. Staff were motivated and passionate about making a difference to people’s lives. Staff spoke positively about working for the registered provider, comments were, “Ruskin Lodge is a wonderful place to work”, “I feel really well supported in my job” and “Everyone is always supportive of each other”.

People’s privacy and dignity were maintained. For example staff gave people privacy whilst they undertook aspects of personal care and remained nearby to maintain the person’s safety. Staff were observed engaging in activity and conversation with people. They spent time sitting and talking to individuals as well as in small groups. Staff used their skills to encourage people to participate in group discussion. All staff had undertaken training in relation to dignity and respect. The three care plans reviewed were very detailed and included people’s likes and dislikes as well as specific detail relating to each person.

People were supported to express their views in ways that were meaningful to them and to be involved in making decisions about their care and support. This meant people were valued and treated as individuals with an opinion. The registered manager had regular contact with all people who used the service and where appropriate their relatives.

Is the service responsive?

Our findings

Before people started to use the service the registered manager overviewed and approved all assessments and referrals to ensure the service could meet the person's needs. Comprehensive care plans were developed, with the person and where appropriate with the involvement of their relatives, to agree how they would like their care and support to be provided. People's care plans were reviewed each time they stayed at the service to ensure information was up to date.

Care plans were person centred and detailed each person's specific needs and how they liked to be supported. Daily records detailed activities undertaken throughout each day, choices offered and information relating to personal care, medication, food and nutrition.

Care plans were reviewed regularly and were updated as people's needs changed. Evidence of reviews and updates was seen within the care plan files reviewed. Staff said they always had information regarding new people entering for respite a few days before they arrived. They said they felt they had a good understanding of the person through the care plans before they met them. They said the care plans held all the information they required to provide the right care and support specific to each person's needs. Staff demonstrated a good understanding of people's preferences and interests, as well as their health and support needs, which enabled them to provide a personalised service.

People knew how to make a formal complaint if they needed to and they said the manager was very approachable to discuss anything with.

One person said "I could talk to any member of staff, team leader or the manager if I had a problem. I know anyone

would help me". There was a complaints policy in place with a clear procedure to be followed. The complaints procedure included a reflection on learning and what systems can be put in place for future improvements.

One person said that they had become unwell when they were staying for a period of respite at the service. They explained that the registered manager ensured their stay was extended and the staff looked after them. They stated that the staff care and attention had aided their recovery. Another person spoken with was staying at the service said "Staff will do anything for you and nothing is too much trouble".

People were observed undertaking a number of activities including knitting, artwork, word search and puzzles. There were newspapers available which were being read by a number of people staying at the service. Every Tuesday and Friday the service mini bus took people out in to the community and visited local markets and places of interest. People staying at the service were offered a choice of activities and venues. One person said "I enjoy the Friday trip out and last week we went to Widnes market which I really enjoyed". Another person said "I particularly like to go to the markets when they are an option to visit on a Tuesday or Friday". People talked about the friendships they had developed from visiting the service for respite. Each of the nine people spoken to reflected on Ruskin Lodge as a positive experience.

People had been invited to complete feedback questionnaires. The comments included "I have been very happy and relaxed", I am satisfied with everything that has been done for me. Thank you." and "Thank you to all the staff for the great efforts and hard work, also for making my Christmas and New Year very happy".

Is the service well-led?

Our findings

The registered manager demonstrated a passion for their role, people who used the service and the staff. Staff told us “The manager is approachable, I can tell her and ask her anything”, “I feel I am really listened too and valued” and “I felt very supported by the manager after a particular incident in my life”. The registered manager was active in ensuring a good team ethic and promoted regular communication. She was open to people’s views and staff felt able to share new ideas and any concerns with her. She was knowledgeable about people’s care needs and had developed and sustained a positive culture at Ruskin Lodge. One person said “The manager is wonderful” and another said “The manager is great and shows a genuine interest in me”.

Staff spoken with talked positively about the culture of the service. One person said “It is important that we value our service users as well as each other”, another person said “Ruskin Lodge is the nicest place I have ever worked” and “Management promote that we make time to talk to our service users and colleagues as well as getting our work done”.

Staff meetings were held regularly throughout the year. Staff had the opportunity to feedback their ideas and views. Minutes from the meetings were recorded and shared with any staff that were unable to attend. Annual team leader away days took place led by the registered manager. This was used for team building and the development of new ideas for service development.

There were effective systems in place to manage staff rosters. The needs of individual people were considered ahead of the preparation of staff rosters. Some people required additional staffing resources to meet their individual needs.

The registered manager had effective quality assurance systems in place to make sure any areas for improvement were identified and addressed. She regularly talked to people visiting the service for respite to seek their views about Ruskin Lodge. Staff working practices were observed to monitor the quality of the service being offered. Reviews of daily records were regularly looked at to ensure they were appropriately completed. A health and safety audit was carried out each quarter and an action plan was created following this. The audit included all areas of the building both internally and externally. The process included action completion dates which were seen on recent audits. This demonstrated the registered provider's commitment to continually improving the service and ensuring the quality of the service provision for people.

There was a system that recorded when supervisions, annual appraisals, and staff training was due. This helped to ensure the quality monitoring system was effective and up to date. Care plans and risk assessments were regularly reviewed to ensure they were up to date. People were supported to participate fully in the development of their care plans. The care plans were signed and dated by people staying at the service. They said that this was important to them and it ensured they received support appropriate to their needs.

Systems were in place to check that accidents and incidents were recorded and outcomes were clearly defined, to prevent or minimise re-occurrence. This demonstrated the registered provider's commitment to continually improve the service.