

Derby Lodge (Preston) Limited

Derby Lodge

Inspection report

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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

Derby Lodge is a care home providing personal care for up to 23 people. At the time of our inspection there were 21 people using the service.

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

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

Right Support:

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. The provider consistently maintained sufficient staffing levels to support people to take their time when being assisted. A staff member confirmed, "Yes, there's enough staff on the shift, which means we can spend quality time with the residents." The registered manager trained their workforce to administer and manage people's medicines safely.

Right Care:

People asserted they were supported to maintain their independence. A relative said, "It's all accessible. They've even altered things in the lift for [my relative] to reach. They're very good like that." Staff had a range of specialist training to ensure they could meet people's specific needs, such as in learning disability and mental health conditions. The registered manager developed person-centred care plans with people and their relatives to maintain their independence, although this was not consistent and there were gaps in records.

We have made a recommendation about care planning and risk assessment.

Right Culture:

The provider engaged closely and transparently with the local authority as part of their lessons learnt process to improve people's care. Staff told us they were fully consulted about different aspects of the home and worked as a team to enhance people's lives. Staff interactions with people and their relatives were consistently kind and respectful, with appropriate use of positive language. A relative stated, "It's a fantastic place – it's the place."

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

Rating at last inspection

The last rating for this service was good (published 20 April 2022).

Why we inspected

The inspection was prompted in part due to concerns received about staff approach, medicines administration, risk management and staffing levels. A decision was made for us to inspect and examine those risks.

The provider has taken effective action to mitigate the risks. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of the report.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect. 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.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

Derby 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

This inspection was carried out by 1 inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Derby Lodge is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations. At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we held about the service. 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 (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

We spoke about Derby Lodge with 4 people, 5 relatives, 4 staff and 3 members of the management team. We walked around the building to carry out a visual check. We did this to ensure Derby Lodge was clean, hygienic and a safe place for people to live. We looked at records related to the management of the service. We checked care and medication records, staffing and recruitment files and quality and leadership oversight systems.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The registered manager developed person-centred care plans with people and their relatives to maintain their independence. Although documentation sufficiently indicated how staff should support each person, this was not consistent and there were gaps in records.

We recommend the provider considers current guidance and good practice related to care planning and risk assessment.

- The provider was already aware of these issues and was engaging with people, relatives and staff to improve care planning and risk assessment. A staff member asserted, "We already knew the care plans weren't the best, but [the management team] are consulting with us... and it's a team effort to get them right." Staff interactions with people and their relatives were consistently kind and respectful, with appropriate use of positive language.
- In addition to this lessons learnt process, the management team were keen to review safety through ongoing service development and management of risk. A staff member explained they achieved this through various audits and environmental checks, so "for example, when someone is at risk of a fall we know why and can put everything in place to prevent it."
- People told us they felt safe living at Derby Lodge. One relative stated, "Safe, oh yes. It's knowing that [my relative]'s safe and without this place I don't know what we'd have done." Another relative added, "Yes, very safe. We've known it a long time and we've no qualms about the safety."

Systems and processes to safeguard people from the risk of abuse

- The registered manager ensured staff were well trained and knowledgeable about protecting people from harm or abuse. Staff demonstrated a good awareness of their responsibilities and who to report concerns to. One person told us, "I feel safe because there's always a staff member around if I need them."

Using medicines safely

- The registered manager trained their workforce to administer and manage people's medicines safely. Staff focused on 1 person at a time, explained what they were doing and checked they had taken their medication. A staff member explained, "There is so much risk involved, so I always make sure I am careful and take my time." Staff also ensured a consistent, safe approach through regular stock checks and audits.
- Associated documentation was person-centred and referred to people's preferences to how they wish to take their medication. Staff reassessed information regularly, including GP review of each person's medicines, to ensure procedures continued to meet their needs. A relative said, "[My relative] has medication and they give it on time. I've been there and seen it given on time."

Staffing and recruitment

- The provider consistently maintained sufficient staffing levels so that people's needs were met in a timely way. Staff responded to call bells quickly and patiently supported people to take their time when being assisted. A relative stated, "I'd say they were overstaffed, as there seems to be a lot of them there at mealtimes." A staff member added, "[The management team] really encourage us to take our time. It's really important to their wellbeing that we chat with them throughout the day."
- The provider had robust procedures to recruit the right staff able to support vulnerable adults safely. They then ensured each employee was fully inducted and completed training on an ongoing basis. Staff had a range of specialist training to ensure they could meet people's specific needs, such as in learning disability and mental health conditions.

Preventing and controlling infection

- The provider ensured staff were adequately trained to maintain good standards in cleanliness and mitigate the spread of infection. There were sufficient supplies of PPE and staff washed their hands thoroughly at regular intervals. A staff member said, "[The provider] knows how important it is we have the tools to prevent the spread of infection."

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 our last inspection we rated this key question requires improvement. The rating for this key question has changed to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

At our last inspection the provider had failed to adequately assess fire risks and ensure staff training and understanding of fire safety. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The provider implemented a new, robust fire risk assessment and ensured its workforce had up to date training and relevant guidance. Staff were able to describe safe practice in the event of a fire. One employee explained, "The worst thing that could happen here is a fire, so we all get training and I'm very vigilant to all the risks." The registered manager regularly completed various audits to maintain everyone's safety and welfare.
- The provider engaged closely and transparently with the local authority as part of their lessons learnt process to improve people's care planning and treatment pathways. Staff said they felt valued because the management team fully engaged with them as part of the team approach to ongoing service development.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The management team and staff collaborated with residents and their families to ensure a person-centred, inclusive environment to live in. They told us the provider regularly engaged with them, such as sending out satisfaction surveys. Regular resident meetings were chaired by those living at Derby Lodge, which one person commented gave "residents a voice. The home is well managed."
- People told us the registered manager and provider were visible and led the home well. Staff confirmed there was a team approach to care delivery and senior managers supported them in their roles. One employee stated, "It's definitely a supportive place to work, we get regular supervision and [the registered manager] is very approachable."

Working in partnership with others

- The registered manager understood positive treatment outcomes required a multi-disciplinary approach to care delivery. They developed good relationships with partner agencies, including community, hospital and mental health services.