

Enter and View report

The Lodge Trust

5th December 2017



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1 Introduction

1.1 Details of visit

Details of visit:	
Service Address	Main Street, Market Overton Oakham, Rutland LE15 7PL
Service Provider	Owner: The Lodge Trust CIO
Date and Time	5 December 2017 11:30 – 14:30
Authorised Representatives	Sarah Iveson, Daphne Murphy, Jacqui Darlington, Stevie Jackson.
Contact details	01572 720381

1.2 Acknowledgements

Healthwatch Rutland would like to thank the service provider, service users, visitors and staff for their contribution to the Enter and View programme.

1.3 Disclaimer

Please note that this report relates to findings observed on the specific date set out above. Our report is not a representative portrayal of the experiences of all service users and staff, only an account of what was observed and contributed at the time

2 What is Enter and View?

Part of the local Healthwatch programme is to carry out Enter and View visits. Local Healthwatch representatives carry out these visits to health and social care services to find out how they are being run and make recommendations where there are areas for improvement. The Health and Social Care Act allows local Healthwatch authorised representatives to observe service delivery and talk to service users, their families and carers on premises such as hospitals, residential





homes, GP practices, dental surgeries, optometrists and pharmacies. Enter and View visits can happen if people tell us there is a problem with a service but, equally, they can occur when services have a good reputation - so we can learn about and share examples of what they do well from the perspective of people who experience the service first hand.

Healthwatch Enter and Views are not intended to specifically identify safeguarding issues. However, if safeguarding concerns arise during a visit they are reported in accordance with Healthwatch safeguarding policies. If at any time an authorised representative observes anything that they feel uncomfortable about they need to inform their lead who will inform the service manager, ending the visit.

In addition, if any member of staff wishes to raise a safeguarding issue about their employer they will be directed to the CQC where they are protected by legislation if they raise a concern.

3 Purpose of Visit

- To observe how the facility operates and provides its services.
- To collect views of residents, staff and any visitors on how the services provided affect the quality of life of residents.
- To identify 'Best Practice' and highlight any areas of concern.

3.1 Strategic drivers

In late 2016, Healthwatch Rutland commenced a programme of visits to all Care Homes in Rutland to look at the quality of life of residents. The visit to The Lodge Trust on 5th December 2017 was part of this series of visits.

3.2 Methodology

Approximately two weeks before the Enter and View visit the Enter and View team leader met with the manager of The Lodge Trust. At that meeting the purpose of the visit was explained and agreement was reached about the timing of the Enter and View visit. A team from Healthwatch Rutland visited over a three-hour period starting at 11:30 on 5th December 2017.

The team stayed in areas accessible to all residents and staff. In addition to general observation we talked to residents and staff, using the framework prepared in advance of the series of care home visits.

Following the visit, a meeting had been arranged with the manager where key observations were shared.

3.3 Summary of findings

- a) Staff and residents gave very positive feedback on The Lodge Trust.
- b) Staff and residents value the local bus service.
- c) There are 2 driveways off the main road with no signage showing which driveway is for the Lodge and which for the café.
- d) We heard about a broad range of activities, both work based and educational that service users access.
- e) One service user found a sharp knife during lunchtime.
- f) The door frame leading from the outside into the conservatory caused difficulties for a resident in a wheelchair.
- g) We were told of excellent support from the Market Overton GP Surgery.
- h) We heard about problems accessing crisis mental health support.
- i) Staff were very happy with the training provided to them. However, management found it difficult to access 'Person Centered Planning' training.

3.4 Results of visit

The Lodge Trust CIO provides accommodation with personal care for adults with learning disabilities or Autistic Spectrum Disorder. There were 30 residents at the time of our visit and we were told that this is the maximum capacity at the moment. There is a waiting list of people who wish to move to The Lodge. Residents come from all over the country; at present only one resident is originally from Rutland. In addition to the 30 residents, approximately 11 other people access work and education services and opportunities on a daily basis. The Lodge Trust is a Christian charity and people who used the service are expected to follow a Christian lifestyle. Staff told us that it didn't matter if staff were practicing Christians or not.

Approach/Exterior



The Lodge Trust is situated on the edge of the village of Market Overton. There is a bus that runs to Melton Mowbray and Oakham every 2 hours until 6pm. We were told by staff and residents that they highly value this service. This allows staff who don't drive to work at The Lodge and residents to travel more independently. We were told by staff that the usual bus drivers are very helpful to residents using the service, and that this made the residents feel safe travelling on the bus.



There are 2 driveways from the main road, and it is not clear to us which one is for the café area and which for The Lodge (although once through the larger of the two driveways a sign for the café can be seen). The main reception is clearly signposted from the large level car parking area. There are disabled parking slots marked. We were greeted by the receptionist, but were not asked to sign in and did not see a visitor's book. The team were made to feel very welcome. We did not see information about our visit, but noted that the last CQC inspection was posted on the noticeboard along with a H&S notice, the values of the Trust and an Investors in People certificate.

Layout and general environment

The service is set in four acres of land and there is also a country park, café and caravan park which are open to the public. For residents, there are four houses and thirteen flats. There was also a range of communal building for residents and people who access the service on a daily basis, such as a communal hall, conservatory and workshops for work and education activities.



There is a lot of open, green space between the buildings on the complex. Outside areas appeared well tended, and paths were level and wheelchair accessible.

As the flats and cottages are private accommodation for residents, and we were not invited by residents to view them, the team remained in communal areas such as the dining room, conservatory, workshops and café. All

the communal areas we visited appeared well maintained, and we were told by staff that there is a constant programme for upgrading facilities.

The dining room has a large conservatory attached, with comfy chairs. This area is used by residents for coffee and tea after lunch. We noticed that one wheelchair user had difficulty getting through the entrance to the conservatory from outside due to a lip in the doorway. We were told by staff that there are a couple of areas where doors have a 'lip' that is difficult for wheelchair users to access without help.

Activities

Service users at The Lodge undertake work and education activities every day. We were told that these include woodwork, arts and crafts, cooking, literacy skills and gardening. The residents all told us that they enjoyed these activities and we were



told by a couple of residents that they especially enjoyed gardening; one resident was very keen to tell us that he uses the ride on mower to cut the grass and another that he enjoyed digging. Other residents told us they enjoyed working in the café.

We were told by staff that service users make products such as jams during cookery and decorative items in woodwork that are then sold in the café. We visited the woodwork shop and saw some of the items that are in production for sale. Service users told us that they liked working with the staff and volunteers that support these activities. Staff also told us that the food grown on site was used in meals made at the site.

Residents were very keen to tell us that they were very excited about going out together for a Christmas meal that evening at Wetherspoons in Oakham. They also told us about a recent trip to see Christmas Trees in Melton.

One resident told us that he goes, by bus with a staff member, into Oakham every Saturday to do his shopping and visit the bank. He told us he likes going on the bus and “buying things I like, like cakes.”

Staff told us that service users access activities off site frequently. This includes attending Church services in Melton (Welby Lane), Stamford (St George’s) and Market Overton (Free Church) on Sundays. Staff told us that service users were welcomed as members of the congregation in these churches. One resident told us he enjoyed singing hymns. Management told us they were aware of the Keep Safe scheme in Rutland, however, she was unaware of the ‘Keep Safe Places’ and the ‘Better Journey Cards’. Details of where and from whom the cards could be obtained were shared by the Team. Staff told us that it was important that residents felt that they are part of their local community, and said that this was evident in how local businesses (including the pub in Market Overton) welcomed residents when they accessed local facilities.



The café is open to the public, and staffed by staff, volunteers and service users. The café is open 6 days a week and sells a range of meals, hot drinks, cakes etc. Staff told us that some of the food is prepared on site by staff, volunteers and service users and some is bought in. A number of residents told us how much they enjoyed working in the café. The café includes book shelves selling items made by



service users. Management told us that, although the café was developed primarily to provide opportunities for service users, they were delighted that it was being used enough by the public to pay for itself.

A resident told us that they enjoyed swimming in Melton. Another resident told us about attending college courses at Ashwell including an 'Understanding our World Course'.



Staff told us that activities are work and education based and are intended to give service users as much independence and quality of life as possible. We were told that all residents are risk assessed as to how much they can do on their own, and how much they require support. This ranges from some residents travelling independently on the local bus, to others that require 1:1 support all the time.

Residents/families

We were told that families and friends visit often although some live a distance from Rutland. Families also keep in regular contact with The Lodge by phone and/or email and The Lodge produces newsletter for them. Staff told us that families often use the log cabins and caravan site to stay and spend time with their relative living at The Lodge Trust. Staff told us that most families attend the Christmas Carol Service and the Summer Sale. One resident told us that he was going to visit and stay with his family over Christmas. The manager told us that she sent out a letter from Healthwatch Rutland to families, describing our visit and giving them the opportunity to contact us to feedback on the service. However, we have not heard from any and did not meet any visitors during the time we were at The Lodge. The manager told us that there is a family survey conducted once a year.

Volunteers visit residents at The Lodge. These include people who meet residents through the Churches they attend.

The manager told us that she runs a monthly Residents' Forum, called 'Our Voice', for residents to be able to share any concerns they might have. This includes discussions on work and educational activities. Management told us that they are hoping to encourage residents to have more of a say in the governance of the organisation, with potentially a resident representative attending the Management Committee Meeting.



The manager told us that residents' safety is paramount, but at present they do not have any resident who is at risk of wandering off site. However, they do have CCTV fitted in residential areas. This is motion activated in communal areas. It alerts over-night staff that someone is up and around at night. It allows staff to ensure that residents are safe and not in need of help, whilst allowing for the residents to be more independent than if alarms were used and every time they chose to get up a member of staff checked on them.

All the residents we spoke to told us how happy they were living at The Lodge Trust. One resident said he liked living there as he had so many friends. Residents told us that they felt safe and one resident laughed and said, "of course I do!" One resident told us "Even though we are all different, we are a family."

Meals

Staff told us that residents prepare breakfast and supper in their flats or cottages with the support of staff. Depending on a risk assessment, some residents may have their own kettle and microwave for preparing food, others require support to prepare any meal or drink.

Lunch is cooked on the premises in the café, some ingredients of which are grown onsite by service users. The nutritionist told us that she plans a 3-week menu for lunches which is agreed by service users (once they have been assessed as able to participate by Speech and Language as part of their Care Plan). There is only one choice per day of hot main course, but we saw a copy of the menu which included substitutions for side dishes to allow for service user's preferences. We were told that special diets (such as diabetic) were catered for. Lunch also included a hot dessert.

We observed lunch being served and eaten on the day of our visit. The food was served canteen style and service users chose where they sat at pre-laid tables in the dining room. We observed staff eating with service users and supporting them when required; there was always at least one member of staff circulating to see if anyone needed assistance. One resident didn't want to eat lunch, but we heard a member of staff gently encouraging her to eat, as this was important due to the resident having diabetes. Her meal was kept warm for her until she was convinced to have it. One resident had found a very sharp knife to cut up an apple, which a member of staff said should not happen unsupervised. There was a buzz of conversation during the meal. When service users had finished eating, they retired to the conservatory for tea, coffee and a chat before departing for afternoon activities.

Service users told us they enjoyed the food at The Lodge, and that menus were discussed with them. One resident told us that he would prefer fish and chips every day.





We observed service users clearing tables after lunch and helping with the washing up. A resident told us that he liked this job. Staff told us that this type of activity is part of giving service users independence and a sense of responsibility for their environment. These household tasks also include encouragement to do their own laundry using the washing machines provided in their accommodation.

Medical/care

Primary medical care is provided by Market Overton Surgery. All residents are registered with the practice and staff praised the service that residents receive from the doctor that supports them. The manager told us that it is very important that residents see the same doctor, as he has built up an excellent rapport with residents and contacts families directly to keep them involved. Staff told us that they could not praise the doctor highly enough and that he went “above and beyond” what they would expect in terms of supporting their residents. This was particularly welcome at the moment as one resident is receiving end of life care.

We were told that Community Nurses were organised through the GP and that the service received from them was good.

Dental services are provided by a specialist service in Melton Mowbray which is commissioned to provide services for adults with Learning Disabilities. Staff told us that the service was good and that residents didn’t mind attending the practice. One resident told us she had visited the dentist that day and said ““Dentist in hospital is very nice there and took my teddy with me.”

Staff told us of issues accessing mental health support when one of their residents had a mental health crisis out of hours. They access support via the Agnes Unit in Leicester but cannot access a psychologist out of hours. We were also told that changes to medication, and the impact that might have on the patient was not shared with carers.

Management told us that there were no issues with the provision of specialist equipment. However, we were told that additional equipment is purchased by The Lodge charity, so that residents have the best equipment available and do not always rely on statutory services.

We were told by management that some residents were under a DoLS (Deprivation of Liberty Safeguards). Some residents had independent advocates assigned to them, however this could be a complex situation as the resident would be provided advocacy services from the Local Authority (LA) from which they came which may be a great distance from Rutland. The manager was aware of at least one situation when a LA had arranged for advocacy more locally and had contracted Age UK Leicester to act for the resident.

Staff told us that each person had a care plan and that the care plans for each individual resident are read even though the resident may not need any support.

This ensures that staff and volunteers are aware of anything that may induce behaviour changes.

Staff

All the staff we met were welcoming and friendly. We observed them engaged with service users all the time, with many smiles and much laughter. Residents told us that if they needed anything they asked staff. One resident described the staff as “Brilliant”. Staff told us that the best thing about working at the Lodge Trust was working with service users and being able to help them have a good quality of life. We were also told that staff valued being part of a caring community that provided a home for life for the residents.

The manager told us that there are currently 72 members of staff (13 of whom are part time). This allows a very high staff to service user ratio, but is needed to allow for 1:1 support when necessary, and to enable service users to access so many work and education opportunities both at The Lodge and in the community.

We were told that there is a Training Manager employed by The Lodge and that they are proud of the range of training that is available to staff. Staff commented that there is less training available from sources such as the Local Authority (LA) than in previous years, so The Lodge’s Training Manager is ‘Train the Trainer’ qualified, to enable her to attend courses and pass this knowledge onto other staff. The Lodge would find training on ‘Person Centered Planning’ useful, but they had been unable to access any. We were told that the service would value shared training with other Rutland Care homes and service providers and hoped that the LA organised Rutland Provider Forum might be able to facilitate this.

Staff told us that they had annual training in Care Plans, Risk Assessments, Non-Aggressive Physical Intervention. We were also told about additional training in Autism, First Aid, End of Life, Mental Health and Mental Capacity.

One staff member was asked about a Whistleblowing Policy and we were told there was a policy available to all staff through the CMS IT system. Other members of staff told us that they were confident that they could raise any issues, and be heard, by management and the Trustees.



3.5 Recommendations

- Consideration be given to improving the signage from the Main Road, to make it clear which of 2 entrances is for the park and café, and which for The Lodge itself.
- Procedures to ensure that service users can't access very sharp implements in the kitchen without supervision (if it is required) are reviewed.
- Consideration be given to changing the 'lip' in the doorway into the conservatory (and the other areas which were mentioned to us) so that wheelchair users can use the entrance without help.
- Healthwatch Rutland will:
 - Feedback to Rutland County Council how valued the local bus service is.
 - Feedback to Market Overton Surgery on the positive feedback on their service.
 - Investigate out of hours mental health crisis response support available to The Lodge and pass on any information found to the home.
 - Liaise with Rutland County Council to see if they can source 'Person Centred Planning' training for The Lodge and potentially other Rutland care homes.

3.6 Response from Service Provider

We are very grateful for your observations and comments which we will give due consideration to.

- The signage on our large site is something we are always reviewing. Thank you for your helpful comments.
- Signing in as a visitor happens electronically by our receptionist and visitors may not always be aware that their visit is logged for Health and Safety reasons. However, you should have been advised to report back to Reception before leaving the premises. We shall review our procedures accordingly. Thank you for your helpful comments.
- We assure you that procedures are in place to prevent some Service Users accessing sharp implements as appropriate to the risk assessments in place. However, we shall review these procedures following this report and implement new safeguards as appropriate.
- The 'lip' at the doorway of the conservatory tends to grow gradually during the winter months and this will be corrected as soon as Spring arrives. Thank you for bringing it to our attention.

