

We are the regulator: Our job is to check whether hospitals, care homes and care services are meeting essential standards.

Devon Lodge Residential Home

18 Theydon Avenue, Woburn Sands, Milton
Keynes, MK17 8PL

Tel: 01908281470

Date of Inspection: 03 January 2013

We inspected the following standards as part of a routine inspection. This is what we found:

Respecting and involving people who use services	✓	Met this standard
Care and welfare of people who use services	✓	Met this standard
Safeguarding people who use services from abuse	✓	Met this standard
Supporting workers	✓	Met this standard
Assessing and monitoring the quality of service provision	✓	Met this standard

Details about this location

Registered Provider	Amberley Health Care Limited
Registered Manager	Mrs. Elizabeth Fellows
Overview of the service	<p>Devon Lodge is a residential care home providing residential care for up to 26 older people. The service is owned and managed by Amberley Health Care Limited.</p> <p>Further information about the service can be obtained direct from the provider.</p>
Type of service	Care home service without nursing
Regulated activity	Accommodation for persons who require nursing or personal care

When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.

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Summary of this inspection

Why we carried out this inspection

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

How we carried out this inspection

We carried out a visit on 3 January 2013, observed how people were being cared for, checked how people were cared for at each stage of their treatment and care and talked with people who use the service. We talked with staff.

What people told us and what we found

We spoke with six people who used the service and they all confirmed that they liked living at Devon Lodge Residential Home. The comments we received from people were very complimentary of the staff and of the quality of the service they received. For example one person said, "I really do love it here; I don't think there is any other care home that could match the level of care I receive here". Another person said "The staff are terrific; they really do care and are always willing to go that extra mile".

We saw that the staff related well with people who used the service, they worked at a relaxed pace and their interactions with people demonstrated that they valued and promoted the involvement of all people who used the service.

We found a schedule of daily activities was provided and that people were positively encouraged to engage in one to one and group activities. This meant that each person had the opportunities to participate in various activities and receive the support and encouragement they needed to lead fulfilling lives.

You can see our judgements on the front page of this report.

More information about the provider

Please see our website www.cqc.org.uk for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

Our judgements for each standard inspected

Respecting and involving people who use services ✓ Met this standard

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

Our judgement

The provider was meeting this standard.

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care.

Reasons for our judgement

People's views and experiences were taken into account in the way the service was provided and delivered in relation to their care. We spoke with six people who used the service their comments were complimentary of the service they received. For example, "I really do love it here; I don't think there is any other home that could match the level of care I receive here". "This is my home, my family can visit me whenever they want, day or night and they are always made welcome". "The staff are terrific; they really do care and always go that extra mile"

People told us they were able to make their own decisions, such as when to get up, go to bed, choice of meals and how they wished to spend their time. They told us that the staff listened to what they had to say and respected their wishes.

We found that resident meetings took place regularly and annual quality surveys were carried out to seek the views of people who used the service and their relatives. We looked at completed questionnaires from a recent survey, which showed that people were very pleased with the quality of the service they received and all comments entered onto the surveys by people and their relatives were complimentary of the service.

We looked at the care records for two people and found they had agreed the content of their plan of care. We found the care records contained information such as the person's past occupations, hobbies and interests and recorded personal preferences, for example, foods and drinks enjoyed or disliked. Records showed that people's care was regularly reviewed and discussed with them. We also saw that close relatives were also involved in decisions about people's care.

We saw that the staff worked at a relaxed pace and we were heard them speak politely and respectfully with people, calling people by their preferred name.

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

Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

Reasons for our judgement

Care and treatment was planned and delivered in a way that ensured people's safety and welfare. We looked at the care records for two people who used the service. We found that people's care assessments contained the information and guidance the care staff needed to know to do their job safely and effectively.

We found that people's specific health conditions were closely monitored; for example, people at risk of not eating or drinking sufficient amounts had their food and fluids recorded and we saw that other healthcare professionals had also been involved in their care.

People's needs were assessed and their care and treatment was planned and delivered in line with their individual care plan. We found the care plans identified people's health and social care needs. There was written information and guidance available for staff to deliver the right care and support to do their job safely and effectively.

We found the staff closely monitored people's food and fluid intake and people who were frail and cared for in bed had appropriate pressure relieving equipment in use. We found that people had regular access to support and treatment from other healthcare professionals. For example the community nurse, optical, dental and podiatry services.

We found that risk assessments had been carried out that identified areas of personal risk, and risks to others. We saw that people were provided with appropriate aids, adaptations and equipment, to support their mobility and maintain their independence. We observed staff using appropriate moving and handling techniques when assisting people to move.

We found that one to one and group activities were regularly provided and saw that records were kept when people had engaged in activities. On the day of our visit an outside entertainer visited the service and we observed a small group of people engaged in an activity of armchair exercises to music, and reminiscence through general discussion.

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

Our judgement

The provider was meeting this standard.

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

Reasons for our judgement

We found that staff had received training on the protection of vulnerable adults procedures as part of their induction training and they received regular safeguarding updated training. We also found that there were clear written safeguarding policies and procedures put in place to guide staff on how to report any abuse.

One person said "I feel very safe; I've never had any reason to feel otherwise. If I had any concerns I would speak to staff and I am confident they would address the problem".

The staff we spoke with told us that they knew what to do if abuse was suspected or alleged. They were able to tell us about the safeguarding reporting procedures that they would follow if they had any concerns about people's safety or wellbeing.

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

Our judgement

The provider was meeting this standard.

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

Reasons for our judgement

Staff received appropriate professional development. We found that mandatory and vocational training was provided for staff. The staff we spoke with told us they received the necessary training in order for them to do their job safely.

We looked at records of staff training that included manual handling, health and safety, food hygiene, fire safety, basic first aid, safeguarding vulnerable adults and dementia care.

We found that senior staff received appropriate training to meet their job requirements and one to one supervision was provided for all staff. All of the staff we spoke with confirmed they were supported by the registered manager and told us they had opportunities to meet with their supervisor on a one to one basis and also to meet as a team.

We found that all staff received annual appraisals of their performance and staff were encouraged to undertake further training such as a National Vocational Qualifications

All of the staff we spoke with told us they enjoyed working at Devon Lodge; they told us they felt supported by the registered manager and the staff team and there were good training opportunities. One member of staff said "there is a lovely kind atmosphere here; I knew as soon as I came here it was a home that really cared about the people".

We saw records of the minutes of staff team meetings that showed that people's care needs were discussed and other matters in relation to health and safety. We observed during our visit that the staff acted professionally at all times.

Assessing and monitoring the quality of service provision

✓ Met this standard

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

Our judgement

The provider was meeting this standard.

The provider had an effective system to regularly assess and monitor the quality of service that people receive.

Reasons for our judgement

People who used the service, their representatives, and staff were asked for their views about their care and they were acted on. We found that people were involved in identifying improvements to the service through attendance at resident meetings and completing annual quality assurance surveys.

We found there was a quality monitoring programme in place, which included regular checks on people's care plans, risk assessments, the medication systems, accidents and incidents.

We found that daily report records were kept up to date throughout the day by the staff members on duty. The records gave details of the support that was provided for people during their shift. The registered manager informed us that on each shift a 'staff handover' period took place where information about the changing needs of people who used the service was verbally communicated between the staff team.

About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social 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 essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of dentists and other services at least once every two years. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times but we always inspect at least one standard from each of the five key areas every year. We may check fewer key areas in the case of dentists and some other services.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

✓ Met this standard This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

✗ Action needed This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

✗ Enforcement action taken If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. We make a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation) from the breach. This could be a minor, moderate or major impact.

Minor impact – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

Moderate impact – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

Major impact – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

Glossary of terms we use in this report

Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

Glossary of terms we use in this report (continued)

(Registered) Provider

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

Regulations

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

Responsive inspection

This is carried out at any time in relation to identified concerns.

Routine inspection

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

Themed inspection

This is targeted to look at specific standards, sectors or types of care.

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