

Melba Lodge Limited

# Melba Lodge Limited - 67 Brewery Road

## 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

This inspection took place on 13 May 2015 and was unannounced.

Melba Lodge also known as 67 Brewery Road is a residential care home that provides accommodation and support for up to four people with mental health needs. One person was using the service at the time of our visit.

This was the first inspection of the service since the home was registered with CQC in July 2013. The service was run

and managed alongside the other home operated by the same provider (Melba Lodge also known as 16 Heverham Road) located nearby using the same staff team, management structure and organisational procedures.

There was a registered manager in post at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered

# Summary of findings

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.

A person using the service told us that they were happy with the care provided and said they felt safe living at Melba Lodge. They said there were enough staff available to support them and that the staff were kind and caring.

The person's relatives were positive about the service being provided and said they could visit at any time. There was a relaxed and homely atmosphere when we visited.

We saw there were systems and processes to protect people from the risk of harm and staff were aware of safeguarding procedures. Appropriate recruitment checks took place before staff started work.

The service understood and complied with the requirements of the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS). There were no restrictions on the person using the service and they confirmed they were able to go out when they wanted.

There was a system in place for dealing with people's concerns and complaints. The person and their relative or carer told us that they knew how to complain and felt confident that staff would respond and take the appropriate action.

The registered manager understood their role and responsibilities and positive feedback was received from people and staff about their leadership. There were effective systems in place to ensure the safety and quality of the service provided.

# 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 enough staff to meet people's needs and to ensure their safety and welfare.

Identified risks to individual safety and welfare were being managed appropriately.

Medicines were being stored securely and managed safely.

Appropriate recruitment policies were in place

Good



### Is the service effective?

The service was effective. The registered manager ensured staff were up to date with their training requirements and had the knowledge and skills to meet people's needs.

People were able to choose what they wished to eat and drink. Staff supported them to prepare and cook their meals.

The service complied with the requirements of the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS).

Staff supported people to access healthcare services to help make sure their physical and mental health needs were met.

Good



### Is the service caring?

The service was caring. Staff worked to ensure the privacy and dignity of people using the service.

People made decisions about the care and support they received. Staff provided support in line with their wishes.

Good



### Is the service responsive?

The service was responsive. Staff were knowledgeable about people's care and support needs. They were supported to lead an active life and to maintain contact with people who were important to them.

People and their relatives or carers felt able to raise concerns or complaints and knew how to do this.

Good



### Is the service well-led?

The service was well-led. There was a registered manager in post who was visible and approachable.

There were systems in place to monitor the quality of the service and make improvements where needed.

Good



# Melba Lodge Limited - 67 Brewery Road

## 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 checked 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.

Before the inspection we looked at all the information we had about the service. This information included the statutory notifications that the provider had sent to CQC. A notification is information about important events which the service is required to send us by.

This inspection took place on 13 May 2015 and was unannounced. One inspector conducted the inspection as there was only one person living at the home.

During our inspection we spoke with a person using the service, one member of care staff and the registered manager. We looked at the care records and at other records that related to how the home was managed.

We received feedback from the relatives and carers of a person using the service by telephone following our unannounced inspection.

# Is the service safe?

## Our findings

A person using the service told us that they liked living at Melba Lodge, felt safe there, and that the staff treated them well. Their relative or carer commented that they were very happy with the support provided and that the home was kept “lovely and clean”.

There were sufficient staff available to meet individual needs. A person said there were staff available to support them when they required it. The service was staffed 24 hours a day, seven days a week with one staff member on duty on the day of our visit with the registered manager available to support them as required.

Records showed that staff completed safeguarding training and staff said they were confident that the registered manager would respond appropriately to any raised concerns. They were aware of the different types of abuse along with the action to be taken to report any concerns. The home had an up to date safeguarding policy available for reference that detailed the information and action staff should take. The registered manager confirmed that there had been no safeguarding issues in the last 12 months.

One person’s care plan included assessments of any risks associated with people’s care, daily routines and activities. This person told us that they were able to be independent

and could participate in activities in and outside of the home environment. A written risk assessment was completed they had signed to show their agreement with the content.

The home had effective procedures for reporting and investigating accidents and incidents. Incident or accident reports documented the action taken by staff, a review of what took place and any underlying causes and the amendments required to people’s risk assessments and care plans. The registered manager reviewed and signed off each completed report.

Medicines were stored securely and records showed that people were supported to take their medicines as prescribed. The administration charts we looked at were fully completed and there were procedures for staff to reference and follow.

The home was maintained well and clean. One person told us they were happy with their room and were pleased they had access to Wi-Fi. We saw staff undertook regular health and safety checks to make sure a safe and suitable environment was provided. Weekly management audits took place to make sure these important safety checks were taking place.

Appropriate recruitment checks took place before staff started work. Three staff files seen included pre-employment checks with previous employers and a satisfactory criminal records check.

# Is the service effective?

## Our findings

A person using the service said they were able to be independent and were being supported to learn activities such as cooking for themselves.

The registered manager told us that this service was not a home for life with the emphasis placed on quality of life, building confidence and independence. The staff member told us about the aims of the service saying, “They come and we move them along. We pro-actively teach them and help them gain self-confidence.”

Staff had the skills and knowledge to support people effectively. Records showed that staff had undertaken training across a number of areas including safeguarding adults, health and safety, medication and food hygiene. Staff also received training in topics specific to the needs of people using the service, for example, around autism, learning disabilities and mental health.

Staff were supported effectively in their job role. The registered manager undertook six weekly supervision sessions with staff to review how they were getting on in their job role and look at any training needs to help ensure the quality of care and support provided.

Staff also received training in the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS). The MCA is a law about making decisions and what to do when people cannot make some decisions for themselves. The DoLS protect people when they are being cared for or treated in ways that deprive them of their liberty. Staff told us that a person using the service had capacity and retained choice and control over what they did each day.

A person told us they were involved in choosing their meals and were able to participate in shopping and meal preparation. The menus were planned on a weekly basis with people choosing the main meals they preferred. The care plans recorded information about the person’s food and drink preferences along with any special dietary needs.

Records showed people were supported to access their GP and other healthcare professionals. Individual health needs were included in care plans to ensure people received the support they required to have their needs met. For example, records showed that advice had been obtained from an involved health professional that was being used to help make sure effective support was being provided to one person.

# Is the service caring?

## Our findings

A relative or carer told us that they had confidence in the service and felt that they were doing a good job. They felt reassured that their loved one was being well cared for and referred to staff as being 'very friendly' when they visited.

A person using the service said they were happy with the support provided at Melba Lodge. They said staff encouraged and supported them to make decisions and be in control of their daily lives. We saw that staff respected people's privacy and knocked on people's doors. Staff made sure they had permission before entering their room.

The staff member we spoke with had a good knowledge of the people's needs and told us they had read the care plans for them. They talked about one person's individual needs and how they supported them providing assistance and encouragement when required. For example, when supporting the person to go to college or the gym. Throughout our visit, we observed the staff member giving

the person information about what was happening that day and encouraging them to participate. The staff member said, "We try to guide people and give them advice."

People had signed their risk assessment and care plan to indicate they agreed with the support provided to them. Comments in people's own words were added to each care plan giving their view of the support they wanted. We saw examples where a person had shared their personal preferences as to how they spent their time and daily notes confirmed that they were receiving support to do the things they enjoyed.

Regular meetings were held across both services run by the organisation to obtain the views of people using the service. The meetings were used to discuss the planning of outings, parties and to make sure people were satisfied with the support provided. We saw that a person had recently celebrated their Birthday and a party had been held in their honour with their relatives and friends invited.

# Is the service responsive?

## Our findings

People had their own timetable of activities including further education classes along with activities of daily living such as meal preparation and laundry. One person told us they were able to access the local amenities freely and said the home organised an activity each week for them on a Friday.

One staff member told us “They go out for shopping, to the gym and for trips each week.” Daily notes seen included references to a person going out, seeing relatives and friends and the encouragement given with daily activities and personal care tasks.

People had up to date care plans addressing areas such as their mental and physical health. This included the support required for the person and the goals set with them. Staff spoken with were aware of the content of care plans and said up to date information was also shared at the daily

handovers and in staff meetings. Records showed that people and their relatives or carers had been involved in placement reviews and information was provided to commissioners about the progress of their client.

Information about the complaints procedure was included in a guide about the home and in the induction when someone first came to use the service. A person told us that they were felt comfortable in raising any issues or concerns. They said that the registered manager and staff would listen to them and take action.

A complaints and suggestions policy was in place and this included templates for people to make any concerns or comments known to the service. We saw that no complaints had been made in the last 12 months.

People using the service were supported to maintain contact with relatives and friends. One person told us they saw their relatives regularly each week. Relatives said they were able to visit the service and were made to feel welcome. Visitors were encouraged to leave feedback after each visit and recent comments included, “We were made very welcome” and “Atmosphere warm and friendly.”

# Is the service well-led?

## Our findings

One person using the service was positive about the registered manager and staff team. A relative or carer said they felt able to speak to the manager and staff if they wanted information or had any issues or concerns.

The registered manager communicated a strong person centred ethos throughout our inspection of the home. We saw that she was in regular contact with people, visitors and staff and demonstrated her in-depth knowledge of the service. The staff we spoke with said the registered manager was available when they needed her and that she supported them to improve their skills and knowledge.

Regular staff meetings were held that enabled staff to discuss issues and keep up to date with current practice. Minutes from previous team meetings included discussion around people using the service and discussion of particular areas such as safeguarding, medicines or health and safety. Staff said the team worked well together and they felt supported by their colleagues.

The provider had a system to get feedback from people using the service in both homes run by the organisation. People were regularly asked about what they thought of the quality of care and the support they received. Their views were sought through regular meetings and through

questionnaires that were supplied regularly to people using the service, relatives or carers and other professionals. A book and suggestions box were also used to capture feedback from people and their visitors.

The home also had systems to regularly check the quality of the service provided and make sure any necessary improvements were made. For example, regular checks were carried out on the medicines to make sure staff were following the correct procedures and people were receiving their medicines as prescribed. The building was regularly checked to make sure that it was safe and well-maintained and individual financial records audited to ensure they were accurate. We saw action was taken where any issues or shortfalls had been identified.

The registered manager subscribed to professional publications and websites in order to help ensure their practice was up to date. Staff were being provided with training around new care legislation and the registered manager continued to attend training courses to develop their own knowledge.

Certificates showed that staff had signed up to the Social Care Commitment where they had made a pledge to continually strive to deliver high quality care. This is the sector's promise to provide people who need care and support with high quality services.