

# The Lantern Community

# Four Meadows

## 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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### About the service

Four Meadows is provided by The Lantern Community and is a supported living service providing personal care to 23 people at the time of the inspection. This service provides care and support to people living in 6 'supported living' settings, so that they can live in their own home as independently as possible. People's care and housing are provided under separate contractual agreements. People shared their homes with volunteer support workers called co-workers. CQC does not regulate premises used for supported living; CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided.

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

#### Right Support:

People and relatives told us how they or their family member could choose how they wanted to live and received the support they needed to do this. Staff encouraged and supported people's choice and independence.

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.

People were encouraged and supported to maintain a healthy lifestyle and supported to enjoy a wide variety of hobbies and interests which maintained their sense of well-being.

Risks were well managed with the least possible restriction and people were well supported to maintain and develop an independent lifestyle and lead active lives.

#### Right Care:

Care and support were provided according to people's individual needs and wishes. Staff ensured people's privacy and dignity were respected. People felt safe with staff and enjoyed spending time with staff who they knew well. Staff had a good understanding of people's care needs and ensured care and support was personalised.

Risk assessments provided up to date guidance and information for staff. They gave clear information for how staff could ensure people made informed choices and lived their best lives.

Staff had training on how to recognise and report potential abuse. There were enough staff on each shift to ensure people were supported safely. Staff received a robust induction and completed specialist training, to ensure their knowledge remained current.

#### Right Culture:

People, relatives and staff had confidence in the leadership of the service and felt it was well-led. The registered manager and provider-maintained oversight of the service through regular conversations with people, relatives and staff as well as through a programme of quality assurance audits to ensure the service was working to the provider's policies and procedures.

The provider's monitoring processes were effective in helping to ensure people consistently received good quality care and support. Staff and volunteers knew and understood people well and were responsive to their needs. People and those important to them were involved in planning their care.

The registered manager demonstrated joint working with health professionals which provided specialist support to people, involving their families and other professionals as appropriate. Staff demonstrated good understanding around providing people with person centred care and spoke knowledgeably about how people preferred their care and support to be given.

People, relatives and staff felt confident in raising any concerns with the registered manager and told us any concerns would be listened to and acted upon.

Staff and relatives spoke of an open, supportive and friendly culture within the service, that placed people and their needs at the heart of the service.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Rating at last inspection

The last rating for this service was good (published 7 March 2018).

#### Why we inspected

This inspection was prompted by a review of the information we held about this service. As a result we undertook a focused inspection to review the key questions of safe and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for this service has remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Four Meadows on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

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

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### **Is the service safe?**

**Good** ●

The service was safe.

Details are in our safe findings below.

### **Is the service well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Four Meadows

## 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 Health and Social Care Act 2008.

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

This service provides care and support to people living in 6 'supported living' settings, so they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

#### Registered Manager

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

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to make sure there would be people at home to speak with us.

Inspection activity started on 27 January 2023 and ended on 1 February 2023. We visited the service on 27 and 31 January 2023.

### What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We also sought feedback from the local authority. We used all this information to plan our inspection.

### During the inspection

We spoke with 8 people living at Four Meadows, and 3 relatives about their experience of the support provided. We spoke with 9 members of staff including the registered manager, the HR manager and HR administrator, 4 care members of staff, the estates and maintenance manager, and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. These included 3 people's care records, 3 people's medication records, and 3 staff files in relation to recruitment, training and supervision. We also reviewed a variety of records relating to the management of the service, including staffing rotas, premises management records, policies, procedures and quality assurance records.

# 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 were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff understood how to recognise the different types of abuse and spoke knowledgeably about how to report concerns.
- People told us they felt safe and comfortable with staff, they told us they enjoyed living with their housemates. One person told us, "I like living here. I'm happy that's the main thing." A relative told us, "We are very lucky [person] lives there, they are absolutely safe.[Person] is very happy there."
- There was a safeguarding and whistleblowing policy that gave staff clear guidance to follow in the event they needed to refer any concerns to the local authority.

Assessing risk, safety monitoring and management

- Risks to people and the service were managed so that people were protected and their wishes supported and respected. People and their families were involved and included in their risk assessments. Risk assessments were current and ensured a reduced risk of harm with the least possible restriction to people's independence.
- People received their care and support in accordance with their individual risk plans, this meant risks to people were reduced.
- Staff demonstrated good knowledge on how people preferred their care and support to be given to ensure they were supported as they wished.
- There were systems in place to ensure the premises were maintained safely. People had personalised emergency evacuation plans which helped ensure a safe evacuation from the premises in an emergency such as a fire.

Staffing and recruitment

- There were adequate numbers of staff on each shift to ensure people were supported safely. Staff knew people very well and consistent bank staff were employed to ensure continuity of care. People and their relatives told us there were enough suitably trained staff available at all times.
- Staff had the skills to support people safely and effectively. A relative told us, "They have been absolutely fantastic. They have been so supportive, for me as well as [person], they've been brilliant. They have enough staff and they all know [person] well. The Pandemic made things different, we are getting back to a new normal. There are always staff around if I need them."
- A person told us, "I like all the staff, they look after me well." Another person said, "There are enough staff, it's all good I have no complaints."
- Staffing rotas correctly reflected the levels of staff on duty during our inspection visit. Annual leave or staff sickness was covered by existing staff and the use of bank staff.

- The provider had a robust recruitment process to ensure staff were suitable to work with adults in a care setting. This included obtaining a staff member's full employment history with reason for leaving previous jobs, checking and verifying references and Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

#### Using medicines safely

- Medicines were safely managed, stored and administered. People received their medicines when they needed them. Regular medicine audits were completed.
- One person told us, "They look after me well. They do my tablets for me. I have 4 pills a day and they get them ready for me." Another person said, "They help me with my medicines, they get it all ok."
- There were protocols in place for administering PRN (as required) medicine and staff spoke knowledgeably about administering these medicines.
- Staff who administered medicines had received up to date medicine training and had their competency checked.

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 MCA 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 Mental Capacity Act (MCA).

- We found the service was working within the principles of the MCA

#### Preventing and controlling infection; Learning lessons when things go wrong

- The provider had a current infection prevention and control policy and kept up to date with current government guidance for the management of COVID-19.
- Staff received training in infection prevention and control and spoke knowledgeably about the risks of cross contamination.
- Supplies of personal protective equipment were readily available for staff, when required.
- There was a clear procedure in place for reporting and recording accidents and incidents. The registered manager reviewed accidents and incidents which allowed for emerging trends or patterns to be highlighted. This ensured incidents were responded to appropriately.
- Where appropriate, the learning from these events was shared with staff at team meetings, handovers and supervision sessions.



# 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 good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; and how the provider understands and acts on duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- People, relatives and staff told us they felt the service was well-led, with a clear management structure in place. One relative told us, "Their strengths are the friendship and patience they show everyone. They try to bring everyone together and do lots of activities. On a whole having a good friendship base with likeminded people works well." Another relative commented, "[Person] seems happy and is looking better than they did a few months ago. They [staff] are really good about following up on health issues. They are great at getting straight back to me and include me if anything major."
- People, staff and relatives spoke of the open and honest management style and told us they felt well supported. Comments from staff included, "It's a really, really nice place to work, I really enjoy it. If I was worried or had any problems there is always someone to help. I feel confident they would listen and help if I needed support", "I feel supported, when I arrived here I had so much help, everyone was very helpful. There is always someone available for help" and, " They are good at creating a community. It plays a big part and brings people together. People feel like part of the community. Communication is good. I don't have any concerns."
- Staff felt valued and told us communication was good. A member of staff told us, "I'm really very happy here. I'm just getting used to the culture, it's all so welcoming, I'm really enjoying it."
- We asked relatives what they thought the service did well, a relative told us, "I think adapting what they do to people's individual needs... It's very flexible and feeling being part of a household is important." Another relative said, "They are really good with any health concerns. They are straight on to the doctor and get appointments and treatment. They really do listen when appropriate."
- The provider and registered manager understood their responsibilities to be open and transparent with people and their families. The registered manager understood and exercised their duty of candour, being open and honest with people and their families in the event of something going wrong or a near miss.

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

- Staff were confident in the quality of care, support and guidance they were able to offer people which gave a strong focus on person centred, individualised care for people.
- The registered manager oversaw a schedule of audits and observations that checked the service was following the provider's policies and procedures to provide good quality care and support. These included audits of, medication, infection prevention and control, complaints and health and safety. Any issues

identified had corrective action taken to ensure people were cared for safely.

- There was a process of continual improvement and quality assurance to ensure the quality of the provision was maintained. The systems ensured the registered manager had clear oversight of the service.
- The service had met legal requirements by notifying CQC of significant events and incidents.
- Staff told us meetings and supervisions provided valuable time to discuss lessons learned and different ways of helping and supporting people.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Staff attended regular, house and team meetings and supervision sessions which enabled them to get updates about the service, discuss developments and talk about people's care and support. Staff told us they felt comfortable to raise any issues or ideas at these meetings and felt confident they would be listened to and any suggestions acted upon.
- Managers and staff kept people and relatives well informed. A relative told us, "They keep us informed by email and phone calls and all the time let us know if there was anything we need to know. They keep me in the loop." Another relative told us, "They do keep us informed, they talk with us at least once a week. Anything important we get an email or call...any concerns are dealt with very promptly."
- Relatives told us communication throughout the service was good. Relatives felt involved in their loved one's care.
- People and relatives were asked to complete quality assurance questionnaires to enable the service to gain their views on all areas of care and support provided. The last ones had been completed during 2020. We viewed a selection of these which were in pictorial format and had all been positively completed. The provider was in the process of sending out up to date questionnaires to people and relatives.
- The service worked collaboratively with health and social care professionals, such as GP's, physiotherapists, speech and language therapists, members of community learning disability teams and relevant external stakeholders to ensure people received the care, treatment and support they needed. The registered manager told us they had received effective and good support from a variety of health and social care professionals and had been well supported by the provider in their own professional development.
- The registered manager kept up to date with briefings from CQC, regulation and Adult Social Care guidance documentation. They showed a high level of commitment to ensuring people received the best care, both during their lives and at the end of their lives. Their care team were nominated and won the Linda McEnhill award for their levels of bereavement support they showed people, parents and each other when people reached the end of their lives.
- The provider had recently started using the services of an independent well-being health professional, to support both people and staff. These sessions concentrated on making people feel better about themselves through the use of different holistic therapies which improved people's sense of well-being and health.