

# Quality Outcomes Report 2015



North Tyneside Council

Milton Lodge  
August 2015



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Name of Service:	Milton Lodge
Date of Visit:	20th August 2015
Manager:	Grahame Brooks
Person in Charge on day of visit:	Grahame Brooks
Contracts Team Officers:	Nina Dixon and Bev Gosling

Not Met	Poor evidence of outcome being met
Partially Met	Good evidence of outcome being met /majority of evidence is in place but not all
Fully Met	All evidence is in place demonstrating the outcome is fully met

**SUMMARY;**

Milton Lodge is a forensic service for men with a degree of learning disability and or mental health issues. The staff team have been working within the service for a number of years and were positive about the service during the visit. Overall there could be some improvements around quality assurance systems and health and safety, which have been reflected within the report. At the time of our visit the kitchen area was undergoing some modernisation work which was positive, carpets had been replaced and windows had been replaced. An area for development would be to develop a schedule of works for the service to inform people of the long term plans for updating environmental aspects.

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
1. People benefit from Personalised Care	1.1 Effective assessment procedures ensure that placements are appropriate and well planned	This outcome was fully met. Support Plans viewed indicated referral for placements was part of Ministry Of Justice Sanctions.	Fully met	2
	1.2 Effective care planning and review processes ensure people receive excellent, individualised care	This outcome was fully met. Outcome Planning Stars were being utilised within the service, this was good to see as people's progress and improvements were easy to view. There was evidence of people's signatures within their support plans, which demonstrated their involvement in the process. Overall support plans were very detailed and contained comprehensive information to enable staff to work safely with people, whilst providing appropriate support.	Fully met	2
	1.3 Positive risk taking ensures people are encouraged to maintain independence	This outcome was partially met. As reflected within this years' report for Head Office a policy which covers positive risk taking could be developed. There were some good examples of people being supported to take positive risks, evident within support plans and associated risk management plans.	Partially met	1
			<b>Score</b>	<b>5</b>
People are supported by excellent staff	2.1 Comprehensive training procedures ensure staff have access to up to date knowledge and skills that is appropriate to the needs of the clients receiving the service.	This outcome was partially met. The Training Matrix viewed showed that some staff training had lapsed over the last year. It was a recommendation that The Training Matrix should show the completion date of training and the subsequent expiry date. Within staff files viewed, there was confirmation of the Safeguarding National Competency Framework having been completed.	Partially met	1
	2.2 Staff are supported to undertake their duties	This outcome was fully met. It was evident from meeting minutes that staff felt able to raise any issues of concern.	Fully met	2

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
2. People	2.3 Positive Staff Morale ensures people receive dignified care from a stable and productive staff team	This outcome was partially met. There has been a stable staff team within the service for a number of years. The organisation does not carry out annual staff satisfaction surveys, this could be beneficial in being able to benchmark performance.	Fully met	2
			<b>Score</b>	<b>5</b>
3. Management systems ensure an excellent quality of service provision	3.1 Effective quality assurance procedures ensure the manager has a clear overview of service performance	This outcome was partially met. There was a case tracking system in place, which enabled The Manager to identify actions to be taken as required. Accidents and Incidents are responded to through a reporting process on an individual basis. To further develop quality assurance systems it may be beneficial for the organisation to have a monthly reporting system, which would allow for action plans to be developed. At Head Office a system to disseminate new versions of policies to staff was being developed and had yet to be formally introduced. A Management review of the service was not in place, again this may be beneficial where audit plans could feed into a yearly plan ahead.	Partially met	1
	3.2 Effective Business Continuity procedures ensure the service can continue to care for people during crisis situations	This outcome was not met. As reflected within the previous two years' quality monitoring reports the service does not have a Business Continuity Plan. Within Head Office there are emergency telephone numbers and reference to alternative accommodation. However there was no tangible evidence that demonstrated staff working within the service had a clear plan available to them to follow in the event of an emergency. The plan should consider all crisis events that may impact negatively on the safety and well-being of people using the service e.g. pandemics, severe weather i.e. floods. The impact of the risk factors/events should then be identified. Staff should be aware of and trained in the use of the plan. The response plan should be reviewed annually/key contact details updated as required.	Not met	0
	3.3 Effective recruitment procedures ensure the right staff are employed and people are protected from harm	This outcome was fully met.	Fully met	2
	3.4 Effective staff management ensures the right numbers of staff are available at the right time and have the right skills, knowledge, experience and competencies to carry out these duties.	Overall this outcome was met. Staffing was provided according to assessed need of the individuals supported. It would be good practice to ensure that The working time directive is addressed with opt out forms held for each staff member, where applicable. This should ensure that people don't work back to back shifts.	Fully met	2
	3.5 Robust financial procedures ensure people retain as much financial independence as possible and are protected from financial abuse	This outcome was fully met. Support plans viewed showed that people were being supported to manage their own money and had budget plans to follow. The Manager carries out weekly audits of finances within the service, it was good to see that such audits were carried out on different days and times.	Fully met	2
			<b>Score</b>	<b>7</b>

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
4. People benefit from a transparent, consistent and equitable service through effective policies and procedures	4.1 Effective Health and Safety procedures ensure people are cared for in a safe environment	This outcome was not met. The Health and Safety Policy had recently been reviewed, although the most recent version was not available within the service. During the visit it was explained that new arrangements for sharing updated policies with staff were being developed at Head Office. The Manager was reporting accidents and incidents appropriately, with remedial actions being identified on an individual report basis. It would be good practice to develop an auditing process, which would assess performance and enable trends to be identified. Clear arrangements for the consultation with staff had yet to be developed. An Immediate Notification was issued to the provider at the time of the visit as The Fire Risk Assessment was not completed by a trained person and it was not representative of the service building structure or bespoke to the service. Fire drills were taking place but no clear link to the evacuation plan was evident within drill discussion records. PEEPs could be expanded to cover night time and any mobility needs applicable to the individual. PEEPs should be held in a central file, readily available in the event of an emergency. It would be good practice to include scenarios during night time hours within fire drills for staff.	Not met	0
	4.2 Equal Opportunities procedures promote equal access to services and protect people from discrimination	This outcome was partially met. Recruitment procedures could be expanded to demonstrate that an effort will be made to include interview members appropriate to gender of candidates. Exit interviews process' should offer the opportunity for staff to explain reasons for leaving and used to develop the service. Equality Impact Assessments are not carried out when implementing or reviewing policies	Partially met	1
	4.3 Proactive Complaints and Compliments procedures ensure services are reactive and responsive to people's needs	Overall this outcome was met. Although the organisation does have a complaints policy, it is provided to people on request (as mentioned within the service user guide). It was a recommendation that the complaints policy could be readily available and accessible within the service. The complaints log was viewed and there was no record of any complaints being made over the last year. It would be beneficial to ensure that all concerns or minor grumbles are documented within the log to ensure all issues have been addressed appropriately.	Fully met	2
	4.4 Confidentiality and data protection procedures ensure that sensitive information is treated with respect	Overall this outcome was met. The organisation has a confidentiality policy, which covers all aspects of client information. It would be good practice to include specific reference to individuals financial status being confidential and should not be shared except on a "need to know" basis. Also that Staff understand they must not borrow nor benefit either directly or indirectly from residents money.	Fully met	2
			<b>Score</b>	<b>5</b>
5. People are able to engage in meaningful activity and occupation	5.1 People are able to engage in meaningful activity and occupation	This outcome was fully met. It was good to see that cleaning regimes were in place within the service, with people being involved with laundry days and room cleaning days. Where it was applicable people supported were accessing services in the community.	Fully met	2
	5.2 People are encouraged and supported to maintain and develop relationships	This outcome was fully met. There was some good evidence within support plans viewed, to show that meaningful discussions were being held around relationship issues.	Fully met	2

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
5. People experience dignity and respect	5.3 People are proactively involved in services	This outcome was partially met. It would be good practice to incorporate the involvement of people supported within the recruitment procedures. Client meeting minutes were viewed, meetings were occurring on a regular basis and staff were working well to engage with clients. Client surveys are presently carried out on an individual basis. It could be beneficial to collate the survey results as part of quality assurance systems in order to develop services.	Partially met	1
	5.4 People experience Choice and Control in every part of their life	This outcome was fully met	Fully met	2
	5.5 Privacy is a valued part of everyday life	This outcome was fully met. Not all of the sub outcomes were applicable to assess for the client group, at time of our visit. Support plans contained information regarding strategies where people are supported to be alone within the service.	Fully met	2
	5.6 People experience a sense of belonging and being a valued part of the community	This outcome was fully met. Where MOJ restrictions would allow people are being supported to participate in activities within the community according to the persons' wishes. Appropriate risk assessments were in place in support of this.	Fully met	2
	5.7 People have timely and appropriate access to information	Overall this outcome was met. Advocacy arrangement information could be included within Service User Guides. The service utilised house meetings to discuss relevant information pertaining to the service.	Fully met	2
			<b>Score</b>	<b>13</b>
People are protected from avoidable harm and are cared for in a safe environment	6.1 The Mental Capacity Act 2005 and Deprivation of Liberty procedures are effective and ensure people are treated with dignity and are protected from harm	This outcome was fully met.	Fully met	2
	6.2 Excellent safeguarding procedures ensure people are protected from harm	Overall this outcome was met. A procedure to demonstrate staff's awareness of the whistle blowing policy could be developed. The Safeguarding policy could be expanded to include the arrangements for people entering the service to carry out maintenance work.	Fully met	2
	6.3 Proactive falls prevention practices and procedures ensure that actions are taken to reduce the incidence and impact of falls	This outcome was not applicable to the client group at the time of our visit.	Not applicable	Not applicable
	6.4 Maintaining a safe environment ensures people are protected from potential hazards	This outcome was partially met. Repairs and maintenance requests are submitted via an online system. The Manager is required to grade the work according to high, medium or low request. This system could be developed further by recording an intended date for works and to record when completed. The Manager completes checks of furniture and equipment, it would be good practice to formally record these checks. It would be good practice to have a 'schedule of works' in place to inform people of the intended renewal and maintenance programme for the internal environment within the service.	Partially met	1

Main Outcome	Related Outcome Measures	Comments	Outcome	Outcome Score
6. People	6.5 Appropriate and safe equipment ensures people receive safe and dignified care	This outcome was not applicable to the client group at the time of our visit.	Not applicable	Not applicable
			Score	5
7. People experience improved health and well-being	7.1 People's nutritional needs are comprehensively met and dining is a positive experience for all	This outcome was fully met. Within support plans viewed there was evidence to show that people were being encouraged to be involved with shopping, cooking and preparation of meals.	Fully met	2
	7.2 Effective Health and Hygiene practices minimise the risk of cross infection	Overall this outcome was met. Cleaning schedules were in place within the service. There could be some consideration within cleaning schedules to allow for more substantial cleaning, e.g. spring cleaning	Partially met	1
	7.3 Robust medication procedures ensure people receive the right medication at the right time to protect their health	This outcome was partially met. As reflected within last years' Quality Monitoring Report; errors should include recording on the safeguarding log. Medication administration records should contain a photograph of the individual concerned. Medication training and competencies need to be updated for staff within the service.	Fully met	2
			Score	5

<b>Total Scored</b>	45
<b>Maximum Score</b>	56
<b>Percentage scored</b>	80%