

Squirrel Lodge Limited

Squirrel Lodge

Inspection report

541 London Road South, Lowestoft, Suffolk, NR33
0PD
Tel: 01502 501642

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Ratings

Overall rating for this service

Good 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service responsive?

Good 

Is the service well-led?

Good 

Overall summary

We carried out an unannounced comprehensive inspection of this service on 9 October 2014. Breaches of legal requirements were found. These related to care planning, staffing, training and the systems in place to identify and address issues in the service delivered to people. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to Regulation 9 (care and welfare), Regulation 10 (assessing and monitoring the service), Regulation 22 (staffing) and Regulation 23 (supporting workers) of the Health and Social Care Act 2008 (Regulated Activities) 2010.

We undertook this focused inspection to check that the action plan the provider submitted had been followed and to confirm that they now met legal requirements.

This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Squirrel Lodge on our website at www.cqc.org.uk

Squirrel Lodge provides accommodation and personal care for up to 24 older people who require 24 hour support and care. Some people using the service were living with dementia. There were 22 people using the service when we visited on 8 July 2015. This was an unannounced inspection.

There were two registered managers in post, and they jointly managed the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered

Summary of findings

providers, they are 'registered 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.

During this inspection, we found that the management of the service had followed the action plan they provided to us following our inspection on 9 October 2014, and had made significant improvements. We considered that these initial improvements had been sustained over the months prior to this inspection and a plan was in place to drive continual future improvement.

People told us and we observed that the staffing level was appropriate to the needs of the people using the service. Care staff were positive about the changes that

had been made to the staffing level and the deployment of staff, and told us they felt they had more time to spend with people meeting their physical, social and emotional needs.

We found that the training and support offered to staff was now effective in providing them with the knowledge and skills required for the role.

There were improved systems in place to support staff to meet people's needs effectively. New care planning documents were in place for people using the service, and these accurately reflected people's diverse individual care needs.

Improvements had been made in the service's quality assurance processes and procedures. The views of people and staff were now used effectively to drive improvement in the service.

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

Action had been taken to improve safety.

Action had been taken to address shortfalls in staffing numbers and ensure the effective deployment of care staff.

Good



Is the service effective?

The service was effective

Staff had been provided with the appropriate training and support for their role.

Good



Is the service responsive?

The service was responsive

People's diverse and individual needs were assessed and planned for effectively.

Good



Is the service well-led?

The service was well-led.

Improvements had been made to the quality assurance processes in place.

Good



Squirrel Lodge

Detailed findings

Background to this inspection

We undertook an unannounced focused inspection of Squirrel Lodge on 8 July 2015. This inspection was done to check that improvements to meet legal requirements planned by the provider after our 9 October 2014 inspection had been made. We inspected the service against four of the five questions we ask about services: is the service safe, effective, responsive and well-led. This is because the service was not meeting some legal requirements.

The inspection was undertaken one inspector. We spoke with five people who were able to express their views verbally and the relatives for one person. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We looked at the care records for five people and spoke with four members of care staff and the two registered managers. We looked at records relating to the management of the service, staff personnel and training records, and the systems in place for monitoring the quality of the service.

Is the service safe?

Our findings

Our previous inspection on 9 October 2014 found that improvements were needed to ensure there were sufficient numbers of staff to meet people's needs, and that care staff were deployed effectively.

At this inspection people told us and we observed that there were now sufficient numbers of effectively deployed care staff to meet people's needs. We observed that people had plentiful interactions with staff which were not linked to tasks such as personal care. Staff laughed and joked with people, and spent more time meeting people's social and emotional needs. One person told us, "I feel a lot closer to the staff now. They have more time for chat." Another person said, "They check in on me all the time, I never feel lonely and things are much better." The managers of the

service told us that following our inspection on 9 October 2014, they had employed new domestic staff so that care staff no longer needed to spend time cleaning the service, and could therefore dedicate more time to meeting people's needs fully. The relatives of one person told us, "They have made so many improvements to the numbers of staff. There's definitely enough now, they're always popping in and checking everything is OK."

The managers showed us the new systems that were in place to assess the staffing levels according to people's changing needs. A member of care staff told us, "We have much more time now that we don't have to clean. People can have our full and undivided attention." Another staff member said, "We can offer more than the basics now, I feel like I can sit with people without feeling rushed."

Is the service effective?

Our findings

Our previous inspection on 9 October 2014 found that improvements were required to ensure staff had the appropriate training and development to meet people's needs.

During this inspection we found that improvements had been made to the quality of the training provided to staff.

Staff had been provided with updates to their training and knowledge in subjects such as dementia care, safeguarding, the Mental Capacity Act (MCA) 2005 and infection control. A senior carer had completed a 'train the trainer' qualification in moving and handling, so they could disseminate this knowledge to other care staff.

In addition, all staff, including the managers, were completing a distance learning qualification which covered subjects such as palliative care, nutrition and stimulation. The management told us staff had also received training in conflict resolution.

All five people we spoke with were positive about the staff and their knowledge and training. One person told us, "Without a doubt, they have the smarts for the job. They know what they're doing." Another person said, "Yes,

definitely well trained. I never feel unsafe in their hands now. I used to worry a bit when they were hoisting me, but I feel better about it now." One other person commented, "They always seem to be going off on one course or another at the moment. They come back and tell us about it, always sounds interesting anyway." The relatives for one person said, "I wasn't always sure before, I'll be honest. But now I genuinely trust that they're receiving only the best training. It's been discussed with all of us and they heard us out, and things are better."

The managers of the service had attended sessions on the newly introduced care certificate, and plans were in place for staff to start this training in the near future. The managers had also attended training on the new regulations under the Health and Social Care Act (Regulated Activities) 2014, and demonstrated a good knowledge of these changes and what it meant for them as service providers and the people they cared for.

Staff were positive about the new training. One said, "There's more on offer now, we don't have to ask, it is just offered. They've sent us all on loads of courses and I do feel better for it." Another staff member said, "It's much better than the old DVD training we did before. You get a bit more involved with the new training."

Is the service responsive?

Our findings

On our inspection on 9 October 2014 we found that improvements were required with regard to how people's care was assessed and planned to ensure that staff had the appropriate information to meet their needs safely.

We found during this inspection that improvements had been made. There were detailed care plans in place for people in a new format which set out their individual needs. These were personalised to include information about how they would like their care delivered, for example, what support they would like to receive with personal care and how it should be provided. One staff member told us, "I like the new care plans, there's so much more information and it's a lot easier to help people."

There was information about the past lives, hobbies and interests of people living with dementia. One staff member told us that this helped them to better understand one person using the service, commenting, "...The new information in [person] care plan really sheds light on some of their behaviours and what they say. Makes it a lot easier to respond without upsetting them or making it worse."

The managers showed us minutes of staff meetings where the new care plan formats had been discussed with staff, and we saw that suggestions made by staff had been listened to by the managers. One of the managers said, "It's all very well us writing a new care plan, but it has to work for the staff, they're the ones delivering the care."

The minutes of meetings with people using the service and their representatives demonstrated that care planning had also been discussed with them, and their views were sought on the proposed changes to their care records. One person told us, "They asked what I thought. I said I was happy with anything. We sat down one day and decided what should go in the plan's, they wanted to know what I needed and exactly how I wanted it done." Another person said, "I think they know me better, they're not constantly asking me how to do things, because it's all written down. Makes my life easier." The relatives for one person said, "They got us all sitting round the table and we made decisions about what should be in the plan and talked about how things should be done. It was a good meeting and I think we all came out of it better informed."

Is the service well-led?

Our findings

During our inspection on 9 October 2014 we found that improvements were required to ensure that the quality assurance processes in place identified shortfalls and ensured that people received good quality care. Improvements were also required to ensure transparency between the leadership of the service, the care staff and people using the service/their representatives.

During this inspection, we found that new and improved systems had been put in place by the managers, which were capable of identifying shortfalls and areas for improvement.

People told us there had been improvements since our last inspection, and the service was better managed. One person said, "Things have improved, atmosphere seems calmer, staff and managers have more time to chat." Another person commented, "Everything seems a bit better managed, you see the managers out and about more with care staff seeing what's going on." During our observations we saw the managers spending time around different parts of the home addressing people by name, and demonstrating knowledge of their particular needs and interests. This showed that the managers knew people well.

There were new systems in place for monitoring accidents and incidents. In particular there was a new format for recording falls, which analysed trends so these could be identified and steps put in place to minimise risks to people.

A new care plan audit was in place to ensure the new care plans were kept up to date and reflected people's needs.

The managers told us about an incident regarding controlled drugs which had been identified by their quality monitoring systems. They showed us records to confirm what action had been taken as a result of the incident and what plans had been put in place to ensure it could not occur again. We viewed the minutes of staff meetings where this incident was discussed with staff to ensure the responsibility for learning from the incident was shared collectively.

The managers used people's comments to improve the service. Minutes of meetings with people using the service and their representatives demonstrated that they had involved people in the improvement of the service. People had been informed of concerns during these meetings, and asked for feedback and suggestions on improvements which could be made to the service. Suggestions made by people had been considered. For example, a relative of one person had suggested they thought it would be beneficial if staff wore uniforms or name badges and managers took notes of the views of each person in relation to this suggestion. We saw that the managers now wore a uniform, which meant that people could better recognise them. One person said, "I think the care staff should just wear name badges. I think the managers new uniform is right though because they need to stand out."

Three members of staff told us about how they had been involved in the planning of improvements following our previous inspection. One said, "We all got together, it was hard but we all came up with suggestions. We've made it better as a team." Another staff member told us, "One thing that was different this time is that they got us all together to discuss it. Nothing was brushed under the carpet and we all had a part to play. I think we all feel good about the home now." Another staff member commented, "It was really hard for everyone but we supported each other and we all got involved because we care about the residents." The minutes of staff meetings demonstrated that there was honesty and transparency between staff and the management. Discussions had taken place and staff were asked for their input in creating an improvement plan. The managers of the service told us that there were still plans in place for further improvements, and that they were committed to driving the improvement and development of the service.

The managers showed us the minutes of staff meetings which took place after our inspection in October 2014. These demonstrated that staff training had been discussed extensively, and decisions about future training had been made collectively between the care staff and the management.