

New Spring Lodge INT Ltd

New Spring Lodge

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 ●

Summary of findings

Overall summary

About the service

New Spring Lodge is a residential care home providing personal care to people with mental health conditions. The home can accommodate up to 17 people in one adapted building. At the time of the inspection 15 people were using the service.

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

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 supported by staff who understood their role in protecting them from the risk of harm. People were supported to take reasonable risks, so that they could do things they enjoyed and be part of the local community. Incidents were reviewed to help identify lessons learnt.

People were supported in a safe way to take their prescribed medicine. The staff's suitability to work with people was established before they commenced employment. Enough trained staff were available to support people.

People enjoyed the meals available and were supported to ensure their preferences and dietary needs were met. Drinks were available to people throughout the day. People maintained relationships with their family and friends and were encouraged to give their views about the service. This included raising any concerns they had.

Staff confirmed that due to their mental health condition, people could be difficult to motivate. A good day for many people included getting out of bed and showering. From discussions with people and observations it was evident that they chose how they wished to spend their day. Some people accessed their local community, some listened to music or read. People were supported to maintain their cultural and faith needs and were treated with consideration and respect by the staff team.

Checks to monitor the quality and safety of the service were completed. People's views were gathered to help improve the service. The registered manager and staff team worked well with health, social care and criminal justice professionals.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 10 December 2020 and this is the first inspection.

Why we inspected

The inspection was prompted in part due to concerns received about the management of medicines. A decision was made for us to inspect and examine those risks. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the Safe section of the report.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

The overall rating for the service is Good. This is based on the findings at this inspection.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 effective?

Good 

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good 

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good 

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good 

The service was well-led.

Details are in our well-led findings below.

New Spring Lodge

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 Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was undertaken by two inspectors on 7 October 2021 and one pharmacy inspector on 13 October 2021.

Service and service type

New Spring Lodge is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

The inspection on both dates was unannounced.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service

and made the judgements in this report. We reviewed information we had received about the service since the last inspection and information from the local authority. We used all this information to plan our inspection.

During the inspection

We spoke with five people who used the service and one person's relative about their experience of the care provided. We spoke with four members of staff including the provider, registered manager, senior care worker and care worker.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at four staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found. We looked at training data 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. This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- A safeguarding policy was in place and was accessible to staff.
- Staff had received training about how to protect people from abuse and understood the procedure for reporting concerns.
- The registered manager and staff team acted when they were concerned for people's safety and reported to the appropriate professionals.

Assessing risk, safety monitoring and management

- People's needs were assessed before they began using the service to ensure their needs could be met.
- Risks were reviewed, and assessments updated as needed. The service focused on supporting people emotionally and practically, to enhance their day to day experiences and quality of life.
- Positive behaviour support plans were in place to support people to lead a meaningful life and achieve their personal goals.

Staffing and recruitment

- People received care from sufficient numbers of suitable staff. Where people needed more than one staff member to support them this was provided.
- The provider's recruitment processes ensured people were supported by staff who were suitable for the job role.

Using medicines safely

- There had been issues with access to prescriptions, but, due largely to the efforts of the registered manager, people received their medicines as prescribed, with no omissions in the recording.
- Where people were prescribed medicine on an 'as required' basis, protocols were detailed and both person and medication specific.
- Storage for medicines was secure, clean and orderly.
- People told us the registered manager supported them to access health care professionals to enable them to receive the right medicine and have regular medicine reviews.

Preventing and controlling infection

- The registered manager told us there was a stock of personal protective equipment (PPE), including hand sanitiser, available to staff; and the staff we spoke with confirmed this.
- The registered manager followed government guidelines. Risk assessments had been completed to demonstrate why staff did not wear masks on duty, unless there was a Covid 19 outbreak. Staff completed

daily lateral flow tests and a weekly PCR test. People were also encouraged to participate in testing.

- On the day of the inspection government guidelines were followed when we arrived at the home, this included reviewing evidence of our negative lateral flow test and PCR test.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed. There was no Covid 19 outbreak at the time of our visit.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.
- All staff had received both Covid 19 vaccines. Most people living at the home had also had both of their Covid 19 vaccines, with two awaiting their second dose and two people declining the vaccine.

Learning lessons when things go wrong

- The registered manager and staff team had a good understanding of each person's mental health needs and the triggers that could impact on their health. Incidents were reviewed by the registered manager, to look for any themes and trends and identify any actions that could be taken to minimise reoccurrence.
- Staff understood how to report and respond to incidents. A debrief meeting was undertaken following an incident. This gave staff an opportunity to reflect and review what happened, what led to the incident and any changes needed in the person's support plan. Staff confirmed that they felt supported by the management team.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed to ensure they could be met.
- Assessments included enough detail to ensure outcomes were identified and people's care and support needs were regularly reviewed.
- People were supported to make choices to promote their wellbeing.

Staff support: induction, training, skills and experience

- Staff were supported with their training and development to enable them to meet people's needs.
- New staff were supported with an induction and training programme and worked with experienced staff until their competency was assessed and they were able to work alone.
- Staff were provided with supervision on a regular basis by the registered manager.

Supporting people to eat and drink enough to maintain a balanced diet

- People said they enjoyed the choices of food available to them.
- Different diets and preferences were catered for.
- People's nutritional needs were monitored. When concerns had been raised, health care professionals had been consulted and dietary supplements provided.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People had access to health professionals such as doctors, psychiatrist, and community mental health teams.
- We saw that referrals had been made to a range of health and social care professionals when required to support people's health care needs.
- One person told us, "If I need to see a doctor the staff will support me to do that."

Adapting service, design, decoration to meet people's needs.

- The design of the building enabled access for people that used wheelchairs and people could move around freely within the home.
- Following government Covid-19 guidelines, people met with their visitors in private. This was either in their bedrooms or in a separate lounge, that was cleaned after each use.
- Equipment was available for people to move safely when needed.

Ensuring consent to care and treatment in line with law and guidance

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 Act 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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA.

- People using the service, at the time of the inspection, had the mental capacity to make informed decisions.
- The registered manager understood the importance of supporting people to make decisions when their mental health impacted on their capacity to do so. We were aware of discussions that had taken place with professionals to support a person when they were unwell. This ensured the person was protected and their rights upheld.
- Staff understood how to support people with decisions and the principles of least restrictive practice.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- We saw people were treated with kindness and consideration by the staff team. One person told us, "The staff are really nice, they are respectful." Another person told us, "The staff are spot on." A relative told us, "The staff are fantastic they are so caring. The manager went above and beyond to get my relative here safely, I think she saved my relative's life."
- People were supported as needed to maintain their faith and cultural customs. For example, one person was supported to cook traditional meals for themselves with staff support. They were also supported to access their place of worship.

Supporting people to express their views and be involved in making decisions about their care

- People were enabled to make choices about the care they received. One person told us, "I like it here, there are always staff around. You get the support. The manager fights to get you the right support from outside services."
- One person liked to sit in an area of the home throughout the day and all of the staff respected this person's wishes. They had a good understanding of this person's mental health needs and how to support them.
- People were involved in reviews of their care and were supported to express their feelings and wishes.

Respecting and promoting people's privacy, dignity and independence

- People confirmed that staff respected their wish for privacy. One person told us, "I like it here, there are always staff around but I also get my privacy. The staff will always knock, they never just walk in. I think they have a master key in case I'm in danger, but they don't use it just to check on me or ask me something."
- Confidential information was stored in compliance with the General Data Protection Regulation that states how personal information should be managed. Records were stored securely and were only accessible to authorised staff.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs. This is the first inspection for this newly registered service. This key question has been rated Good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff encouraged and motivated people to live as independently as possible. Support was tailored to meet people's individual needs, abilities and choice.
- Some people went out independently in the community, some chose not to do this and preferred staff to go with them.
- Staff encouraged people to go out, such as for a meal in the local community. People told us that during the summer they had spent time in the garden and had barbeques. Some people had commenced a garden project with staff support.
- As most people had come from a hospital setting, they had become accustomed to having everything done for them and needed encouragement to regain their independence. People were prompted and encouraged to clean their rooms with support and prompted as needed to make their own drinks and food shop with staff.
- Each person's preferences were respected. We saw some people liked to listen to music. Others preferred to spend time in their room. Each person was unique, with their own mental health challenges and their own interests and preferences.
- The provider had recruited an activities coordinator who was due to start work soon. The registered manager told us this had been done to try and motivate people to take part in activities and regain their confidence.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Communication plans in place for each person were specific to each person's support needs and their preferred communication method. These provided detailed information for staff to refer to.
- Staff understood people's preferred communication methods. Everyone using the service was able to verbally express themselves, but some people were more reserved than others. One staff member told us, "Everyone is different, the way I speak with one person can be very different to how I speak to another person, People respond in different ways, so it's important to know each person well and how best to communicate with them."

Improving care quality in response to complaints or concerns

- People were confident that they would be listened to if they raised any concerns. One person said, "I would tell the manager or any of the staff and I'm sure they would help me." A relative told us, "I have absolutely no concerns and would tell the manager if I had any issues and she would sort it out."
- The provider had a procedure in place to manage complaints. No formal complaints had been received in the last 12 months.

End of life care and support

- No one was receiving end of life care at the time of our inspection.
- We saw that people had been asked about their preferences should they require end of life care, but the majority had not wanted to discuss this at the time. The registered manager confirmed this would be reviewed with people at regular intervals. One person had chosen to discuss their wishes, and this was ongoing with them at the time of the inspection.

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. This is the first inspection for this newly registered service. This key question has been rated 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; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager ensured that we received notifications about important events so that we could check that appropriate action had been taken.
- People's support was regularly reviewed to ensure it met their individual needs and preferences.
- Staff were clear on who they would report any concerns to and told us they would feel safe in doing this.
- Staff were supported and able to develop in their role. Staff confirmed they received regular supervisions and support from the management team.
- Staff spoke positively about the culture of the home, and how everyone cared about the people they supported and wanted to ensure they had good lives. One member of staff told us, "This is the best place I have worked."
- All staff understood their roles and responsibilities and there were clear lines of delegation.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The views of people and their representatives were sought, and feedback received was responded to. One person told us, "The manager listens and helps us to make sure we get the right support."
- Staff felt comfortable expressing their views and staff worked together to promote a high quality of care to people, ensuring their preferences and needs were fully considered.

Continuous learning and improving care; Working in partnership with others

- The registered manager and staff team worked with outside professionals to ensure people's needs were met. Referrals were made to the relevant professionals regarding people's nutrition, mobility and mental and physical health care needs.
- Audits were in place to monitor the service and drive improvement. Where improvements were identified, actions were put in place to address these.
- Staff felt supported in their role and told us the registered manager promoted a high standard of care.