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Oak Lodge Care Home

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

About the service

Oak Lodge Care Home provides nursing and personal care for up to 41 people. Most of whom are older people. The home is situated on a main road, close to all local amenities and with easy access to public transport. At the time of the inspection there were 38 people living at the home.

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

We found action had been taken to address the breaches found at the last inspection. Governance systems were in place to monitor and review the service provided. The management team and staff worked with other professionals, so people received the care and support they needed. Feedback received from third parties was positive about the management of the home.

The service had introduced an electronic medication management system. Staff responsible for the administration of medicines felt this was more effective and minimised the risk of error. Relevant training and assessments of competency were completed to check staff practice was safe.

We received a mixed response from people and staff about staffing levels. The registered manager was mindful these were to be kept under review to meet the current and changing needs of people. Further recruitment was taking place.

Feedback from people and their relatives was positive about their experiences. From our observations interactions between people and staff were polite and respectful. One relative told us "I would recommend this home because it is excellent all round, I would go in there myself." This was supported by other comments received.

Staff spoken with felt morale had improved. Newly appointed members of the team said they had been well supported in joining the team, the team worked well together and there was good communication.

Safe systems continue to be maintained in other areas, such as recruitment, health and safety checks and safeguarding people from harm.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published April 2019) and there were two breaches of regulation.

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an unannounced comprehensive inspection of this service in January 2019. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve medication management and governance systems at the home.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions of safe and well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Oak Lodge Care Home on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Oak Lodge Care Home

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 carried out by an inspector and Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Oak Lodge Care Home 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

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used all this information to plan our 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.

During the inspection

We spoke with two people who used the service and spent time in the communal areas observing the interaction between staff and people. We also spoke with eight relatives via telephone to seek their views about the service.

We spoke with five members of staff including the registered manager, operations manager, a nurse, senior care workers and care staff.

We reviewed a range of records. This included people's care records and medication records. We also looked at four staff files in relation to recruitment, health and safety checks and infection control procedures.

After the inspection

We continued to review evidence relating to the management of the service, including policies and procedures, 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.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection the provider did not have appropriate arrangements in place to consistently manage medicines safely. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- People's prescribed medicines were managed safely. One person we spoke with said, "They always bring my medication when I need it." One person's relative said, They [staff] deal with my [relative] wonderfully. They were always going in and out of hospital with problems but now this is dealt with in the home. I am so pleased and it's less stressful for my [relative]."
- Nursing and care staff responsible for the administration of medication told us the new electronic system was safer and more effective, as this helped to manage and monitor people's prescribed medicines.
- Clear policies and procedures were in place. Regular audits and training were completed as well as annual assessments of competency to check practice was safe.

Staffing and recruitment

- A safe system of recruitment was in place.
- A review of four staff files showed that all relevant information and checks had been carried out prior to new staff commencing work with people.
- From our observations, discussions with staff and a review of rotas we found sufficient numbers of staff were available. Staff said a times workloads were demanding due to sickness, however cover was arranged.
- We received a mixed response from people's relatives about staffing levels. We were told, "I feel they use a lot of agency staff, faces change a lot, needs to be more familiarity for the residents. However, all the staff are excellent" and "There always seem to be enough staff and the same familiar faces. They know me as well as my [relative]."
- We spoke with the registered manager about staffing arrangements. We were told levels were kept under review, taking into consideration the level of support people needed. Further recruitment was also taking place to help reduce the use of agency staff.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Policies, procedures and training were provided for staff in areas of protection of vulnerable people.

- The registered manager maintained detailed records of all issues brought to their attention along with actions taken. Where necessary this was shared with staff to help learn and improve practice.
- People we spoke with, their relatives and staff said they could raise issues with the management team and were confident action would be taken. One person we spoke with said, "No concerns, the staff are kind and respectful." People's relatives also added, "I feel my [relative] is cared for exceptionally well and during COVID-19 they have done an excellent job" and "My [relative] is safe and well cared for by the staff."

Assessing risk, safety monitoring and management

- Designated maintenance staff monitored the safety of equipment and the premises. These included, hoisting equipment, nurse call, small appliances, gas safety and mains electric. Recommendations identified following a recent check of the passenger lift were being addressed.
- Suitable arrangements were in place with regards to fire safety. Servicing of fire equipment had been carried out as well as internal checks. An 'emergency grab bag' was available, this included personal emergency evacuation plans for each person.
- Potential risks to people's health and well-being were assessed and planned for. These included nutritional risks, falls, pressure care and continence care. Additional advice and support was sought from health care professionals to help keep people safe. One relative told us, "There is a GP in attendance on a regular basis. The staff even take [relative] to hospital appointments, and I do not need to go with them."
- Specialist equipment to help minimise risks were available. These included wheelchairs, hoists, profiling beds and pressure care equipment. One relative said, "[Relative] is hoisted and it is always done by two staff and safely."

Preventing and controlling infection

- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises. All those we spoke with said the home was 'spotlessly clean'. One person added, "The home is extremely clean; the domestic staff do an excellent job, they are unsung heroes."
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- 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.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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; Continuous learning and improving care

At our last inspection the provider did not have management systems in place that effectively assessed the safety of the management of medicines. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The registered manager and operations manager were clear about their responsibilities so that people received safe and effective care. A range of audits and checks were completed to help identify areas of continuous improvement and actions required. These included areas such as, medication, care standards, environmental checks, staffing and meals.
- The registered manager ensured all events affecting the well-being and safety of people were notified to the CQC, as required by law.
- Staff felt the management team were supportive and responsive. Comments included, "They are very approachable", "They have given me a boost" and "I've confidence in them."
- People's relatives also spoke positively about the management team. They said, "I know the manager, she is very pleasant and approachable. She always comes over and says hello when I am visiting" and "I feel this home is running smoothly and the staff seem happy."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Opportunities to engage with people and their relatives continue to be provided through visits, calls, emails and feedback surveys. Five relatives we spoke with said they would 'recommend the home' to others. One person commented, "I would recommend this home as my [relative] is so happy and content and looks so well. Communication is excellent, I cannot praise the staff enough."
- Opportunities were also provided for staff to share information and ideas. This included daily 'flash meetings', team meetings and individual supervision.

- Staff told us they were supported in their role and felt morale was improving. One staff member said they had been 'fully supported' by staff since joining the team.

Working in partnership with others

- The service worked closely with key stakeholders and agencies including the local authority, and health and social care professionals. The registered manager was described as 'responsive' and 'engaging'. We were told they answered queries in a timely manner and sought out additional support when needed.
- People's records showed that additional advice and support had been sought from health professionals where people's needs had changed.