

South West Care Homes Limited

Lake View

Inspection report

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Date of inspection visit:
28 September 2016

Date of publication:
28 October 2016

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●

Summary of findings

Overall summary

Lake View is a residential care home which provides personal care to a maximum of 29 older people, including those who may be living with dementia or who may have a learning disability. Lake View does not provide nursing care. Nursing was care was provided through local community nursing services.

Included in the service's registration is a three bedded bungalow in the grounds for people who are able to live semi-independently without the requirement of 24 hour staff support. At the time of this inspection, two people were living in the bungalow and 21 people were living in the main house.

Lake View is owned by South West Care Homes Ltd, which operates 11 residential care homes in South West England.

There was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered 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.

The home was previously inspected on 8 October 2016 and received an overall rating of 'good'. We rated the key question, "Is the service responsive?" as 'requires improvement' as we identified improvements were needed in involving people in contributing to planning and reviewing their care, as well as providing more social contact and meaningful activities for people.

This unannounced focused inspection took place on 28 September 2016 in response to a concern raised with us about the number of staff available over the weekend and whether this was sufficient to meet people's care needs. Following the inspection we received a further concern over staffing levels and whether people's safety was at risk from lack of staff supervision.. We found the concerns to be partially substantiated as on the two days in question there was a reduced number of staff available for part of the day. This fell below that identified by the home as required to meet people's needs. However, duty rotas showed the home provided sufficient staff to meet the needs of those people currently living at the home and it was unforeseen circumstances that had led to the reduced numbers of staff on these two days.

We looked at the duty rota for the four weeks prior to and the week following this inspection. These showed four care staff were on duty with support from catering and domestic staff every day, including weekends.

On the two days in question where concerns had been raised about staffing levels, the registered manager told us on both days a member of staff had become ill while on duty and had been sent home. Due to the short notice it had proved difficult to obtain cover. While cover had been found for the first day, none could be found for the second day. However, as there were two fewer people at the home on that day, the staff on duty felt confident they could still meet people's care needs.

The registered manager, staff and two people who were able to share their experiences with us told us there were usually sufficient staff on duty to meet people's needs. At the time of the inspection, the registered manager was on duty with four care staff, as well as catering, domestic and maintenance staff. In addition there was a member of care staff on duty to provide one to one support for one person and another care staff member was on duty to assist with additional laundry and domestic tasks.

Part of the concern raised with us following the inspection was that staff were not supervising people to ensure their safety was maintained over the mealtime. We discussed this with the registered manager. They said staff were assigned to supervise people and while they may have been going to and from the kitchen to obtain food or drinks for people, they would have been available to observe people in the dining room and lounge room.

This report only covers our findings in relation to the inspection in September 2016. You can read the report from our previous inspections, by selecting the 'all reports' link for Lake View on our website at www.cqc.org.uk.

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 ●

People were supported by sufficient numbers of staff to meet their needs and to maintain their safety.

Lake View

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was carried out to check whether the provider was meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

This focused inspection took place on 28 September 2016 and was unannounced. One adult social care inspector undertook the inspection.

Before the inspection we reviewed information we held about the service. This included previous contact about the home and notifications we had received. A notification is information about important events which the service is required to send us by law.

During the inspection we reviewed staff duty rota for five weeks: four weeks prior to this inspection and the week following the inspection. We spoke with two people who were able to share their experiences with us, four care staff and the registered manager. Following the inspection, we received a further concern about staffing levels and we spoke to the registered manager about this.



Our findings

Prior to this inspection we received a concern about the number of staff on duty over one weekend. Following this inspection we received a further concern about the number of staff on duty the day following the inspection and whether people's safety was being placed at risk due to staff not being able to provide adequate supervision particularly at the tea time meal. We spoke to the registered manager about these additional concerns. We found that due to unforeseen circumstances, staffing numbers had been reduced on both these occasions. However, there were usually enough staff on duty.

At the time of our visit to the home, the registered manager was on duty with four care staff as well as catering, domestic and maintenance staff. In addition, there was a member of care staff providing one to one support for one person and another care staff was on duty to assist with additional laundry and domestic tasks. There were 23 people living at Lake View, including the two people living in the bungalow. The registered manager explained that although they were living semi-independently in the bungalow, they spent their day in the main house.

We looked at the duty rotas for the previous four weeks, and saw each day there were four care staff on the rota to work from 8am to 8pm. In addition a member of care staff was on duty to provide one-to-one support for one person in the home for three hours, three days a week. Two waking staff were on duty overnight. There were catering and domestic staff on each day, including weekends, from 8am to 2pm and from 9am to 2pm respectively. The duty rota for the week following the inspection provided the same level of staffing. This was an increase from the previous inspection in October 2015 when there were four care staff on duty until 10:30am, with three care staff on duty the remainder of the day and evening. The night time staffing numbers had also increased from one waking and one sleeping-in staff on duty.

The registered manager told us the home endeavoured to maintain a staffing level of at least one member of staff to six people. They confirmed they used a staffing tool to assess people's staffing requirements and the current staffing levels were sufficient to meet the needs of the people living in the home. They said they had flexibility with the rota planning and they were able to have additional staff on duty. For example, when people's care needs changed, for escorting people to hospital appointments, or like on the day of the inspection, for specific tasks around the home. The registered manager said the home had successfully recruited more staff and they were now fully staffed. In addition they said they were able to use agency staff and had contracts with two local agencies to access additional staff to cover shortfalls. They said there were six people who required the assistance of two staff to meet their personal care needs, three of whom were being cared for in bed due to frail health. The registered manager said that they also worked alongside the

care staff to support people with their personal care needs.

On the two days in question where concerns had been raised about staffing levels, one prior to the inspection and one following the inspection, the registered manager told us the number of staff on duty in the afternoons had been reduced to three care staff. On both days a member of staff had become ill whilst on duty and had been sent home. Due to the short notice it had proved difficult to obtain cover. On the first day, the home had managed to provide an extra member of staff from 5pm. However, on the second day the home had been unable to provide additional cover and as there were two fewer people at the home on that day, the staff on duty felt confident they could still meet people's care needs.

Part of the concern raised following the inspection was that staff were not supervising people to ensure their safety was maintained, particularly over the tea time period when staff had to serve the tea time meal. We discussed this with the registered manager. They said a member of staff was assigned to supervise people when they were having their meals in the dining room and the adjacent lounge room. They said this member of staff would assist with serving the meal and although they may be going to and from the kitchen, they would be supervising people to ensure they were safe. They conferred there was no one who required constant supervision when eating. Other staff were also available to support people with their meals or with personal care tasks.

Many of the people living at Lake View were living with dementia or had a learning disability, and not all were able to share with us their views of living in the home. Two people who were able to share their experiences with us, told us the home had more staff than when we last visited and that the new staff were "very nice". They said there were enough staff on duty to help them and they didn't have to wait long for staff to answer their call bells.

We spoke with four members of staff, one of whom was newly employed at the home. All said there were enough staff on duty to meet people's needs and to keep them safe. Those who had been at the home at the time of the previous inspection said the staffing levels had increased and they had time to care for people properly and they didn't feel rushed. Their comments included, "It's good now", "There's enough staff. Everything is OK" and "People are being well cared for, the staffing levels are good."

The registered manager said it was only due to unforeseen circumstances that the staffing numbers had dropped below those planned and that, while not ideal, the staffing available on both days had been sufficient to meet people's needs.