

# Optalis Limited

# Suffolk 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

This inspection took place on 4 and 5 September 2018 and was unannounced.

Suffolk Lodge is a care home without nursing that provides a service to up to 40 older people living with dementia and/or a physical disability. 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 home is split into 5 smaller units of seven to eight bedrooms. There are three units on the ground floor and two on the first floor. One of the two first floor units was closed with all people living in the other four units. At the time of our inspection there were 29 people living at the service.

There was a registered manager as required. A registered manager is a person who has registered with the CQC 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 registered manager and deputy manager were present and assisted us on both days of this inspection.

We last inspected the service on 22 and 23 August 2017. At that inspection we found the service required improvement. This was because improvements were needed to the safety of the premises, the safe storage of medicines and to ensure the premises were more suited to those living with dementia. We also found the provider had not established an effective system to enable them to ensure compliance with the fundamental standards. Following the last inspection, we asked the provider to complete an action plan to show what they would do, and by when, to improve the key questions of safe, effective and well-led to at least good. At this inspection we found the provider and registered manager had done all they said they would do and had improved the service to an overall rating of good, with a rating of good in all key questions.

Extensive work had been done on the safety of the building to ensure the premises were safe. Medicine storage had been addressed to ensure medicines were stored at safe temperatures. Work had been completed in response to health and safety inspection concerns, recommendations from a legionella risk assessment and work required following an inspection by the local Fire and Rescue Service.

The registered manager and the entire staff team had been involved in carrying out an audit of the premises to see where changes could be made to improve the 'dementia friendliness' of the premises and enhance the lives of the people living at Suffolk Lodge. The findings from the audit had been implemented, resulting in an environment that enhanced people's wellbeing and aided their independence. The provider had introduced a system that was successful in enabling them to monitor and ensure the service was compliant with the fundamental standards.

People felt safe living at the service and were protected from risks relating to their care and welfare. Staff

knew how to recognise the signs of abuse and were aware of actions to take if they felt people were at risk.

People were protected by the provider's recruitment processes. Safe recruitment practices were followed before new staff were employed to work with people. Required checks were made to ensure staff were of good character and suitable for their role.

People received care and support from staff who knew them well. Staff training was up to date and staff felt they received the training they needed to carry out their work safely and effectively. People received support that was individualised to their personal preferences and needs. Their needs were monitored and care plans were reviewed monthly or as changes occurred.

People received effective health care and support. Medicines were stored and handled correctly and safely. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

Meals were nutritious and varied. People told us they enjoyed the meals at the service and confirmed they were given choices.

People were treated with care and kindness. People's wellbeing was protected and all interactions observed between staff and people living at the service were respectful and friendly. People confirmed staff respected their privacy and dignity.

People and relatives were aware of how to make a complaint. They told us they could approach management and staff with any concerns and felt they would listen and take action. They benefitted from living at a service that had an open and friendly culture and from a staff team that were happy in their work.

People living at the service and their relatives felt there was a good atmosphere and thought the service was managed well. Staff also felt the service was well-managed. They told us the management were open with them and communicated what was happening at the service and with the people living there.

## 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 had improved to good and was safe.

The required work to ensure the safety of the premises had been completed. Systems had been put in place to monitor the safety of the premises and ensure prompt action was taken in the future when needed.

Staff had a good understanding of how to keep people safe and their responsibilities for reporting accidents, incidents or concerns. Risks to staff, visitors and people's safety had been assessed and plans were in place to minimise those risks.

Recruitment processes were in place to make sure, as far as possible, that people were protected from staff being employed who were not suitable.

There were sufficient numbers of staff and medicines were handled correctly. Work had been completed to ensure medicines were stored at the correct temperature.

### Is the service effective?

Good ●

The service had improved to good and was effective.

The premises were bright and homely and extensive work had been done on making the units dementia friendly. Adaptations had been made that helped people compensate for sensory loss and cognitive impairment. The environment helped people to maintain their independence where possible. Work in this area was ongoing with more improvements planned.

People benefitted from a staff team that was well trained and supervised. Staff had the skills and support needed to deliver care to a good standard.

Staff promoted people's rights to consent to their care. Staff were aware of their responsibilities to ensure people's rights to make their own decisions were promoted. The registered manager was aware of the requirements under the Mental Capacity Act 2005 and the Deprivation of Liberty Safeguards.

People were supported to eat and drink enough and staff took action to ensure their health and social care needs were met.

### **Is the service caring?**

The service was caring.

People benefitted from a staff team that was caring and respectful.

People received individualised care from staff who were compassionate and understanding of their known wishes and preferences.

People's right to confidentiality was protected. People's dignity and privacy were respected and staff encouraged people to live as full a life as possible, maintaining their independence where they could.

**Good** ●

### **Is the service responsive?**

The service was responsive.

People received care and support that was personalised to meet their individual needs. The service provided was reviewed and adapted in response to people's changing needs.

People knew how to raise concerns. Complaints were dealt with quickly and resolutions were recorded along with actions taken.

**Good** ●

### **Is the service well-led?**

The service had improved to good and was well-led.

Quality assurance systems had been put in place to monitor the quality of service being delivered and the running of the service. The system introduced was effective in ensuring the service obtained and maintained compliance with the fundamental standards.

Staff were happy working at the service. They felt supported by the registered manager and local managers and thought the training and support they received helped them to do their job well.

**Good** ●

# Suffolk Lodge

## 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 planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection took place on 4 and 5 September 2018 and was unannounced. The inspection team included one inspector on both days and an expert by experience on the second day. An expert-by-experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Before the inspection, the registered manager completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We looked at the PIR and at all the information we had collected about the service. This included previous inspection reports, information received and notifications the registered manager had sent us. A notification is information about important events which the service is required to tell us about by law.

During the inspection we spoke with 14 people who use the service, seven of them in depth, plus one visiting relative. We spoke with the provider's nominated individual, deputy head of regulated services, the registered manager, deputy manager, the administrator, activity staff, two domestic assistants and maintenance staff. We received feedback from nine care workers. We observed interactions between people who use the service and staff during the two days of our inspection. We spent time observing activities and lunch in the dining rooms. As part of the inspection we requested feedback from 23 health and social care professionals and received responses from three.

We looked at four people's care plans, monitoring records and medicine administration record sheets, five staff recruitment files and the staff training and supervision logs. Medicines administration, storage and handling were checked. We reviewed a number of other documents relating to the management of the service. For example, utilities safety check certificates, equipment service records, the legionella risk assessment, the fire risk assessment, staff meeting minutes, audits of the service and the complaints, compliments and incidents records.

# Is the service safe?

## Our findings

At the last inspection on 22 and 23 August 2017 we found a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Effective systems were not in place to monitor and ensure the premises were safe for people who use the service and others, such as staff and visitors. In addition, the provider did not always take prompt action when risks related to the premises were identified. At this inspection we found the provider and registered manager had taken the action they said they would to improve the safety of the premises and had met this regulation.

Extensive work had been completed on the safety of the building to complete all work identified in internal and external audits. For example, recommendations from health and safety inspections, recommendations from a legionella risk assessment and work required following an inspection by the local Fire and Rescue Service. In their Provider Information Return (PIR) the registered manager explained work done to address safety-related concerns about the premises over the last 12 months, "We worked closely with the Fire Inspecting Officer and Wokingham Borough Council to ensure all works were carried out and completed. Fire system has been serviced and parts replaced or updated. Loft has had an independent detection fitted and compartments now fully erected and sealed. Two pipes from the hairdressing salon have now been removed and made good, as this was a legionella risk. All internal doors now have three hinges fitted to support heat in case of a fire. Additional outside lighting has been added to light up exit routes in an emergency. Removed an old green house that was a risk to people's safety. Works identified in physical condition survey have now been completed in line with health and safety. All legionella risks have now been completed... Action plan in place implementing Public Health England heat plan and following suggested actions. Thermometers are in place in all rooms."

People's medicines were stored and administered safely. In response to concerns regarding the temperature of medicines storage at the last inspection the registered manager had taken action. In their PIR they told us, "Temperatures are being recorded in all medication storage, fridges and communal areas. If temperatures rise above the recommended storage for individual [medicines] ... there is an action plan in place to store medication at the proper and safe management of medicines temperature." We saw the action plan had been successful during the recent heatwave to ensure medicines were stored at the correct temperature. Only staff trained and assessed as competent were allowed to administer medicines. Medicines administration records were up to date and had been completed by the staff administering the medicines. We saw that staff carried out appropriate checks to make sure the right person received the right drug and dosage at the right time.

People received safe care and support. We saw people were comfortable and at ease with the staff. One person commented, "I feel perfectly safe." We saw a compliment sent by a relative that said they would like to thank everyone at Suffolk Lodge for the love, care and compassion shown whilst her mother was at Suffolk Lodge. They commented, "She always had her favourite things to eat. Suffolk Lodge kept her safe, warm and made sure she was with friends." The relative went on to say they could not recommend Suffolk Lodge enough. Another relative compliment seen said, "I am really impressed with the care Suffolk Lodge provide. The staff are excellent, the food is good and the facilities provided in classes daily are second to

none. We are happy for [Name] to remain at Suffolk Lodge as it gives us peace of mind knowing she is safe and settled. Thank you so much."

People were protected from the risks of abuse. Staff knew how to recognise the signs of abuse and knew what actions to take if they felt people were at risk. Staff were confident they would be taken seriously if they raised concerns with the management and were aware of the provider's whistle blowing procedure.

People were protected from risks associated with their health and care provision. Staff assessed such risks and care plans included measures to reduce or prevent potential risks to individuals. For example, risks associated with malnutrition and skin breakdown. Community professionals thought the service and risks to individuals were managed so that people were protected. During our observations we saw staff were aware of the risk reduction measures in place and were carrying out activities in a way that protected people from harm.

Systems were in place to ensure details of any accidents or incidents were recorded and reported to the registered manager. The registered manager looked into any accidents or incidents and took steps to prevent a recurrence if possible. Investigations and actions taken were recorded. Emergency plans were in place and followed, for example emergency procedures in case of a fire.

People were protected by the recruitment processes in place. Staff files included the recruitment information required by the regulations. For example, proof of identity, evidence of conduct in previous employment and criminal record checks. People could be confident that staff were checked for suitability before being allowed to work with them. The registered manager had introduced a system where she carried out a final check of all recruitment documentation prior to offering an applicant a job.

People said staff had time to support them without them feeling rushed and that staff were available when they needed them. One person added, "I've never had to ring my bell." Another person commented, "They don't push, they are kind." Staff said there were usually enough staff at all times to do their job safely and efficiently. Where they needed additional staff to fill shifts the service employed agency staff that were known to the service and knew the people living there.

People felt the home and equipment was kept clean. Staff had training in infection control and we saw they put their learning into practice as they went about their work.

## Is the service effective?

### Our findings

At the last inspection on 22 and 23 August 2017 we found a breach of Regulation 15 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The registered person had not ensured the environment was dementia friendly. There were limited adaptations of the physical environment to help people compensate for sensory loss and cognitive impairment. The environment did not help people maintain their independence.

The provider, registered manager and the entire staff team had been involved in carrying out an audit of the premises to see where changes could be made to improve the 'dementia friendliness' of the premises and enhance the lives of the people living at Suffolk Lodge. The findings from the audit was being implemented, resulting in an improving environment that enhanced people's wellbeing and aided their independence. Each unit was themed with people living on the unit deciding on the theme and what would be included. For example, the people on one unit had decided on a Liverpool theme and there were pictures and mementoes of different Liverpool items from The Beatles to football teams. Another unit had a 1960s hippy theme and people on that unit showed us their wall mural with different 60s items reminiscent of the era. In addition, many of the people on the unit had chosen photographs of themselves from the 60s that they had put on the wall by their bedroom door.

In their Provider Information Return the registered manager explained work done to address the dementia friendliness of the environment since our last inspection, "Over the last twelve months we have worked with the Kings Fund [Enhancing the Healing Environment (EHE) environmental assessment tool] to support us to change the environment to [be] more dementia friendly. We have now put up signage to support residents with direction and orientation around the home. Residents have been involved with their units on how they would like them to be decorated, one group wanted a 'hippy theme' another wanted a music theme and it has been a wonderful journey for all residents to have inclusion and empowerment in their environment. There has been added [improved] lighting to most areas - offering a cosiness and ambiance feel - particularly in the winter evenings Signage on all bathrooms and toilets [doors] have been updated with picture and words to support independence for residents looking for the bathroom. Toilet seats have been changed to support partially sighted and to help with a more dementia friendly colour [contrast] and best practice recommendations. Dementia clocks have now been purchased to help residents identify night and day or PM to AM, and are visible in all communal areas. New activity calendars are on display in all units and communal corridors to help residents see what activity is on for the day, enabling them to join in... Residents have been involved in a 'You say - We did'. For instance, some residents asked for goldfish - there are now goldfish swimming in their tank on the units. Another asked for budgies/birds and we now have two budgies in the main lounge for everyone to share the interacting and care of them. Brighter newer furniture has been purchased to support with the aesthetic appearance for residents with poorer vision. Murals have been added to the walls as features to support residents with poorer cognitive abilities, supporting them [with] something interesting to look at and [providing] a good talking point. The entrance to the home has been updated, giving a brighter appearance with a choice of bright colours to help make it welcoming to all who visit. Adaptation of the unit upstairs, residents now enjoy coming downstairs to the main lounge which enables them to visit the gardens when they wish, or if an individual is requesting to go to the garden, they

are welcome to join in with another unit for the day, enabling freedom with the outside gardens."

We saw all these improvements had been made and people were interacting and chatting with each other during our inspection. People were animated when telling us about what they were doing to improve and decorate their home and took pride showing us the individual items they had chosen. We saw some compliments from two visiting community professionals. One commented, "I remember visiting here in the past and it was always so dark. It is brighter in here now, much nicer. The whole place looks better." And the other said, "How good Suffolk Lodge is looking and it has a lovely feel when walking round." They also commented on the staff being engaged and how bright the units were looking, saying it [the home] had changed a lot from the last time they had visited. The registered manager explained the work was ongoing with one unit still to complete their themed decoration. New blinds and curtains were on order and all bedrooms were due to be decorated to people's individual colour choices. People had also been involved in renovating and designing the gardens and planting. We saw a letter from the local 'In Bloom' team in July saying, "I am writing to congratulate you on being awarded 'Silver' in the green fingers competition 'Care Home' category. You will receive a certificate and gardening vouchers."

People received effective care and support from staff they knew and who knew how they liked things done. Care plans contained details of people's care needs, wishes and preferences. Each care plan was based on a full assessment of their needs. Care plans were kept under review and amended when changes occurred or if new information came to light. We saw a thank you comment from one relative saying, "Just want to place on record our sincere thanks for the amazing care our mother received during her residency at Suffolk Lodge. There is obviously a duty of care, but what we saw and experienced was above and beyond, which made our mother's stay even more comfortable as well as peace of mind. We don't quite know how are you able to deliver this day after day but you are all very special people and we shall always be grateful." Another comment we saw from a relative whose family member was in the late stages of dementia was, "[Name] has been very well treated [at Suffolk Lodge] and has been happy at all times. All the carers have been attentive to her needs which are substantial..." We saw a compliment passed on by a visiting entertainer to the service who stated they thought the care and caring was exceptional and attention to detail was remarkable. He added, if and when the time comes he would have no hesitation in going there [Suffolk Lodge].

People received care from staff that had the necessary knowledge, skills and experience to perform their roles. Staff felt they received the training they needed to deliver high quality care and support to the people living at the home. The service provided training in topics the provider considered mandatory, such as fire awareness, handling medicines and moving and assisting. Additional training was also provided in topics specific to people living at the service, such as a one day dementia workshop that all staff had attended. All mandatory training was up to date or dates had been scheduled where the training was due. People and their relatives thought the staff had the training and skills they needed when providing support to people living at the home. Community professionals said the service provided effective care from staff who had the knowledge and skills they needed to carry out their roles and responsibilities.

Some staff held additional relevant qualifications. Of the total care staff, one held a National Vocational Qualification (NVQ) in care at level 2 and four held an NVQ in care, or equivalent, at level 3. One staff member was working towards their level 5 qualification, supported by the provider.

Staff said they received formal supervision with their manager to discuss their work and how they felt about it. The log showed staff had supervision meetings approximately every six to eight weeks. Other management support was provided in the form of staff meetings and informal chats if requested by staff. Staff said they felt supported by the registered manager and deputy. One staff member commented, "The

support is always there."

People's rights to make their own decisions, where possible, were protected. Throughout our inspection we saw staff asking consent and permission from people before providing any assistance. Staff received training in the Mental Capacity Act 2005 (MCA) and were clear on how it should be reflected in their day to day work. People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes are called the Deprivation of Liberty Safeguards. At the time of our inspection the service had identified the people living at Suffolk Lodge who were potentially being deprived of their liberty. Applications had been made to the funding authorities for the required assessments and authorisations.

People told us they enjoyed the food at the service and could always choose something different on the day if they did not like what was planned. One person told us, "The food is good and there's plenty of it. It's lovely." Drinks were also available at all times and people were free to decide what and when they ate. We saw staff always made sure foods were available to meet people's diverse needs. The service had implemented the government's heatwave plan in the recent hot weather and were proud that everyone living at the service had remained well hydrated and nourished throughout the heatwave. People were weighed monthly, or more often if indicated by risk assessment. Referrals were made to the GP where there was a concern that someone was losing weight, or was putting on too much weight. Where professionals had been consulted we saw details of instructions had been included in the care plans. The service was awarded a Food Hygiene Rating of 5 (very good) by Wokingham Borough Council on 12 October 2017.

People received effective health care support from their GP and via GP referrals for other professional services, such as speech and language therapists and dietitians. People said they could see their GP, other doctors, dentists and opticians when they needed to. Community professionals thought the service supported people to maintain good health, have access to healthcare services and receive ongoing healthcare support.

## Is the service caring?

### Our findings

People were treated with care and kindness. Staff showed skill when working with people and it was obvious they knew them well. People and their relatives told us staff were caring when they supported them. Community professionals thought the service was successful in developing positive caring relationships with people using the service. One relative showed us a video on a telephone of their elderly mother singing with staff. The relative told us how the video had brought a tear to their eye on first seeing the recording as it was a song that had been sung to her by her father in her childhood. The relative added, "This place runs on love and that's unusual."

People's wellbeing was protected and all interactions observed between staff and people living at the service were caring, friendly and respectful. Staff listened to them and acted on what they said. Staff were knowledgeable about each person and what they liked to do. Staff were skilled at recognising if someone was anxious and quickly took steps to support and comfort the person. We also saw people felt secure with staff and turned to them if they were concerned about something or wanted reassurance.

We saw a number of compliments received by the home over the previous 12 months. We saw a message from one relative, who wrote thanking staff for the care they had given to their family member. The relative had written, "To all the staff... Thank you so much for your loving care you gave to [Name] while he was in Suffolk Lodge." Other compliments seen included, "Thank you so much for the loving care you showed to my mum", "The carers are very caring... having worked in care of the aged, I am appreciative of the professional care she [their family member] receives. I often do thank you for all the love and care that surrounds mum..." and "Thanks to all Suffolk Lodge staff who are so patient, love and take such good care of an incredible woman, my gran".

People felt staff knew how they liked things done and did things in the way they preferred. People's rights to privacy and dignity were supported. They said staff treated them with respect and dignity and one person added, "They are pretty good actually." Community professionals said staff promoted and respected people's privacy and dignity. One professional added, "[I have] observed staff always to be respectful and have empathy towards resident's needs."

The care plans set out instructions to staff on how to provide care in a way that maintained, as much as possible, the person's level of independence. The care plans gave details of things people could do for themselves and where they needed support. One person told us, "They are calm. I have independence."

People's right to confidentiality was protected. All personal records were kept securely and were not left out in public areas of the service.

## Is the service responsive?

### Our findings

People said they could see their family whenever they wanted and were supported to maintain contact with people important to them. Where possible the service provided access to local events to enhance social activities for all people to access and get involved with, taking into account their individual interests and links with different communities.

The service employed two activity co-ordinators who delivered an exceptional and varied activity schedule that all staff were involved in developing and delivering. People were very complimentary about the activities on offer saying they were able to participate in activities they enjoyed. One person commented, "Lots of activities going on." and another person said, "They [activities] are very good." A relative told us, "She loves the singing." Activities provided included: board games; quizzes; arts and crafts; singing; darts; gardening club; karaoke; Sunday paper discussions; church services; films; ball games and external entertainers. People could choose what they wanted to do and were also able to try out new activities when identified. Where people did not want, or were unable, to join organised activities staff spent one to one time with them chatting or doing something the person wanted to do. The activity programme was planned to include every day of the week, whether or not the activity co-ordinators were on duty.

One person told us, "I look forward to the different games. I really look forward to the afternoons. This afternoon they have got a chap with a guitar." During the afternoon of the second day of our inspection there was a musical activity taking place with a person playing the guitar and leading a sing-a-long. People and staff were very engaged in the activity and joining in. Some people were playing different instruments and taking turns. Others were dancing with other people and the staff. There was singing and exercise involved and care staff, housekeeping staff, the managers and the budgies all joined in.

We saw a number of compliments relating to activities and the positive impact they had on people living at Suffolk Lodge. For example, the service arranged for one person to join an external singing club and attend with an external care worker. The care worker gave feedback to the service, "Just an email on [Name's] first Singing for the Brain session. When we arrived, [Name] seemed a little uneasy and wouldn't let go of my hand. We sat down and introduced ourselves to the lady organising the session. [Name] and I sat together with the group and began to sing. [Name] knew 90% of the songs and did really well joining in the actions etc. it was such a pleasure to be with [Name] while he joined in with everyone. When the session ended [Name] had a tear in his eye and thanked me for taking him to the session. We walked back singing the whole way home! It was a lovely morning."

One visiting entertainer commented, "The residents of Suffolk Lodge are always happy and relaxed. ... The carers at Suffolk Lodge are outstanding, joining in with the residents and making sure they have the best time possible." Another visiting entertainer said, "... the clients have actually been encouraged to participate. This is done with enthusiasm and enjoyment. A joy for all." Comments from relatives and visitors included, "Activities by the two ladies at Suffolk Lodge are very good. I think they make everyone (residents and carers) very happy. This makes Suffolk Lodge very welcoming." and, "[Name] has been cared for at Suffolk Lodge and I cannot speak highly enough of the attention and kindness she receives. All the staff are

cheerful and the atmosphere friendly and catering excellent. The residents are stimulated and involved."

In their Provider Information Return the registered manager explained what they had done in the past 12 months to help individual people continue previous activities and interests and combat social isolation. She explained, "One person was a member of [Name of church] and we have arranged for her to be accompanied to visit every Sunday as possible, this is something she was unable to do before moving to Suffolk Lodge and she is thrilled to be able to attend and see her friends. Another resident likes to play the piano, it was difficult for him to have full access to the home's piano, we managed to obtain a key board and he now has it on his unit to play at any time he wishes. He has told us he loves to have it near to him and feels good. This has also supported him to be independent as his option is he can go and play his keyboard by himself or to the other residents. This is what supports the person-centred care plans - by looking at what we can do for that individual. We have another resident who was a bus driver for many years, we arranged with the bus company to take him on his old route around Wokingham on the bus he drove (or similar) ... This was a great success and he thoroughly enjoyed the experience of being able to do this... Another resident was a teacher for all of his working life, he is now being empowered to take charge of word games and other activities, his confidence has grown ... and the residents love it when he is in charge - lots of laughter from them as they play the games. All residents have key workers, this supports communication with families and staff for the wellbeing of the individual. All staff now have name badges, this helps visitors, residents get to know their names. All professionals and visitors now have visitor badges, this helps support and respect that it's the resident's home and they can also see by the badge that they are visitors."

People received support that was individualised to their personal preferences and individual needs. People's likes, dislikes and how they liked things done were explored and incorporated into their care plans. Whilst people were involved in drawing up their care plans the service was looking for innovative ways to involve them more. Community professionals thought the service provided personalised care that was responsive to people's needs.

Information was provided to help people and their relatives understand the service available to them. The registered manager was aware of the Accessible Information Standard (AIS). From August 2016 onwards, all organisations that provide adult social care are legally required to follow the Accessible Information Standard. The standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of people who use services. The standard applies to people with a disability, impairment or sensory loss and in some circumstances to their carers. The registered manager was aware of the AIS and had plans to review and update people's care plans, documenting their communication needs in a way that meets the criteria of the standard.

People knew what to do and who they would talk to if they had any concerns. They were confident action would be taken if they did raise concerns with the staff or registered manager. Staff were aware of the provider's complaints procedure and knew what to do if anyone raised a concern. We looked at the complaints records for the previous year. We saw the complaints and outcomes were recorded with details of the actions taken to resolve the concerns raised.

We saw a compliment from a visitor, "Suffolk Lodge is friendly, welcoming and homely. Some staff really do go the extra mile and this really helps to create a positive atmosphere. I admire their energy! Yes, there have been some concerns which is only to be expected, however it's how they dealt with them that is important and I have been pleased with Suffolk Lodge's approach so far ... great manager. Some fantastic staff, really should be acknowledged."

## Is the service well-led?

### Our findings

At the last inspection on 22 and 23 August 2017 we found a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The registered person had not established an effective system to enable them to ensure compliance with the fundamental standards. At this inspection we found the provider and registered manager had taken the action they said they would take to improve and had met this regulation.

There had been a review of staffing at provider level. A new head of governance and quality assurance had been appointed and, together with the deputy head of regulated services, was in the process of reviewing and streamlining the various audits and monitoring systems. It was clear that staff at provider level, the registered manager and all service staff had been working hard, and were fully committed to making improvements at the service and ensuring compliance. Various different checks and audits had been introduced and were effective in monitoring the quality of the service provision. Where any issues were identified we saw action had been taken promptly. The measures introduced had helped the registered manager to reach and maintain compliance with the fundamental standards.

In their Provider Information Return the registered manager explained what they had done in the past 12 months in relation to improving the management of the service. "We have inspection/audits carried out by external (Wokingham Borough Council Team) and Optalis Quality Assurance Team - action plans are made from the visits and actioned with appropriate action to the most urgent. Medicines are audited in house and by external audits carried out by [Name of a high street chemist], this has been completed for this year with no urgent concerns, good comments [were] made by auditor. There is a robust health and safety audit completed every month and an action plan is made from this of any concerns... Regular fire drills are completed in house and fire testing is completed weekly to the system and any concerns are dealt with as a matter of urgency. Audits are carried out on medicines, cleanliness, care plans, Health and Safety, Infection Control. We have started a care governance [meeting] each month where we discuss and cross reference all care plans, as well as levels of care changes ensuring they are current and in date with the care and the needs of the resident... The registered manager works alongside the new Quality Assurance team at Optalis to support any trending changes and knowledge. The registered manager also works alongside staff to support them... All meetings are held monthly and fully documented and any actions are audited on the [home's] Continuous Improvement Plan, showing honesty and transparently." The various policies and documents we sampled supported this statement.

The service had a registered manager. 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. All of the registration requirements were met and the registered manager ensured that notifications were sent to us when required. Notifications are events that the registered person is required by law to inform us of. Records were up to date, fully completed and kept confidential where required.

The maintenance team ensured health and safety checks of the premises were carried out, any issues identified were dealt with. Staff carried out other health and safety checks on a daily or weekly basis, for example checks of hot water temperatures and food safety checks. All records and audits seen were up to date and details of actions taken to remedy any concerns demonstrated actions were completed promptly.

People benefitted from a staff team that were happy in their work. Staff enjoyed working at the service and thought the service was managed well. They felt supported by the management and their colleagues and felt they were given training that helped them provide care and support to a good standard. Staff were asked for suggestions on how to improve the service. They felt that any suggestions they made were taken seriously. Community professionals said the service demonstrated good management and leadership and delivered high quality care.

People were happy living at the home. Just after Christmas 2017 a relative visited Suffolk Lodge to thank them for a wonderful festive time. They said their mum was really happy and the staff worked really hard to ensure all residents had a great time, she added what an amazing caring team and the difference it had been in one year was truly fabulous. Other compliments made about the service included, "Every time [Name] visits he is impressed by the quality of care and the time people take to look after the residents and listen. It is a very impressive community." and, "When I came in on Friday the staff that cared for [Name] were so attentive and caring. You have such a lovely team there. Thanks for all your support with [Name]." We also saw feedback from students who had been on placement at Suffolk Lodge, "Thank you having us, it was a pleasure meeting you all. Thanks for giving us the opportunity to gain new skills and experience." and, "I am a student ... on an elective placement at Suffolk Lodge and have observed [staff name] care to the residents on numerous occasions. [Staff name] is hugely person-centred to all residents in her care and treats them all with dignity and respect at all times. [Staff name] shows her empathy, compassion and care, she is such a happy, lovely, professional person and I am proud to have learnt from her and call her a colleague in the caring profession."