Folcarn Limited

The Old Lodge Nursing Home

Inspection report

Sandypits Lane
Etwall
Derby
Derbyshire
DE65 6JA

Tel: 01283734612

Date of inspection visit:
14 March 2017

Date of publication:
20 April 2017

Ratings

Overall rating for this service	Good

Is the service safe?	Good
Is the service effective?	Good
Is the service caring?	Outstanding ☆
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

The Old Lodge Nursing Home provides support and nursing care for up to 47 older people, some of whom are living with dementia, have an acquired brain injury or neurological disorder. At the time of our inspection there were 43 people living in the home. At the last inspection, in July 2014, the service was rated Good with outstanding in our question 'Is this service caring?' At this inspection we found that the service remained Good and outstanding in caring.

People continued to receive safe care and there were enough staff to provide support to people to meet their needs. People were consistently protected from the risk of harm and received their prescribed medicines safely. Staff had been suitably recruited to ensure they were able to work with people who used the service.

The care that people received continued to be effective. People made decisions about their care and staff sought people's consent. Where people lacked capacity they were helped to make decisions. Where their liberty was restricted, this had been identified and action taken to ensure this was lawful. People received supported to stay well and had access to health care services and were able to choose what to eat. Staff received training to meet the specific needs of people who used the service.

The care people received remained outstanding. People were treated with dignity and staff were caring and kind. Staff helped people to make choices about their care and their views were respected. The care records detailed how people wished to be cared for and people could plan their future care and make advance decisions.

People were involved in the planning and review of their care and support and family members continued to play an important role. Where people had any concerns they were able to make a complaint and this was responded to.

The service continued to be well-led. Systems were in place to assess and monitor the quality of the service. People and staff were encouraged to raise any views about the service on how improvements could be made. The manager promoted an open culture which put people at the heart of the service.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe? The service remains good.	**Good**
Is the service effective? The service remains good.	**Good**
Is the service caring? The service remains outstanding.	**Outstanding** ☆
Is the service responsive? The service remains good.	**Good**
Is the service well-led? The service remains good.	**Good**

The Old Lodge Nursing Home

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.

This was a comprehensive inspection that was completed by one inspector on 14 March 2017 and was unannounced.

The provider 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. The provider returned the PIR and we took this into account when we made judgements in this report. We also reviewed other information that we held about the service such as notifications, which are events which happened in the service that the provider is required to tell us about, and information that had been sent to us by other agencies. This included the local authority who commissioned services from the provider.

People who used the service had complex needs and some people were unable to communicate verbally with us. We spent time observing how staff provided care for people to help us better understand their experiences of the care and support they received. We also spoke with five people who used the service and three members of care staff, two student nurses, a registered nurse, the provider and the registered manager. We also spoke with five relatives, an advocate and three health care professionals.

We looked at four people's care records to see if their records were accurate and up to date. We also looked at records relating to the management of the service including quality checks.

Good

Is the service safe?

Our findings

The staff understood how to protect people from harm and when to consider if it was unsafe and they knew how to report concerns. One member of staff told us, "We are all very clear on what we need to report and we certainly would. We have high standards here and maintaining people's safety is vitally important to us." The staff worked in a safe manner when helping people. For example, when supporting people to move, the staff ensured the footplates were attached and talked to them about what was happening. One person told us, "The staff are very kind and always do checks before they help me to move from my chair. I feel quite safe with them." The care records included information on how to support people to move and associated risks and this matched what we observed.

People felt there were enough staff on duty to support them safely and they had the help and support they needed, when they needed it. Staff spent time talking with people as well as providing personal care. Some people were cared for in their room and we saw staff were available where the bedrooms were located, to provide care and to check on people's welfare. When new staff started working in the service all recruitment checks had been carried out. These checks included requesting and checking references of the staffs' characters and their suitability to work with the people who used the service.

People received their medicines when they needed them and staff spoke with them and explained what the medicines were for. One person told us, "I'm happy that the staff are responsible for my tablets as it's difficult for me to do them." A relative told us, "I see the staff give medicines to [Person who used the service] and I know its right because that's what they had at home." Where people needed medicines to manage pain or anxiety, there was a record of why people may need these and people told us they received them promptly. Records were available to demonstrate when people took their medicines and any reason why this had been refused.

Good

Is the service effective?

Our findings

People were encouraged to make decisions about their care, their day to day routines and preferences. Staff had a good understanding of service users' rights regarding choice. Where people were unable to make decisions themselves, capacity assessments had been completed and they were supported by family and advocates to make decisions that were in their best interests. The registered manager understood where improvements could be made to identify individual assessments. People were still supported to have as much choice and control as they were able to in all other areas of their daily life. Where restrictions had been identified deprivation of liberty authorisations had been applied for to ensure any restriction was lawful.

People chose what to eat and where they wished have their meal. Meals were attractively presented. When people need softened food, this was blended separately so people could still taste all the different foods. Where people were at risk of weight loss they had been referred to a dietician and their weight was monitored. People were offered supplements and a nutritious blended mousse or smoothie to people mid-morning. One member of staff told us, "We like to prepare our own supplements which contain fresh ingredients and we have found for people who are at risk nutritionally, this has supported them to gain weight, where this was needed." Drinks were served throughout the day and when people asked for a drink these was provided. Staff took the opportunity to offer other people in that area another drink.

People were supported by staff who had the knowledge and skills to provide care and they told us they were confident that staff provided helped them in the right way. For example, staff had received specialist training in recognising the problems associated with eating and swallowing. One health care professional told us, "I can rely on the information from staff and if they have any problems they will ask for support." The registered manager assessed and monitored the staffs learning and development needs through regular meetings with the them and appraisals. Staff competency checks were also completed that ensured staff were providing care and support effectively and safely.

People were supported with their day to day healthcare and attended appointments to get their health checked. One person told us, "I'm still very much involved with my own health care. When I have an appointment, the staff will come with me. It doesn't matter what it's for, if it's at the hospital or the dentist." A relative told us, "The staff are very good at organising the right treatment. We are fully involved and we like to go with [Person who used the service] but if we can't the staff always stay with them and then let us know what has happened." People had an agreed health plan which recognised their complex health needs and included any professional's advice.

Outstanding ☆

Is the service caring?

Our findings

People liked to live in their home and told us the staff were kind and caring and were always happy to help. One person told us, "The staff are like angels, so caring and lovely." The staff showed a passionate commitment to enabling people, used adult language when speaking with people and supported people differently according to their preferences. Where people had limited verbal communication we saw staff using gestures and language that was meaningful to that person. People were given time to consider their options before making a decision and staff encouraged people to express their views and listened to their responses.

People were treated with kindness and the staff knew each person, their personal histories and their interests well. People were comfortable and happy around staff and there were smiles and laughter between them when they spent time together. One person told us, "It makes a difference when the staff care about you. They are kind and considerate and nothing is too much trouble." One health care professional told us, "The level of care, compassion, and understanding is above and beyond that offered in other care homes." The staff talked with people about their lives, who and what mattered to them and significant events. The care records included information about their life history, family relationships and important events and religious beliefs. People's diverse needs were recognised and staff enabled people to continue to enjoy the things they liked. People could maintain relationships with family members and told us they were able to visit at any time.

People could make choices and decisions about their care. The service had gained awards for promoting and retaining people's dignity and end of life care from Derbyshire County Council. People were able talk about how they wished to be cared for and supported in the event of their death. One person told us, "I don't think it's morbid to talk about these things. I have my own funeral plan too and everything is arranged." There was a memorial garden and a rose was planted to commerate people's lives. One person told us, "It's nice to go there and have the flowers to help us to remember."

People's privacy and dignity was respected. We saw staff introduced themselves when entering people's rooms and knocked on the door. Where people received any personal care, they were supported to a private area. One relative told us, "They are very respectful. Respect is at the core of what they do. We haven't had any concerns and would be surprised if we ever do."

Good

Is the service responsive?

Our findings

People were supported to explore different experiences and staff recognised people's diverse interests. People were helped to plan any activity and one person told us, "If I want to go shopping, I just let the staff know and they will help me to arrange it and come with me." Where people remained in their rooms and may be at risk of social isolation, we saw staff spent time with them. One relative told us, "Since being here, they have greatly improved. They are much more social able and the staff have been really supportive and engaging with them. The difference is immense."

People received care that met their individual needs. The care was planned and reviewed with people and staff knew people's preferences for care and what was important to them. They recognised people's individuality and one relative told us, "They think about how people want to be supported and include the whole family to help tell a story about the person. They know people so well, from the food they like to their personal history. You need to get to know the person and who they really are and the staff do that here."

People knew how to complain if they needed to and were confident any concerns would be taken seriously. One relative told us, "It's very easy to speak with the staff and I would say we are actively encouraged to talk and say if we are worried about anything." A copy of the complaints procedure was displayed and people knew how to raise a concern. One person told us, "If I was worried about anything I could talk with any of the staff or on a Friday we have 'tea with Matron' she always wants to know how we are."

Good

Is the service well-led?

Our findings

The service had a registered manager who spent time working alongside staff. We saw their values were based on respect for each other and putting people at the heart of the service. The staff told us that the manager was approachable and provided leadership, guidance and the support they needed to provide good care to people who used the service. One member of staff told us, "We are very lucky here to have such a good team of staff. We get support from each other as well as the Matron who has high standards which we all follow." One health care professional reported, "The manager inspires and enthuses her staff to have interest and a real desire to support this complex group of people."

The provider and registered manager carried out quality checks on how the service was managed. These included checks on personal support plans, medicines management, health and safety and care records. Where concerns with quality were identified the registered manager recorded how improvements were to be made. The registered manger knew which incidents needed to be reported to us and agreed that where restrictions to people's liberty had been authorised, we would be informed.

People and their family were regularly involved with the service in a meaningful way. They were given the opportunity to comment on the quality of the service through an annual survey and within meetings organised for the Friends of the Old Lodge. Compliment cards were displayed and recorded; 'Thank you for the dedication and the exceptional level of care. The staff have made such a difference to their quality of life.' 'You have been such a great care home and helped me on my way to recovery.' And 'Everyone has been friendly and helpful.' This showed how people were satisfied with the care and support they received.