

Croftwood Care UK Limited

Loxley Hall

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

Loxley Hall is a residential care home providing nursing and personal care for up to 40 people. The service provides support to older people with nursing needs. At the time of our inspection there were 36 people using the service in a purpose-built building.

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

People received safe care. Medication systems had been improved and were now safely managed. The oversight of risks faced by people from their health conditions and the environment had been reviewed and were up to date.

People told us they felt safe, and the staff team were very kind to them. This was echoed by relative comments we received. People felt that staff knew their individual preferences and that they were enabled to be as independent as possible.

Staff levels met the needs of people and staff worked to ensure that the needs of people were paramount. The building was clean and hygienic, and this was confirmed through what people told us as well as our observations.

Robust auditing was now in place with a variety of audits being carried out to monitor the quality of care provided at Loxley Hall. People told us they knew who the registered manager was and saw them as approachable and providing a well led service. Relatives commented that the management team were very open and transparent with them and communicated important information to them when necessary. Relatives considered the service to be caring and managed well.

The provider/manager asked all people living in the home, their relatives and staff to comment on the care provided. Staff considered the registered manager to be approachable and had taken time to recognise the efforts of the staff team. An ethos of teamwork had been created within the service and staff commented positively on all aspects of their day to day experiences.

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.

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 1 June 2022) breaches in safe care and governance of the service were identified. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from Requires Improvement to Good based on the findings of this inspection.

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

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Loxley Hall

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 Health and Social Care Act 2008.

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

This inspection was carried out by 1 Inspector.

Service and service type

Loxley Hall is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Loxley Hall is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the 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 the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 5 people who used the service about their experience of the care provided as well as 4 relatives. We spoke with 12 members of staff including the registered manager, clinical lead, administrator, registered nurses, care workers and ancillary/maintenance staff. We reviewed a range of records. This included 6 people's care records, risk assessments and medication records. We looked at 4 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We looked at various documents and continued to seek clarification from the provider to validate evidence.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question Requires Improvement. At this inspection the rating has changed to Good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection the provider had failed to manage medicines safely, people were placed at risk of harm. 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.

- Medication was safely managed.
- People told us that they always received their medication when they needed it.
- Some people confirmed that they managed their own medication. This evidenced that people's independence was promoted.
- All medication was safely secured. Protocols for the administration of "when required" medication were in place to ensure that medicines such as painkillers were given consistently and safely.
- All staff received training in medication administration and had their competency checked on a regular basis.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to manage medicines safely so people were placed at risk of harm. 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.

- Risks faced by people in their daily lives were safely managed.
- People at risk of malnutrition or dehydration, for example, had their weights and nutritional intake monitored closely. Where people continued to be at risk, other agencies were contacted to provide advice assistance and referrals made.
- All risk assessments were up to date and were reviewed regularly.
- People had individual plans to ensure that they could be safely evacuated in the event of an emergency. These were updated and reviewed.
- The service routinely tested fire detection and prevention systems. All equipment used by people was safe

and tested regularly.

Systems and processes to safeguard people from the risk of abuse.

- The provider's safeguarding policies and procedures protected people from the risk of abuse, because staff were trained and understood how to follow them. People were protected by the policies and procedures used by the provider.
- People told us that they felt safe living at Loxley Hall. They said, "Oh yes I do feel safe, I have no worries at all" and "Staff are very kind and I feel comfortable with them". These views were echoed by relatives.
- Staff were clear about the types of abuse and the actions they needed to take in order to report any concerns.
- The service co-operated with safeguarding teams when needed and provided a monthly commentary to the Local Authority about those incidents that did not meet the triggers for more in-depth investigation.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.
- The capacity of people had been assessed to determine their ability to make decisions for themselves.
- Where people lacked capacity, deprivation of liberty orders had been applied for and granted. All orders were current and had not expired.
- Staff had received training in the Mental Capacity Act.

Staffing and recruitment

- Staff recruitment was robust with appropriate checks being made before new staff started work.
- People told us that there was always staff available to assist them and "They [staff] always come quickly if I need something". We observed people being responded to in a timely manner.
- Staff rotas confirmed that staffing levels were maintained and that these were based on the dependency needs of people on a regular basis.
- Staff told us that there were enough staff to meet the needs of people.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

- People living at Loxley Hall were able to receive visitors.

Learning lessons when things go wrong.

- All accidents and incidents were recorded.
- The frequency and causes of incidents or accidents had been analysed to see if a pattern could be found to prevent future re-occurrence,

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 our last inspection we rated this key question Requires Improvement. At this inspection the rating has changed to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements.

At our last inspection the provider had failed to evidence systems of effective governance, including assurance and auditing systems and processes. 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 provider had a robust audit system in place. This helped ensure people received consistent quality care.
- A variety of audits were undertaken on a regular basis to assess all aspects of the support provided to people living at Loxley Hall.
- Audits included an assessment of care plans, medication, people's dependency levels, the environment and risk assessments.
- A representative of the provider visited regularly to assess the quality of the care provided. Any actions identified were addressed and actioned.
- The registered manager always notified us of key events.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people. Continuous learning and improving care

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- People living in the home knew who the registered manager of the service was and thought that the home was well-managed.
- Relatives told us, "[name] has very complex needs but the staff team have responded to this in a caring and responsive manner" and "Residents are provided with what they want and not what staff want".
- Staff told us that they considered the manager to be approachable, that the service was well run. They told us, "The manager along with the nursing team, leads from the front; they each instruct, guide, support and quality control all care interventions, and promote transparency throughout".

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

- The registered manager was aware of their obligations in relation to the duty of candour.

- The rating from the previous inspection was displayed within the service and on the provider's website.
- Relatives told us, "The team have been available to discuss [name's] needs, listening to, respecting and acting on any observations made by the family" and "They [staff] are open and ring us if [name] has had a fall, for example."

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

- People were involved in their care. This related to individual care as well as the performance of the service of catering for all people's needs and gathering their experiences.
- People told us that they were always asked by staff, when they were being supported, their preferences were respected.
- People had the opportunity to attend residents meetings to discuss their experiences of the support offered at Loxley Hall.
- Staff, people and their relatives had been invited to comment on the care provided through regular surveys.

Working in partnership with others

- The service continued to work with other professionals to ensure the safe care of people.
- The service had strong links to a local doctor's practice who visited weekly and were able to identify the health needs of people. In turn the service acted upon medical advice to ensure the health of people was promoted.