

The Hawthorns Lodge Limited

Hawthorns Residential Home

Inspection report

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22 June 2023
27 June 2023

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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

Hawthorns Residential Home is a residential care home providing personal care to up to 15 people, some of whom may be living with a dementia, in one adapted building. At the time of our inspection there were 8 people using the service.

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

People told us they felt safe living at Hawthorns Residential Home. Staff were aware of how to respond and report any safeguarding concerns and were confident this would be dealt with appropriately by the registered manager.

Medicines were managed safely, and people told us they received their medicines as prescribed. Risks to people were assessed and recorded although some records lack person-centred information.

The home was clean and tidy throughout. Some areas of the service were old and worn. A detailed refurbishment plan was not in place. We have made a recommendation about this.

There was enough staff on duty to meet people's care and support needs. A dependency tool was used to calculate safe staffing levels. Some relatives and staff reported concerns over staffing levels when the number of people living at the service increased. The registered manager assured us staffing levels were regularly reviewed and amended to ensure people's needs were met.

Audits were used to monitor the quality and safety of the service. Action was taken when shortfalls were found. People, relatives and staff spoke positively of the management team and said they were able to provide feedback on the service provided.

Strong relationships had been built with other professionals to ensure people had access to the support they required.

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 Care Quality Commission(CQC) website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 21 November 2018).

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.

We undertook this focused inspection to review the key questions of Safe and Well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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

Enforcement and Recommendations

We have made a recommendation that the provider implements a robust refurbishment plan to ensure the service is safe and well-maintained.

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.

Hawthorns Residential 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 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 conducted by 1 inspector and an 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. The Expert by Experience made telephone calls to relatives following the inspection site visit to gather views on the service provided.

Service and service type

Hawthorns Residential Home 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. Hawthorns Residential Home is a care home without 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.

Inspection activity started on 22 June 2023 and ended on 28 June 2023. We visited the service on 22 June 2023.

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 reviewed a range of records. This included 2 people's care records and multiple medication records. We looked at 3 staff files in relation to recruitment. A variety of records relating to the management of the service were also reviewed.

We spoke with 4 people who used the service about their experience of the care provided. We spoke with 5 members of staff including the registered manager, governance manager, deputy manager and care staff. We also spent time observing staff interactions with people, observation of medicine administration and conducted a tour of the service.

Following the inspection site visit, we contacted and received feedback from 4 relatives and 3 staff.

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 good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Systems, processes and relevant training was in place to ensure people were safeguarded from the risk of abuse.
- Staff had good knowledge of safeguarding processes and what to do if they had any concerns. One member of staff said, "I wouldn't hesitate in raising any concerns no matter how big or small."
- People told us they felt safe living at Hawthorns Residential Home. Comments included, "I feel safe. The staff are kind and I have some good friends" and "I am well looked after. I feel safe because I know everyone."

Assessing risk, safety monitoring and management

- Risks to people were assessed, recorded and regularly reviewed. Some risk assessments lacked person centred information.
- Health and safety checks, to ensure the environment and equipment remained safe, were completed on a regular basis.
- We observed some issues, such as windows that were propped open with unsuitable items due to a fault with the sash opening and radiators that were turned on during a very hot day. The registered manager took immediate action to address this.

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. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- Staff were recruited safely. Records in place did not always evidence appropriate professionals had been contacted for references or gaps in employment had been explored.
- A dependency tool was used to calculate safe staffing levels.

- Observations showed there was enough staff on duty to meet people's needs and staffing levels reflected those stipulated by the dependency tool.
- Relatives and staff told us when occupancy levels had been higher, staffing was not always sufficient. Comments included, "When the home has been full, I have had to search around for staff" and "There is enough staff now but if the number of residents increased it is a problem. Staffing doesn't seem to increase when the number of residents increase. The registered manager assured us staffing levels were under constant review and amended to reflect people's care and support needs.

Using medicines safely

- Medicines were stored, recorded and administered appropriately.
- People told us they received their medicines as prescribed. We observed medicines being administered safely during the inspection.

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 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 somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises. Some areas of the service were old and worn. For example, a broken radiator cover and damage to a bath panel and surrounding woodwork which would prevent effective cleaning. The registered manager confirmed these issues had been addressed following the inspection site visit.

Visiting in care homes

- Relatives, friends and professionals were able to visit the service at any time. There were no restrictions in place.

Learning lessons when things go wrong

- System and processes were in place to identify shortfalls and learn lessons when things went wrong.
- Accidents and incidents were thoroughly recorded and included a monthly analysis to help identify any patterns or trends.

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 good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- People, relatives and staff told us they were able to express their views and opinions. Some relatives told us there was a lack of structured engagement, such as regular meetings. We discussed this with the registered manager who explained the service tried to have a person-centred approach and provided time to each individual and their relatives to discuss anything they wished.
- Feedback surveys had been distributed to people and relatives in February 2023. The feedback was very positive.
- Audits and surveys were used to drive improvements. The provider had a business plan in place, however this lacked detailed information in relation to continuous improvements, such as refurbishment work to be completed.

We recommend the provider implements a robust refurbishment plan to ensure all aspects of the service remain safe and well-maintained.

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

- People and relatives spoke positively about the management team and their approach. One relative said, "I know the management well. We have had long conversations about my relatives needs and they listen which has really helped."
- Observations showed strong relationships existed between people and staff. Staff were extremely familiar with people and their care and support needs which helped achieve good outcomes for people.

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

- The registered manager and staff were clear about their roles. Auditing systems were in place to monitor and improve the quality and safety of the service.
- The provider was actively involved in the service. They completed their own monthly quality checks to ensure regulatory requirements were being met.

Working in partnership with others

- Staff worked well with other professionals to ensure people had access to the care and support they needed. For example, a dentist was visiting the service on the day of inspection. A member of staff told us

the dentist had been visiting the home for a number of years.

- Strong working relationships existed between staff and other professionals. Comments from visiting professionals included, "This is a very well-run, organised home where the residents are very happy" and "It is always a pleasant experience when I visit."

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 provider and registered manager understood their legal responsibility in relation to the duty of candour. Policies and procedures were in place to support this practice.