

Indigo Care Services (2) Limited

Lofthouse Grange and Lodge

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

Lofthouse Grange and Lodge is a residential care home providing personal care to people aged 65 and over. At the time of the inspection 71 people were receiving care. The service can support up to 88 people.

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

People were protected from the risk of abuse. Staff received training in this area and knew what actions to take if they suspected abuse.

There were enough staff to meet people's needs and the registered manager followed safe recruitment processes. Risks to people and the environment were considered and regularly reviewed and monitored. Staff supported people with their medicines and kept people safe from risk of harm.

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.

The registered manager had good oversight of the home and the staffing team. There were clear quality monitoring systems and processes in place. Following incidents, the provider ensured lessons were learnt to drive improvement in the service. People and staff felt included in the decisions made at the home and there was an inclusive culture.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 09 June 2020).

Why we inspected

The inspection was prompted in part by notification of a specific incident. Following which a person using the service sustained a serious injury. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

The information CQC received about the incident indicated concerns about the management of falls. This inspection examined those risks.

We have found evidence that the provider has made improvements to the reporting of accidents and incidents and falls monitoring.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Lofthouse Lodge and Grange 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.

Lofthouse Grange and Lodge

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

The inspection was carried out by two inspectors and two Experts 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.

Service and service type

Lofthouse Grange and Lodge 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. Lofthouse Grange and Lodge 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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

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 nine staff including the registered manager, regional support manager, unit manager, care workers, activity co coordinator, and agency staff. We spoke with eight people who use the service and two relatives.

After the inspection

We spoke with 14 relatives over the telephone. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We reviewed a range of records. This included five people's care records and four medicine records. We looked at two staff files in relation to recruitment and staff supervision. We also looked at a variety of records relating to the management of the service, including accident and incident analysis, audits and policies and procedures.

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

- Staff completed safeguarding training as part of their mandatory training and were knowledgeable about safeguarding. The provider also had a safeguarding policy in place for staff to follow.
- People told us they felt safe living at Lofthouse Grange and Lodge. One person said, " I do feel safe, it's the people they are so friendly and kind."
- Relatives also told us that their loved ones were safe. One relative said, " Everything's been good since [person] moved there. The staff seem on the ball; they know [person]. They're very good at checking who's going in and monitoring them. I've no concerns at all that [person] is safe there."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People were protected from risk. Care plans contained detailed risk assessments for people's individual risks.
- There were regular safety audits to ensure the home was in line with all health and safety guidance. This included legionella risk assessments and gas safety checks. We saw that equipment that was in use received regular safety checks.
- Accidents and incidents were recorded and then analysed by the management team. This ensured that trends and patterns would be identified quickly, and action taken in a timely way to prevent reoccurrence.
- The regional support manager had strengthened systems and processes relating to falls in the home following a serious incident. Lessons learnt were cascaded to the provider's other locations.

Staffing and recruitment

- People told us that there were enough staff to meet their needs. One person said, "There's enough staff and they are very good at helping," and "They [staff] come straight away in an emergency. There's enough staff at night."
- The registered manager followed safe recruitment processes. This included reference checks of previous employments and checks with the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- People received their medicines as prescribed.
- People's medicines records contained enough information to ensure staff supported them with the correct medicines, at the correct times.
- Staff were trained in how to manage medicines safely. Their competence to manage medicines was kept

under regular review to ensure their skills and knowledge remained up to date.

- Prior to the inspection the service experienced a delay in a large amount of medicines being delivered. The management team took prompt action to engage with health professionals and pharmacies to ensure medicines were available to people as soon as possible. The registered manager followed this up to prevent further occurrences.

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.

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 meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- 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 were receiving visitors into the home in line with Government guidance.

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.

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

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; Continuous learning and improving care

- Accidents and incidents were analysed and monitored to ensure service development and learning. Following a serious incident there had been reviews of systems and processes and action taken to improve these.

- The provider had a suitable policy in respect of the duty of candour which explained what staff needed to do if certain types of incidents occurred. However, some aspects of the policy had not been fully implemented. We found there had been a delay in one relative receiving information following a serious incident. This was discussed with the registered manager who noted this as lessons learnt.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People were supported by staff with a person-centred approach. This included person-centred details in care plans. Staff's attitude to support included getting to know personal details about people and their preferences.

- People and relatives told us the home was welcoming. One relative said, "The management team are very supportive if you need them. It's got a friendly atmosphere and it feels good."

- People were asked for feedback through various channels. These included resident meetings that generated actions. People would then be updated of when actions had been completed.

- Staff took part in regular daily meetings. This gave them an opportunity to raise any concerns or ideas to make positive changes. One staff member said, "If I had a suggestion I could make one, we also have a suggestions box in the foyer."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The service had a registered manager and a management team who understood the regulatory requirements. Everyone we spoke with told us the registered manager was approachable and supportive.

- The provider and registered manager regularly completed a range of audits to assess the quality and safety of the service. These audits identified some areas for improvement and action had been taken to address these issues.

- The registered manager pro-actively provided information to CQC following any significant events at the service, as required by the regulations. The management team were clear about their roles and responsibilities and understood their legal requirements.