

## Mr Asif Iqbal Alvi & Muhammad Fayyaz Chauhdry

# Afton Lodge Care Home

## **Inspection report**

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#### Ratings

Overall rating for this service	Good •
Is the service safe?	Requires Improvement
Is the service well-led?	Good

## Summary of findings

### Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

#### About the service

Afton Lodge Care Home is a residential care home providing personal care to up to 27 people. At the time of our inspection there were 21 people using the service. Some people were living with dementia. Accommodation was provided throughout one adapted building.

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

#### Right Support:

Some improvements were needed to demonstrate people received their medicines as prescribed. Some refurbishment and redecoration of the home was needed. Plans were in place to address any shortfalls in the standards of the property. Regular checks and servicing of the property and equipment was undertaken to ensure people lived in a safe environment.

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. Risk assessments and care plans had been developed to meet people's needs.

Staff were recruited safely, and staffing levels were safe. Staff knew people well and trusting relationships had been formed.

People were supported to access healthcare and other specialist services. Staff worked closely with other professionals and organisations to ensure positive outcomes were achieved for people.

#### Right Care:

People received a caring service and consistently told us they were happy living at Afton Lodge Care Home.

Staff protected and respected people's privacy and dignity, understanding and responding to their individual needs. People could communicate with staff because staff supported them consistently and understood their individual communication needs.

People had opportunities to participate in activities they were interested in. Family members and friends confirmed they could visit at any time.

#### Right Culture:

The service was well-led and staff felt supported by the registered manager and wider management team.

The provider had governance systems in place which identified and managed risks through audits and action plans.

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 17 November 2017).

#### Why we inspected

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

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

#### Recommendations

We have made a recommendation about medicines training.

#### 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?	Requires Improvement
The service was not always safe.	
Is the service well-led?	Good •
The service was well-led.	



## Afton Lodge Care 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.

#### Inspection team

This inspection was carried out by 1 inspector.

#### Service and service type

Afton Lodge Care 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. Afton Lodge Care 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.

#### 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 4 people who used the service, 4 family members and 1 family friend about their experience of the care provided. We observed interactions between staff and people who used the service.

We also spoke with 7 members of staff including the registered manager, compliance manager, deputy manager, care and ancillary workers.

We reviewed a range of records. This included 5 people's care records and multiple 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 were reviewed.



## 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. At this inspection the rating has changed to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

#### Using medicines safely

- Medicines were not always managed safely. One person's medication administration record had been altered by staff which made the record initially confusing to follow and difficult to establish if the person had received their medicines as prescribed.
- Guidance was not in place for all prescribed medicines administered on an 'as required' basis. The registered manager explained the guidance had been accidently archived and took immediate steps to address both issues we had identified.
- Medicines were administered by staff who were observed to assess competency and had received training however the only training accessible was online. The compliance manager told us they would complete new observations of staff competency based upon our findings. The registered manager also committed to contacting the local authority to request a full audit of medicines practices at the service.

We recommend the provider reviews the quality of the training provided to staff around medicines management.

- Other medicines records were maintained in line with best practice. This included when people were prescribed creams.
- Systems were in place to ensure the safe storage and disposal of prescribed medicines. This included medicines which needed to be stored in separate controlled drugs cabinets.

#### Preventing and controlling infection

- Improvements were needed to ensure people were fully protected from the risk of infection.
- Areas of the service needed refurbishment to ensure safe and hygienic standards were maintained. Bathrooms needed to be upgraded and some flooring within the service needed to be replaced. These issues were known to the provider and a full and detailed refurbishment plan had been developed to improve the quality of the environment.
- The service did not employ dedicated domestic staff throughout the weekend which meant thorough cleaning was only completed during the week. We did not identify any areas of the home to be unclean however we considered the impact when care staff picked up additional duties such as cleaning. We discussed with the registered manager the need to keep domestic staffing levels under review.
- Other systems to prevent and control infection were appropriate. Systems were in place in the event of an outbreak of an infectious illness at the home.
- Staff had completed appropriate training and had access to adequate supplies of PPE.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place to protect people from the risk of abuse. Staff received training and understood the actions they must take if they felt someone was being harmed or abused.
- Referrals had been made to the local authority safeguarding team when abuse had been suspected and investigations had been completed.
- There was a system in place to record and monitor accidents and incidents. Accidents and incidents were reviewed on a regular basis by the registered manager. This enabled them to analyse trends and identify any lessons learnt.

Assessing risk, safety monitoring and management

- People's needs were appropriately assessed; care plans had been developed to minimise risk to people's health and wellbeing. People also had the equipment they needed to keep them safe.
- Throughout our inspection, we observed safe working practices, such as moving and handling being carried out.
- Routine checks on the environment and equipment were up to date and certificates were in place to demonstrate 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

- Staffing levels were safe. There were enough staff on duty to attend to people's needs and this was confirmed by people who lived in Afton Lodge Care Home. One person said, "I don't use my call bell much. If I do, they come pretty quickly." A family member commented, "I feel there are enough staff. There is always someone floating round."
- Staff we spoke with were able to clearly describe peoples care needs and knew people well. A number of staff had worked at the service for many years.
- People spoke positively about the staff and the care they received. A family member told us, "The staff are lovely, very pleasant."
- Staff were safely recruited. Appropriate checks had been made before applicants were offered employment.

#### Visiting in care homes

• People were able to receive visitors without restrictions in line with best practice guidance. A family member said, "I can visit whenever. I just turn up."



## 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.

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

- There was a longstanding and experienced registered manager at Afton Lodge Care Home who understood their role and demonstrated a commitment to continuous improvement.
- Any shortfalls we identified were promptly addressed during the inspection. Where improvements were already known, for example the improvements needed to the environment, the provider was able to produce an up-to-date action plan.
- Routine checks and audits were completed to monitor the quality of the service. We discussed further training was needed for the staff completing these checks to ensure audits were fully effective in driving continuous learning. The registered manager told us they would further review the current systems in place.
- The registered manager was actively involved in local provider groups. This meant they kept themselves up to date with best practice approaches.
- The registered manager understood their responsibility for notifying us of events that occurred within the service, and we saw that accurate records were maintained.
- The most recent CQC rating was displayed.

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

- We observed people living at Afton Lodge Care Home receiving person-centred care. Staff knew people well and there was a relaxed and homely atmosphere observed throughout our inspection. people told us, "I have lived here a long time. I am comfortable and happy" and, "I like living here." People also told us about the different activities they could choose to participate in.
- Family members told us there was a positive culture. We were told, "[Name] has settled in nicely, "[Name] is always ready to come back after an outing with family" and, "[Name] has a quality of life here."
- The registered manager demonstrated an understanding of their responsibilities under duty of candour.

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

- People felt engaged, involved and well informed. The registered provider sought the views of staff, people who used the service and their family members through individual and group meetings. One person said, "I have no complaints whatsoever about the staff."
- Family members told us they were kept updated about people's needs through regular communications

from the staff team. We were told, "Staff will ring with any concerns."

- Family members also told us they knew how to complain if they needed to and felt confident their concerns would be addressed by the management team. One commented, "The managers listen and will sort out what they can."
- Information contained within care plans demonstrated the staff at Afton Lodge Care Home worked in partnership with other agencies.