

Akari Care Limited

Hilltop Lodge

Inspection report

White Lane
Chapelton
Sheffield
S35 2YH

Tel: 01134680800

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13 January 2021

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Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Good ●
Is the service well-led?	Good ●



Summary of findings

Overall summary

About the service

Hilltop Lodge is a residential care home providing personal and nursing care to older people, some of whom were living with dementia. The service can support up to 61 people. There were 42 people living at the home at the time of inspection.

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

Overall medicines were managed safely. People received their medicines as prescribed. We have made a recommendation that the provider and registered manager ensures care plans and risk assessments contain sufficient detail to enable staff to provide consistent care and support for people.

People's relatives told us they felt their family members were safe living at Hilltop Lodge. Staff understood what it meant to protect people from abuse. They told us they were confident any concerns they raised would be taken seriously by their managers. Robust recruitment procedures were followed. Risks to people's safety and welfare were identified and managed.

Cleaning and infection control procedures had been updated in line with Public Health England (PHE) Covid-19 guidance to help protect people, visitors and staff from the risk of infection. During the summer months some families had met people in the garden and window visits. New arrangements were in place for families to meet in the bistro as this was a designated safe area of the service during the winter months.

The management team were open and clearly committed to the continuous improvement of the service. People were listened to and complaints were taken seriously.

The provider had system in place to monitor the quality and safety of the service. These were effective in making improvements to the service.

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

Rating at last inspection

This service was registered with us on 14/11/2019 and this is the first inspection.

Why we inspected

We received concerns in relation to the management of medicines. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

This report only covers our findings in relation to the key questions 'is the service safe?' and 'is the service well-led?' which contain those requirements.

We looked at infection prevention and control measures under the key question 'is the service safe?' 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 coronavirus and other infection outbreaks effectively.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe section of this full report.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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.

Hilltop 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 Care Act 2014.

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 one inspector, a specialist advisor and an 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. Two inspectors provided additional support to complete telephone calls to care staff.

Service and service type

Hilltop Lodge is a 'care home.' People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

This inspection was announced. We gave the service short notice of our inspection. Due to the COVID-19 pandemic, we needed to check the COVID-19 status of the home and plan to enter the home safely to reduce the risk of infection transmission. Inspection activity started on 13 January 2021 and ended on 15 January 2021. We visited the home on 15 January 2021.

What we did before the inspection

We reviewed information we had received about the service since registration. We sought feedback from the local authority, professionals who work with the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with five people who used the service and 12 relatives about their experience of the care provided. We spoke with 13 members of staff including the regional manager, the registered manager, senior care workers, care workers, cooks, the laundry assistant and the office staff.

We reviewed a range of records. This included five people's care records and multiple medication records. We looked at four 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 continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with two professionals who regularly visit the service.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Overall medicines were managed safely. However, for some people requiring support with insulin and oxygen the care plans were not sufficiently detailed or were not followed by staff. We found no evidence people had been harmed and the provider took immediate action to rectify this concern and organise staff supervision where necessary.
- Medicines were stored securely and within safe temperature ranges.
- Each person had a medication administration record (MAR). This should be signed and dated every time a person is supported to take their medicines or record a reason why any medicine is declined. These were completed for each person.

We recommend the service ensures care plans and risk assessments contain sufficient detail to enable staff to provide consistent care for people.

- Senior care staff took responsibility for administering medicines. These staff had received training in medicines management and their competency in this area was checked.
- Where people were prescribed medicines on an 'as required' basis (PRN). There was clear guidance for staff on when the person may require a PRN medicine.

Assessing risk, safety monitoring and management

- Risks to people were safely managed.
- Staff knew people well and were knowledgeable about the risks involved in their care. However, as the provider was in the process of changing from paper care records to electronic care records, we found not all safety alert systems had been set up on the electronic system. For example, alerting staff to skin integrity problems such as existing wounds or vulnerable pressure. We told the manager about this who took immediate action to ensure all safety alerts were set up on the electronic system.
- Relatives we spoke with felt their family member was safe living at the home. One relative said, "My [relatives] totally safe, we are delighted with the service."
- Care records contained detailed, personalised evacuation plans (PEEPs) which showed what support people would need to remain safe in an emergency such as a fire in the home.
- The premises were maintained safely. Records showed all installations and equipment were checked, maintained and serviced.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse.

- People told us they felt safe. One person said, "Oh yes, I'm safe here its smashing." Another person said, "Yes, I feel safe here."
- The provider had systems in place to protect people from harm. The registered manager understood their responsibilities. Any concerns raised were acted on and reported to the relevant authorities.
- Staff received safeguarding training and knew how to recognise and report any concerns about people's safety and welfare.

Staffing and recruitment

- There were enough suitably trained and competent staff to keep people safe and meet their needs. However, following the inspection we received some mixed feedback about staffing levels. Some staff told us there were enough staff, whilst others said they felt there was not enough staff to keep people safe. We spoke to the regional manager about the concerns about staffing levels. They took immediate and responsive action to review their staffing levels. This resulted in an increase of staff on the morning shift which led to an improvement in the level of care and support people were receiving.
- Recruitment of new staff was done safely. All the required checks were completed before new staff started work.

Preventing and controlling infection

- The home was clean and there were no unpleasant odours.
- Staff were provided with and used personal protective equipment such as gloves and aprons.
- People told us the home was always clean. One person said, "The best thing is the facilities, new, clean and nice furnishings. It's ideal for [my relative]."

Learning lessons when things go wrong

- The provider had systems in place to support the learning of lessons when things went wrong.
- Accidents and incidents were recorded and reviewed to look for trends or patterns. This included looking at actions to reduce the risk of recurrence.
- Information was shared across the organisation and discussed in staff meetings to support learning and promote good practice.

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.

This is the first inspection for this newly registered service. This key question has been rated 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

- The management team and provider promoted a positive culture within the home.
- Staff felt the culture was person-centred, open, and inclusive. One staff member said, "Talking to the registered manager is like talking to your mum, you tell them [registered manager] something and they [registered manager] sort it out for you. It doesn't matter what time, they [registered manager] are always there for you."
- Relatives we spoke with told us they found the management team very approachable. One relative told us, "Oh yes, it is well run and organised, and the manager is approachable and lovely."
- The provider was committed to improving people's experiences through continuous learning and development.

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 understood their regulatory requirements and had submitted statutory notifications to the CQC, to inform us of important events such as accidents, incidents, and safeguarding concerns.
- Throughout the inspection the registered manager was honest and open with us and any concerns we raised were dealt with extremely promptly. They wanted to ensure all their processes kept people safe and protected them from harm.

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

- There was a clearly defined management structure in place. Managers and staff understood their roles and responsibilities. Information about significant events in the service was sent to the CQC as required by law.
- People and staff spoke positively about the way the service was managed. For example, one person said, "The best thing the manager is exceptional they have always got time for you and if they have not got an answer for you, they will call back with one"
- Regular audits were carried out covering areas such as medication, care records and staff files. Action plans were in place and monitored for any areas where improvements were needed.

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

- The provider engaged with staff through regular staff meetings, one to one supervision and surveys. Staff told us they enjoyed working at Hilltop Lodge, one said, "I love my job, I never want to go home."
- The service worked in partnership with other agencies to ensure people experienced good outcomes. These included health and social care professionals and commissioners of services.
- The provider engaged with people in a variety of ways which included residents' meetings, individual care reviews and surveys. Action was taken in response to people's feedback and this was shared with people.
- The provider engaged with staff through regular staff meetings, one to one supervision and surveys. Staff told us they felt valued, one said, "We can raise any ideas we have during this meeting or ask for help if we want to get better at something."

Continuous learning and improving care

- The manager and staff team had systems in place to learn from accidents, incidents and safeguarding concerns.