

## **Croftwood Care UK Limited**

# Florence Grogan House Residential Care Home

## **Inspection report**

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## Ratings

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

# Summary of findings

## Overall summary

#### About the service

Florence Grogan House is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The home accommodates up to 40 people in purpose-built premises. This includes a specialist unit providing care for ten people who are living with dementia. The home does not provide nursing care. 31 people were living at the home when we visited.

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

People and their relatives told us that they felt safe and happy with the care they received. They told us staff were always available to respond to their needs and this was confirmed through observation. People were protected by safeguarding processes and staff were clear of the process to follow to refer concerns. Staff were safely recruited and had the necessary skills to meet people's needs. People were protected by risk assessments relating to their support and perceived hazards in the environment. The building was clean and hygienic and appropriate checks were in place to prevent the spread of COVID-19. People were safely supported to take their prescribed medicines. Measures were in place for reflection when things went wrong, for example, accidents.

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.

People who used the service and their families had confidence in the management team's running of the service. They felt they had been fully informed during the current pandemic. Care plans were personcentred, and this extended to the individual support observed being provided to people who used the service. Effective systems were in place to assess and monitor the quality of the service. The service had established strong links with partner agencies and local schools.

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 Good (published 3 May 2018).

#### Why we inspected

This inspection was carried out to assess arrangements to COVID-19 and to assess the running of the service given that there had been no registered manager since April 2020.

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 coronavirus and other infection outbreaks effectively.

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

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?	Requires Improvement
Is the service well-led?  The service was not always well-led.	Requires Improvement



# Florence Grogan House Residential 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 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.

#### Service and service type

Florence Grogan House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service did not have a manager registered with the Care Quality Commission. A registered manager 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

We gave the service very limited notice of the inspection. This was because we needed to ensure that we considered any precautions in place due to the management of the COVID-19 pandemic.

#### 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. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

### During the inspection

We spoke with four people who used the service and had contact with five relatives about their experience of the care provided. We spoke with six members of staff including the manager, senior care workers and care staff. We also spoke with a representative of the registered provider who was visiting the service at the time of our visit.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at three staff files in relation to recruitment.

## After the inspection

We continued to seek clarification from the provider to validate evidence found. A variety of records relating to the management of the service, including policies and procedures were reviewed remotely to reflect the COVID-19 pandemic. We spoke with two professionals who regularly had contact with the service.

We received a notification following the visit of a person falling and sustaining injuries. This was the subject of further investigation at the time of writing this report.



## Is the service safe?

## Our findings

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

At the last inspection this key question was rated as Requires Improvement. At this inspection this key question has now improved to Good.

This meant people were safe and protected from avoidable harm.

#### Using medicines safely

- Our last visit identified some aspects of medicines management that needed improvement in relation to the storage of creams. These had been addressed.
- People were observed being supported to take their medicines in a supportive, safe and personalised manner.
- All medicines were securely managed and subject to regular audits.
- People told us "Yes I always get my tablets when I need them".

Systems and processes to safeguard people from the risk of abuse

- Relatives and people who use the service told us "It's hard but they [staff] do an amazing job keeping our relatives safe", "I've always felt [name] was safe in their [staff's] care. and "Oh yes I definitely feel safe with them; they [staff] are so good".
- The provider had co-operated with safeguarding teams during any relevant investigations.
- Staff had access to procedures for the identifying and report of alleged abuse.
- Most staff had received training in safeguarding although the manager had plans for all staff to receive refresher training over the next few months.

Assessing risk, safety monitoring and management

- Assessments were in place reflecting hazards faced by people in their daily lives.
- These extended to risk of malnutrition, falls and pressure ulcer development.
- Individuals had risk assessments to ensure that they could be safely evacuated from the building in the event of an emergency.
- Safety certificates relating to equipment and other utilities within the building were all current and up to date.

#### Staffing and recruitment

- Staff were recruited safely, and all necessary checks were completed before starting work at Florence Grogan House.
- Staffing levels were appropriate to the needs of people living at the home and staff told us there were enough staff.
- During the Covid-19 pandemic the provider had maintained staffing levels within the service.
- We observed staff were always visible and available to support 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 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.

### Learning lessons when things go wrong

- Systems were in place to identify any events that adversely affect people or warranted further action following people's comments.
- Falls were recorded with an analysis and further action to prevent a re-occurrence.
- Infection control audits identified courses of action required to ensure maximum protection from infection.
- Comments made by people who used the service generated an action plan on how the quality of their lives could be further enhanced.



## 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 the last inspection this key question was rated as Good. At this inspection this key question has now deteriorated to Requires Improvement.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of 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

- During our last visit, the service had a registered manager. The registered manager left the service in April 2020. Another individual had acted as manager since then but had withdrawn from the registration process just prior to our visit.
- •Following this, a new individual had been identified to become the manager and would undertake the registration process.
- The absence of a registered manager had not had an adverse impact on the care provided but the length of time to register a new manager had meant that conditions of registration had not been fully met.
- Effective quality assurance systems were in place. Audits involved the views of people who used the service, staff, the manager and other sources within the organisation.
- The manager was fully conversant in their responsibilities of running a registered service and was aware of the need to notify us of adverse incidents as required by law.

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

- People consistently told us that they were pleased with the care they received. They felt fully involved in the support they received and were able to influence it.
- Relatives told us "The management team are very approachable" and "we as a family are so thankful that [name] is in a place where they are happy and cared for"
- Support plans were person-centred and went into detail on all aspects of people's needs.
- Staff told us that the service was well managed and that the manager team were supportive and approachable.

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

- During the inspection the manager was open, transparent and co-operative. Evidence requested to assist with our judgements were returned to us in a timely manner.
- The registered provider had systems in place to enable people who used the service and their families to raise concerns. These were dealt with thoroughly and to the satisfaction of the people raising the concern.

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

- Daily communication records were in place enabling staff to be made aware of changing need.
- Staff felt well informed and confirmed they were always passed relevant information.
- Verbal and written feedback was sought regularly from people and their relatives
- People told us that they were always kept informed about the support they received.

## Working in partnership with others

- Communication with commissioning agencies did not indicate any concerns about the quality of care provided at Florence Grogan.
- The service had worked closely with other agencies such as the local authority, local community and clinical commissioning groups during the pandemic. The service had maintained regular contact with relatives to reassure them of their relations' wellbeing during this time.
- The service had fostered links with schoolchildren from local schools during the pandemic. Letters were on display from children enquiring about people's welfare.