

Outlook Care

Foxburrow Grange

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

Foxburrow Grange is a care home is a residential care home providing personal and nursing care to up to 69 people aged 65 and over. At the time of the inspection there were 63 people living at the service.

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

The manager had made positive changes since their arrival, these improvements need to be sustained to demonstrate management stability across the service. The feedback we received during our inspection combined a positive view of the new manager, with an anxiety that some changes would have a negative impact on the care given to people.

Audits were undertaken by the manager. However, during an audit process it had not been picked up that some medication was in fact out of date and would not be able to be given to the person if they required it. We have made a recommendation about this. We discussed our findings with the manager and deputy manager and were assured this was remedied immediately.

The manager had a practical, person-centred approach which was making a difference to the care people received. Feedback was particularly positive about how well and open the manager was communicating with people, families and staff.

We found care was well-planned and staff minimised risks to people's safety. The administration of medicines was carried out safely.

There were enough staff to keep people safe. The manager was working well with the staff team to improve staff turnover, morale and skills.

People were supported to have choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests. The manager promoted a person-centred approach to managing restrictions resulting from the COVID-19 pandemic. They communicated well with people and families to explain restrictions.

Infection control and prevention measures were in place and we were assured the service had systems in place to respond to coronavirus and other infection outbreaks effectively. Staff were clear of safeguarding processes, and when and how to raise concerns.

Senior staff carried out regular checks on the quality of care and took action which directly improved care standards.

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

Rating at last inspection

The last rating for this service was Good (published 23 March 2018). The overall rating has remained the same Good.

Why we inspected

We had received some concerns from whistle-blowers due to the change of management and how this had a negative impact on the care given to people living in the service. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. We found no evidence during this inspection that people were at risk of harm from this concern.

We reviewed the information we held about the service. No areas of concerns were identified in the other key questions. we therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

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 had 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 Foxburrow Grange on our website at www.cqc.org.uk.

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?

Requires Improvement ●

The service was not always well-led.

Details are in our well-Led findings below.

Foxburrow Grange

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

This inspection was carried out by two inspectors and a specialist advisor. We visited the service on 7 December 2020 and finished the inspection on the 9 December. We limited the amount of time spent at the service to minimise risk. And therefore, asked the manager to send us documentation we needed to look at after the inspection.

An Expert by Experience rang and spoke with family members on 8 and 9 December 2020. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of service.

Service and service type

Foxburrow Grange 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 had a new manager who had not yet applied for their registration certificate with the Care Quality Commission. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

The inspection was unannounced.

What we did before the inspection

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 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 all this information to plan our inspection.

During the inspection

We focused on observing how people that live in the service were cared for. We spoke with three people that lived in the service. We used the Short Observational Framework for inspection (SOFI). SOFI is a way of observing the care to help us understand the experience of people who could not talk with us.

We spoke with the new manager, deputy manager and six staff.

We viewed a limited number of key records as we were minimising our time at the service.

After the inspection

We received additional information from the manager, as requested and spoke with them on the phone. We spoke with seventeen relatives by phone to ask their views of the service.

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 Good. At this inspection this key question has remained the same Good.

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from the risk of abuse. Care documents identified the best way to support people's needs.
- The registered manager had policies and systems in place for staff to follow, should they have a safeguarding concern. This included 'whistle blowing' should a member staff need to raise a concern about the service. One member of staff said, "I would talk to my manager, if it was about them then I would go to the local authority." A relative told us, "I am never concerned about my [name] being safe the staff all seem so kind and caring and the communication between the home and myself is very good."
- The manager had worked closely with other professionals such as the local authority, and CQC to investigate safeguarding concerns and mitigate risks to others.

Assessing risk, safety monitoring and management

- The new manager investigated all incidents and signed them off to say they had logged them, and a clear audit trail was visible including the actions to be taken after each incident. This was to mitigate the risk of it happening again.
- Staff were able to tell us who was at risk for example, of choking and pressure ulcers and the documentation they were required to complete, including any actions they took to minimise the risk of these people coming to any harm.

Using medicines safely

- People continued to receive their medicines safely. One relative told us, "I have been notified if my [name] requires antibiotics they always seem on top of the medication." Another relative told us, "My [name] has been stable now for 18mths they have sorted out their medication, we are really pleased."
- Staff were trained to support people in taking their medicines and their training was regularly reviewed and their competency checked.
- Records were maintained by staff showing when people had received their medicines as prescribed. There were processes in place for the ordering and disposal of medicines and regular audits were in place to check medication processes were effective. However, we did find a minor problem with an audit of controlled medicines see evidence under well- led.
- People had detailed care plans outlining the support they needed to take their medicines. Staff completed legible and accurate medicine records.
- Staff were knowledgeable about time specific medicines which were required to be given at a specific time. For example, people living with Parkinson's disease or diabetes. This was confirmed by the records we looked at.

Preventing and controlling infection

- The service was clean and odour free. Staff were visibly cleaning surfaces and floors to prevent the spread of infection.
- The provider was making sure infection outbreaks can be effectively prevented or managed.
- The provider's infection prevention and control policy was up to date.
- We observed staff wearing appropriate PPE. However, we did find that some staff were not wearing their masks in the reception area of the home. We discussed our concerns with the manager who addressed this immediately.

Staffing and recruitment

- We found there were sufficient staff on duty to keep people safe. Feedback from relatives and staff confirmed there were enough staff. One relative told us, "There always seems to be plenty of staff around. Its hard to tell at the moment as we are not coming into the home, but things seem okay."
- Staff worked as a team and supported each other. Whenever staff were needed in a different area of the home staff were called upon to support. This is something the new manager has put in place. Before their arrival staff were allocated to a specific unit, Staff were therefore flexible in the areas they worked.
- There was an effective recruitment process in place. Checks were made to ensure staff recruited were suitable for the role they were employed for.
- During the inspection we observed staff checking people who were in their rooms to make sure they were comfortable and had everything they needed. At no time did we observe people having to wait any length of time for staff to attend to their needs.

Learning lessons when things go wrong

- There were systems in place to monitor and learn from accidents and incidents. These were analysed to look for any patterns or themes.

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 the rating for this key question is now requires improvement.

Leaders and the culture they created had not consistently supported the delivery of high-quality, person-centred care.

We recommend the service considers and reviews their auditing system for medication to include controlled drugs.

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

- At this inspection, we could see the new manager had made a positive impact in a short period of time.

However, more time was needed to be sure they could provide a period of stable leadership and maintain recent improvements. Some changes had been made to the allocation of staff, to include staff working between each unit if the need arose. The manager felt it was important to upskill all staff to enable them to meet people's needs. However, some staff had found this difficult in the beginning, the management team felt it would take time for everyone to be on board with the changes.

- Feedback from relatives and staff were mainly positive when describing the impact of change within the management team. A member of staff said, "The manager is great they really listen." Another staff member told us, "The manager is visible and attends a daily meeting, so they always know what's going on."

Relatives feedback was mixed and included being told the new manager contacted them on a regular basis, providing updates about the home and keeping them up to date with any information. One relative told us, "The information channels are good, you get newsletters and you are kept informed." Another relative told us, "I have not met the new manager and am concerned there have been a lot of staff leave since they arrived."

- Audits were undertaken by the new manager. However, during an audit process it had not been picked up that some medication was in fact out of date and would not be able to be given to the person if they required it. We discussed our findings with the manager and deputy manager and were assured this was remedied immediately.

- The manager told us they received ongoing support from the provider's quality team.

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

- There was a new manager in post who had not yet registered with CQC. The manager was an experienced manager who had worked for another service and told us they were intending to stay at the service to ensure the improvements they had made since their arrival were embedded.

- The management team were open with people, relatives and stakeholders. Most relatives told us the management were accessible and they were informed of any important changes or incidents at the service.

Records showed relatives had been informed where there had been any issues.

- The provider understood the responsibilities of their registration. Records showed that where required, statutory notifications had been sent to CQC. Providers are required by law to notify CQC of incidents such as deaths, injuries and allegations of abuse.
- People's records contained evidence of information being shared with stakeholders to improve people's care. For example, where there had been changes to one person's needs recently we saw records of emails with social workers.

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

- The manager was very open and informed us upon our arrival that a few staff had left when they first started managing the home. Turnover of staff had been quite high at that time, but the staff team had now stabilised, and all vacant positions had been filled.
- Relatives were positive about how well the service had communicated during COVID-19, such as letting them know about restrictions and testing.
- Feedback about the manager was mainly positive. A relative told us, "They are keeping me informed this is what we need in times when we cannot visit."
- Staff told us they felt the manager was open and inclusive, comments included, "[manager] is very approachable."

Working in partnership with others

- External professionals told us the manager had worked well with them since their arrival at the service.
- Despite the challenges resulting from the COVID-19 pandemic, staff were involving external professionals when needed, for example, referring people for support with pressure area care.
- A survey was carried out annually to gather the views of people and relatives in order for them to influence improvements at the service.
- The registered manager supported staff to continuously learn and develop their skills. This included supporting staff to update their training and feel confident in their role.