

# Indigo Care Services (2) Limited

# Thornton Hall & Lodge

## Inspection report

16-18 Tanhouse Road  
Liverpool  
Merseyside  
L23 1UB

Tel: 01519242940  
Website: [www.orchardcarehomes.com](http://www.orchardcarehomes.com)

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## Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service well-led?

Good 

# Summary of findings

## Overall summary

### About the service

Thornton Hall & Lodge is a residential care home providing personal care and accommodation for up to 96 people, including people living with dementia. There were 66 people living at the home at the time of this inspection.

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

At our last inspection the provider had failed to effectively manage individual and environmental risk and ensure medicines were administered safely. There were failings in relation to good governance as the provider had repeatedly failed to achieve a rating of good and systems to monitor the quality and safety of service were ineffective. We also made a recommendation to improve the provider's documentation and approach to safe staffing levels. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

People received their medicines safely and as prescribed. Robust measures and monitoring had been put in place to ensure the issues found at the last inspection did not happen again. People had personalised risk assessments which gave staff the information needed to safely manage the risks associated with people's care. The environment was safe and well-maintained. The home was clean and effective infection prevention and control measures were in place.

There were enough staff at the home to meet people's needs. People told us they felt there were enough staff at the home. One person said, "The staff are great, they're always there if I need help." Staff were visible around the home and were readily available to support people when needed. Staffing levels were monitored, reviewed and amended when needed by the manager.

People were safeguarded from the risk of abuse. People told us they felt safe living at the home and relatives also said people were safe at the home. One person said, "The staff are great, wonderful; they make me feel safe after I lost my confidence at home." Staff had received safeguarding training and understood their role in recognising and reporting safeguarding concerns. The provider had appropriate systems in place to manage concerns of a safeguarding nature.

The effectiveness, organisation and accuracy of quality assurance processes at the home had improved significantly. Staff had responded positively to feedback from the last inspection and action had been taken to address the issues identified.

There was a kind and caring culture amongst staff at the home. Staff knew the people they were supporting and we observed many positive interactions throughout our inspection. People living at the home spoke positively about the staff. One person commented, "The staff are marvellous." People and relatives spoke positively about how staff kept them involved. One relative said, "I'm happy with the way they've kept me in touch. They've always told me when [Relative] went to hospital; that's been spot on."

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection (and update)

The last rating for this service was requires improvement (published 25 December 2020) and there were multiple breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

#### Why we inspected

We carried out an unannounced focused inspection of this service on 2 November 2020. Breaches of legal requirements were found and a Warning Notice in relation to Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 was served. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment and good governance at the service.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements and the Warning Notice. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has remained requires improvement. This is based on the findings at this inspection.

We also 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 Thornton Hall & Lodge on our website at [www.cqc.org.uk](http://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?

Good ●

The service was well-led.

Details are in our well-Led findings below.

# Thornton Hall & 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

This inspection was carried out by two inspectors and a specialist medicines inspector. An Expert by Experience also assisted by carrying out telephone calls to people's relatives. 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

Thornton Hall & Lodge is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 home did not have a manager registered with CQC but a manager was in post and in the process of registering. This means the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

We checked the information that we held about the service. This included statutory notifications sent to us by the provider about incidents and events that had occurred at the service. A notification is information

about important events which the service is required to send us by law. We also gathered feedback about the service from the local authority. We used all this information to plan our inspection.

#### During the inspection

We spoke with five people who lived at the service and 13 relatives about their experience of the care provided. We spoke with 12 members of staff including the manager, regional manager, quality improvement lead, deputy managers, care workers and other staff.

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 multiple medication records. We looked at six staff files in relation to safe recruitment. A variety of records relating to the management of the service, including policies and procedures 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 the last inspection this key question was rated as requires improvement. At this inspection this key question has improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely; Assessing risk, safety monitoring and management

At our last inspection the provider had failed to effectively manage individual and environmental risk and ensure medicines were administered safely. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- People received their medicines safely and as prescribed. Robust measures and monitoring had been put in place to ensure the issues found at the last inspection did not happen again.
- Medicines were safely administered, stored and recorded by staff who had the required knowledge and skills.
- People had personalised risk assessments which gave staff the information needed to safely manage the risks associated with people's care.
- Staff had reassessed people's needs since our last inspection and supported them to relocate to other more appropriate units within the home or alternative placements if necessary. This helped to reduce the risk of incidents occurring between people living at the home.
- Staff had received additional training to support them to proactively recognise, prevent and minimise the risk of incidents occurring between residents.
- Equipment to alert staff to falls had been comprehensively reviewed since our last inspection and were subject to regular checks to ensure they were working effectively.
- The environment was safe and well-maintained. Safety checks were on utilities and equipment were up-to-date and fire safety was effectively managed.

Staffing and recruitment

At our last inspection we recommended the provider reviewed people's care needs to ensure safe staffing levels were always maintained. The provider had made improvements.

- There were enough staff at the home to meet people's needs. People told us they felt there were enough staff at the home. Comments included, "The staff are great, they're always there if I need help" and "No problems with the number of staff, if I buzz they come quickly."
- Staff were visible around the home and were readily available to support people when needed. We observed staff supporting people with essential care tasks, such as assistance with eating and drinking, as well as spending time chatting with people and taking part in activities and games.

- Staffing levels were monitored, reviewed and amended when needed by the manager. Since our last inspection the management team had improved the clarity and accuracy of staff rotas and the dependency tool used to determine safe staffing levels at the home.
- Staff were safely recruited. Appropriate checks were carried out to ensure new staff were suitable to work with vulnerable adults.

#### Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from the risk of abuse. People told us they felt safe living at the home and relatives also said people were safe. Comments included, "The staff are great, wonderful; they make me feel safe after I lost my confidence at home" and "The staff have always phoned if anything has happened to [Relative]. We know [Relative] is safe there."
- Staff had received safeguarding training and understood their role in recognising and reporting safeguarding concerns.
- Information and guidance about how to raise safeguarding concerns was accessible throughout the home and the provider had appropriate systems in place to manage concerns of a safeguarding nature.

#### Preventing and controlling infection

- We were assured effective infection prevention and control (IPC) policies and procedures were in place at the home.
- The home was clean and hygienic. Cleaning schedules and products had been appropriately reviewed and enhanced in response to COVID-19.
- Staff and people living at the home were supported to access regular COVID-19 testing.
- We observed staff wearing the required levels of personal protective equipment (PPE) throughout our inspection. Staff donned, doffed and disposed of PPE safely and in line with the relevant national guidance.
- Staff were supporting people to visit their loved ones at the home safely and in line with the current guidance.

#### Learning lessons when things go wrong

- Accidents and incidents were appropriately recorded and responded to by staff.
- The senior management team regularly reviewed this information to ensure appropriate action had been taken and steps were taken to prevent recurrence, when necessary.
- Relevant policies and procedures were in place to help guide staff.



# 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 requires improvement. At this inspection this key question has improved to 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

At our last inspection the provider had failed to achieve and sustain compliance with regulations and systems to monitor the quality and safety of service being provided were ineffective. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and the provider was served a warning notice in relation to this regulation.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17 and the requirements of the warning notice had been met.

- The effectiveness, organisation and accuracy of quality assurance processes at the home had improved significantly.
- Staff had responded positively to feedback from the last inspection and action had been taken to address the issues identified.
- There had been a period of stable and positive leadership since our last inspection and accountability and support within the senior management team had improved.
- Record keeping had improved. However, some aspects of people's care records could be streamlined to provide better clarity.
- The home did not have a manager registered with CQC but a manager was in post and in the process of registering.
- Ratings from the last CQC inspection were clearly displayed within the home and on the provider's website as required.
- CQC had been notified of all significant events which had occurred, in line with the registered provider's legal obligations.
- There was a range of regularly reviewed policies and procedures in place to help guide staff.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; and how the provider understands and acts on their duty of candour responsibility

- There was a kind and caring culture amongst staff at the home. Staff knew the people they were supporting and we observed many positive interactions throughout our inspection.
- People living at the home spoke positively about the staff. Comments included, "The staff are marvellous" and "I get on well with the staff, anytime I need help or want something they get it."

- The manager was knowledgeable and had developed positive relationships with people living at the home and staff.
- The manager understood their responsibilities regarding the duty of candour and promoted openness and transparency within the service.

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

- People living at the home and relatives were able to give feedback about the care at the home in various ways, such as informal conversations, care plan reviews and surveys. Staff also distributed regular newsletters to keep people up-to-date with any developments at the home.
- People and relatives spoke positively about how staff kept them involved. Comments included, "I'm happy with the way they've kept me in touch. They've always told me when [Relative] went to hospital; that's been spot on" and "They've always called me when [Relative's] had a fall or something else has happened and if I had any concern I'd talk to the manager."
- Staff were supported by senior staff through regular supervisions and team meetings. Staff gave us positive feedback about the management team at the home.
- The provider had systems in place to support staff health and wellbeing, along with reward and recognition processes to acknowledge their contributions.

Working in partnership with others

- Staff at the home worked with other relevant health and social care professionals to maintain people's health and wellbeing. Staff made timely referrals to other services for additional input, advice and support when necessary.
- Staff at the home had engaged with organisations and professionals who could provide them with additional support and guidance, such as the local authority and the local providers' network.