

The Hawthorns Lodge Limited

# Hawthorns Lodge Limited

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Hawthorn Lodge is a care home that provides accommodation and personal care to a maximum of 20 older people, some of whom are living with dementia. At the time of inspection 13 people were using the service.

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

People and their relatives were very positive about the care provided. People told us they felt safe and staff had the skills to support them. Relatives provided positive examples of how staff had helped improve people's lives since moving to the home.

Staff were safely recruited and received an induction followed by training from the provider. Training was monitored and staff were supported with regular meetings and supervisions. Staffing capacity was enough to meet people's needs.

People and relatives were involved in every stage of care planning. Systems and records were in place to ensure people received person-centered, safe care.

The registered manager had an effective quality assurance system in place. Regular audits and checks were done. These were used to identify relevant action and lessons learnt. People, relatives, staff and professionals were offered opportunities to provide feedback about the care provided at the home.

All staff ensured people living in the service were happy with the environment and found ways to promote their independence; their passions and interests maintained wherever possible.

The service was following safe infection prevention and control procedures to keep people safe.

Medicines were managed safely. Risks to people were assessed and action taken to reduce the chances of them occurring. The registered manager acted on feedback immediately. People were safeguarded from abuse.

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.

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

The last rating for this service was good (published 2 December 2020).

### Why we inspected

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

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 COVID-19 and other infection outbreaks effectively.

#### 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 is 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.

# Hawthorns Lodge Limited

## 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.

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

1 inspector carried out this inspection.

#### Service and service type

Hawthorn Lodge 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. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced

#### What we did before 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 to the registered manager, the deputy manager, 2 relatives and 2 members of staff. We reviewed a range of records. This included 3 people's complete care records and medication records. We looked at 3 staff files in relation to recruitment and staff supervision as well as staff feedback forms. A variety of records relating to the management of the service, including policies and procedures were also 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 remained good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- Risk assessments were not person-centered and lacked information regarding people's individual needs. This was discussed with the registered manager onsite and they acted immediately by looking at each person's risk assessments and updating them to reflect the individuals care and support needs. For each risk, control measures to minimise the risk had also been included.
- Staff completed a comprehensive assessment of each person's physical and mental health needs prior to delivering care. The assessments included information and guidance for people with complex needs, communication, allergies, medical background, weight, dietary needs, mobility, memory and cognition.
- Care plans contained positive behaviour support information; this included identifying triggers which impacted on people's wellbeing and behaviours, as well as techniques for staff to use to reduce any behaviours which may challenge.

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

- Staff were recruited safely by the provider and there was enough staff to safely support people.
- New staff had appropriate pre-employment checks in place which included photo identification, work history, references and a Disclosure and Barring Service (DBS) check in place. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Staffing levels were regularly reviewed against people's support needs. One relative said, "The staff are lovely, they are always happy to help even with the little things there is always someone who will be there."

### Using medicines safely

- Medicines were managed safely. The registered manager carried out regular checks on people's medicines to make sure they were being administered in line with national best practice, the provider's policy and prescribing instructions.
- Staff had received training in administering medicines and had their competency assessed regularly, we were assured staff were competent in all aspects of medicine management.
- People and relatives told us that they were confident in the medicine's management within the service, one relative said, "Staff understand what [person] needs, there has never been a problem with medication."
- Medicines were labelled with directions for use and contained both the expiry date and the date of opening. Medicines were safely stored in locked cupboards or lockable fridges if required.

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

- People were protected from the risk of abuse. Policies and procedures were in place for staff to follow.
- Staff had received training on identifying and reporting abuse and knew what action to take if they identified abuse. One staff member said, "I have never had to raise a cause for concern, but I know what to do and I know I would be supported."
- People reported feeling safe when receiving their care. One relative told us, "I definitely feel [Person] is safe in Hawthorn Lodge, nothing is a problem to the staff."

### Preventing and controlling infection

- IPC policies and procedures had been updated to reflect changes in relation to government guidance linked to the COVID-19 pandemic. In addition, they showed detailed information to guide staff in the actions to take to ensure they followed safe practices to prevent the spread of infections.
- There were sufficient supplies of PPE and staff had received training in how to use this.

### Learning lessons when things go wrong

- Lessons were learned from incidents and learning was shared with the staff team to prevent similar incidents occurring.
- Accidents and incidents were fully investigated and outcomes from these were used to improve the care provided.



# 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

- Governance was fully embedded within the service; the registered manager as well as the regional manager undertook a range of audits to assess care quality and safety such as supervisions, care plans, environmental risk assessments, rostering and welfare checks.
- The registered manager was fully aware of their legal responsibilities and was open and transparent. They submitted notifications to the commission for significant events that had occurred at the service, for example accidents and incidents.
- The management team led by example, they were highly visible and known to staff and relatives. One relative commented, "The registered manager is great, it's a small service and feels like family."

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

- There was a positive staff culture which helped to achieve good outcomes for people. One staff member said, "I feel fully supported by the registered manager and the staff at Hawthorn Lodge, everyone works together as a team, it's lovely."
- The registered manager communicated with people, relatives and staff. Relatives told us the management team were approachable. One relative commented, "The registered manager and the team would do anything for us, we always feel involved and I'm never worried."

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 service had a duty of candour policy in place and the provider understood their responsibility to be open and honest when something goes wrong.
- Results from investigations, feedback sessions and audits were used to improve the quality of the service.

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

- People had the opportunity to discuss things that were important to them through residents' family meetings and feedback forms.
- The provider held regular team meetings with staff where their views were heard, these included meetings for general staff, senior staff and nurses.
- Feedback from staff, people and relatives was positive, and we saw the provider had taken on feedback

and suggestions provided.

#### Working in partnership with others

- Staff worked in partnership with people, relatives and other healthcare professionals.
- Care records showed involvement from other agencies and staff had used the advice/guidance provided to help with people's care planning.