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Alexandra Lodge Care Home

Inspection report

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Ratings

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

Summary of findings

Overall summary

About the service

Alexandra Lodge is a residential care home providing personal care to up to 19 people. People are supported in 1 adapted building. On the day of our inspection, there were no people using the service. This is because we had suspended the registration of the service.

What we found

Our last inspection resulted in the registration of the service being suspended. This means the provider is able to remain registered but is not able to support any people. A suspension of a provider's registration is time limited, so we returned to the service to assess if the provider had made improvements to the service since our last inspection. Our inspection was targeted to only look at the areas of concern at our last inspection.

We found that most of environmental risks at the service had been resolved. We found the main boiler was not working however action had been taken to ensure this was fixed, the provider did not plan on admitting new people to the service until the boiler was fixed. Action had been taken to restrict water temperatures to ensure people would no longer be at risk of scalding. Water maintenance to prevent the buildup of legionella bacteria had been completed. A risk assessment by a qualified contractor had been completed.

All staff including kitchen staff had completed training in the management of choking. Best practice guidance was available in both the dining room and kitchen to ensure staff had the correct information in regards to safe food preparation.

The home was clean and tidy. New cleaning schedules had been created and implemented to monitor cleaning processes.

The manager had reviewed staffing numbers and implemented a new dependency tool to calculate the number of staff required. Policies relating to the management of the service had been updated to ensure staff had clear guidance in order to provide safe care.

Rating at last inspection and update

The last rating for this service was inadequate (published 28 July 2023). We carried out a further targeted inspection on 2 August 2023.

Why we inspected

After the last inspection, we suspended the providers registration. We returned to the service to see if any changes had been made. This is to ensure safety for people using the service in the future.

We completed a targeted inspection. This does not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the

previous inspection. This is because they do not assess all areas of a key question.

Enforcement

The last focused inspection identified 5 breaches of regulation. This was due to concerns with safety, staffing levels, recruitment, safeguarding from abuse and governance. At the time of this inspection, there were no people living at Alexandra Lodge. We were therefore unable to assess if the service was still in breach of legislation. This means that these breaches of regulation remain and will be reassessed if suitable at a future inspection of the service.

Follow up

At the time of our inspection, the service had a time limited suspension. This prevented them from supporting people at the service. The suspension ended following this inspection meaning the service was able to carry out the registered regulated activity and support people in line with their imposed legal conditions. We are still considering any further regulatory action and full details of this will be added once any appeals are concluded. In the interim, we will continue to monitor information we receive about the service, which will help inform when we next inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Alexandra Lodge 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 Health and Social Care Act 2008.

This was a targeted inspection to check whether the provider had made improvements following our previous inspection.

Inspection team

The inspection was completed by 2 inspectors.

Service and service type

Alexandra Lodge Care Home 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. Alexandra Lodge Care Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service was not currently supporting any people. So, staff were not routinely in the building.

What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

We reviewed the concerns observed at the last inspection and reviewed information the provider had sent us. We then created an inspection plan, to specifically look at what changes had been made to these previous risks.

Since our last inspection, the service has not supported any people. We have therefore not received any updates from external professionals or members of the public.

During the inspection

We walked around the care home, to assess what changes had been made to the environment since the last inspection. We also reviewed governance records, to assess whether systems and processes had been altered since our last inspection. We spoke to 3 care staff and the responsible person for the care home.

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 focused inspection this key question was rated inadequate. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to check if the provider had made improvements since we suspended the registration of the service. We will assess the whole key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

At the last focused inspection, the service was in breach of regulation 13 (safeguarding people from abuse) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection, the provider had responded to the concerns we found. However, we were not able to fully assess this breach of regulation, as the service was not supporting any people. Therefore the provider remains in breach of regulation 13.

- At the last inspection we found the safeguarding policy did not reflect current safeguarding legislation. At this inspection we found the policy had been updated to reflect current safeguarding guidance and legislation. This meant staff now had the correct information to report any safeguarding concerns.
- At the last inspection we found poor information relating to whistleblowing and how staff should raise safety concerns. At this inspection, we found whistleblowing information displayed around the home and staff told us who they would report concerns to. Guidance was available to staff to direct them to report any safety concerns to external agencies such as the local authority and CQC.
- At the last inspection, we found staff had not received further training or competency assessment in regards to safeguarding. At this inspection we found staff had completed additional safeguarding training to ensure people were kept safe from abuse.

Assessing risk, safety monitoring and management

At the last focused inspection, the service was in breach of regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection, the provider had responded to the concerns we found. However, we were not able to fully assess this breach of regulation as the service was not supporting any people. Therefore the provider remains in breach of regulation 12.

- At the last 3 inspections, we found fire risks were not well managed. At this inspection, we saw the environment had been improved to reduce the risk of fire. We found all fire doors now closed correctly and staff had also completed further fire training. This meant people would be protected in the event of a fire.
- At the last 3 inspections, we saw window restrictors were either not in place, or were poor quality. At this inspection, we saw some improvements had been made and all window restrictors were in place and

working as expected. The provider had implemented further checks to ensure window restrictors were checked on a weekly basis to ensure people were protected from the risk of harm.

- At the last 2 inspections, we found not all hot radiator surfaces were covered. This risked people burning themselves when touching the surfaces. At this inspection, improvements had been made and we saw all radiators were suitably covered throughout the building. This meant people were protected from the risk of burns. We found the main boiler was not working however action had been taken to ensure this was fixed, the provider did not plan on admitting new people to the service until the boiler was fixed.
- At the last 2 inspections we found people were at risk of choking due to poor processes associated with diet. At this inspection, we found staff now had the knowledge and guidance of how to prepare suitably textured food. This meant people would be protected from the risk of choking.
- Processes were now in place to protect people from the risk of legionnaires disease. Legionella is a water-borne bacteria that builds up in water systems. When inhaled it can put people at serious risk of ill health. To reduce the risk of bacteria build up in the water system, the provider now completed maintenance routines and had commissioned an external agency to carry out a full legionnaires risk assessment. These maintenance routines decreased the risk of bacteria build up.
- People would no longer be at risk of scalding if they used the service. Health and safety guidance is for water to be under 44°C. We found all sinks and showers to be under 44°C. The provider had implemented a system to check water temperatures to protect people from the risk of scalds.

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)

- At the last focused inspection, we found people had been referred for a DoLS. However, there was no evidence the provider had completed reviews to ensure the restrictions were still necessary and people were not unlawfully restricted. At this inspection the provider advised they had not yet created a governance tool to oversee any new deprivation of liberty referrals. They advised this would be created once people started to use the service. As no tool had been created, we were unable to assess the effectiveness of this.

Using medicines safely

- At the last 3 inspections, systems and processes for medicines management had not been developed or implemented. At this inspection, we found the medicines management policy had been redeveloped and staff had completed further training in medicines management. This decreased the risk of unsafe medicine processes.

Preventing and controlling infection

- At the last inspection, we found the home was unclean and had malodours. At this inspection, we found the home to be clean with no malodours. We were therefore assured cleaning processes had been embedded at the home.
- The provider had created cleaning audit tools to ensure all areas and mattresses were checked weekly. This meant any areas needing further cleaning would be identified in a timely manner.
- At the last inspection, we were informed that there would be no changes to the number of domestic staff.

At this inspection the provider told us they had increased the number of dedicated domestic staff daily to maintain the cleanliness of the home.

Learning lessons when things go wrong

- At this inspection we found improvements had been made throughout the home which decreased the risk of avoidable harm. This meant lessons had been learnt from our previous 3 inspections.

Staffing and recruitment

At the last focused inspection, the service was in breach of regulation 18 (staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This is because there were not enough staff deployed at the service to keep people safe. At this inspection, we found improvements had been made in relation to staffing levels. However, we were not able to fully assess this as the service was not supporting any people. Therefore the provider remains in breach of regulation 18.

- At the last inspection the provider advised staffing levels would not change if they supported people again. At this inspection we found the provider had sought specialist support and invested in a staffing dependency tool to calculate the number of staff required based on people's needs. The provider explained they would use this tool to identify how many staff would be needed to support people safely.

At the last focused inspection, the service was in breach of regulation 19 (fit and proper persons deployed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because of unsafe recruitment processes. At this inspection, we found improvements had been made. However, we were not able to fully assess this as the service was not supporting any people. Therefore the provider remains in breach of regulation 19.

- At this inspection we found the recruitment policy had been updated to ensure safe recruitment processes were followed. This would prevent recruitment errors re-occurring.

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-centered care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question inadequate. We have not changed the rating as we have not looked at all of the well-led key question at this inspection.

The purpose of this inspection was to check if the provider had made improvements since we suspended the registration of the service. We will assess the whole key question at the next comprehensive inspection of the service.

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

At the last focused inspection, the service was in breach of regulation 17 (good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection, we found improvements had been made. However, we were not able to fully assess this breach of regulation, as the service was not supporting any people. Therefore the provider remains in breach of regulation 17.

- At the last 3 inspections, we found policies were not always in place to guide safe care. At this inspection policies had been improved and were now in place. Policies covering training and induction were now in place to inform staff of what training and support is available.
- At the last inspection, we identified concerns with safeguarding people from abuse, recruitment, staffing levels, safety and governance. At this inspection, we found the provider had taken action to improve the safety of the service. The provider and staff team demonstrated a committed attitude to improve the leadership and oversight of the service to ensure improvements were made.