

Athena Healthcare (New Brighton One) Limited

Lighthouse Lodge

Inspection report

1 Alexandra Road
New Brighton
Wallasey
CH45 0JZ

Tel: 01519090000
Website: www.lighthouselodge.co.uk

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service well-led?

Good 

Summary of findings

Overall summary

About the service

Lighthouse Lodge is a care home that provides accommodation for up to 80 people who need help with their personal care. At the time of the inspection 48 people lived in the home. Some of the people living in the home, lived with dementia.

People's experience of using this service:

At the last inspection, the provider was rated requires improvement with a breach of regulation 17 of Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, with regard to record keeping. At this inspection, although care plans and risk assessments had improved this work was still ongoing. Enough improvement had been made however for the provider to no longer be in breach of regulation 17.

People's risks were assessed but, information in some people's care files was sometimes contradictory. Information on people's medical conditions and the signs and symptoms to spot in the event of ill-health was very limited and required improvement.

Medicines were managed safely with people's ability to manage their own medication positively supported. Some people required their drinks to be thickened with a thickening agent to prevent them from choking. Records relating to this were not always clear. The competency of staff to administer medicines also needed to be re-assessed. We spoke with the manager and the regional manager about this and both of these issues were acted upon without delay.

People's daily records showed that they received the care and support identified in their care plan. People looked well looked after, relaxed and comfortable in the company of staff.

Staff recruitment was managed well. Staff spoken with were knowledgeable about people's needs and the people they were caring for.

The home was safe, well maintained and clean. Infection control arrangements were in place to prevent and mitigate the risk of Coronavirus. Appropriate personal protective equipment (PPE) was place and staff were using this appropriately in the day to day delivery of care.

The systems in place to monitor the quality and safety of the service had improved since our last inspection. They were being used effectively to make improvements to the service. Since our last inspection, a new manager and regional manager had come into post and during our inspection they were approachable, open to feedback and committed to continuous improvement.

Rating at last inspection and update

The last rating for this service was requires improvement (published 30 January 2020). At their last

inspection we identified a breach of regulations 17 (Good governance). After the inspection, the provider completed an action plan to show us what they would do and by when, to improve. At this inspection, the provider had achieved the improvements identified in their action plan.

Why we inspected

This was a planned focused inspection based on the previous rating.

Follow up

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?

The service was always safe

Details are in our Safe findings below.

Requires Improvement ●

Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good ●

Lighthouse Lodge

Detailed findings

Background to this inspection

The inspection

We carried out this focused inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act under the domains of safe and well-led, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team

This inspection was undertaken by three inspectors and an Expert by Experience. 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

Lighthouse Lodge is a care home. People in care homes receive accommodation and personal care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means they 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

This inspection was announced an hour prior to the inspection. This was because infection control arrangements had to be agreed with the provider prior to our visit to mitigate the risk of any cross contamination or transmission of Coronavirus.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. Since the last inspection, we had maintained communication with the Local Authority about the home and gained their feedback. We used all this information to plan our inspection.

During the inspection:

We spoke with one person who lived in home and three relatives. We spoke with the new manager and new regional manager and six care staff. We reviewed a range of records. This included three people's care

records and a sample of medication records. Four staff recruitment files and records relating to the management 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 requires improvement. At this inspection, this key question has remained the same. This meant that people were not always safe and were at risk of avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong.

- Risks relating to people's care were assessed. Information about people's needs and risks was however, sometimes contradictory and information on people's medication conditions was very limited. This placed people at risk of receiving inappropriate or unsafe care.
- People's records showed they received the care and support they needed. A relative said, "We couldn't have asked for anything more from a home. I am super confident they are doing everything that we at present are not able to do to look after dad". A person living in the home also told us, "The carers are all marvellous and I can't speak highly enough of them, they are all friendly and helpful, they all seem very happy in their work".
- The home was safe and well maintained. At our last inspection we recommended the provider improved the way they checked people's pressure relieving equipment was safe. At this inspection, this had been acted upon.
- Accidents and incidents were properly recorded and monitored to enable staff to learn from and prevent similar accidents and incidents from occurring in the future. A relative we spoke with said, "He has had no falls since being there, previous home we were getting regular calls informing us of falls, he has regained the strength in his legs and is walking every day".

Using medicines safely

- The management of medication overall was satisfactory. Some improvement was required with regards to the administration and recording of people's thickening medication. We spoke with the manager and regional manager about this and they told us this would be addressed immediately.
- The competency of staff to administer medication required review. We spoke with the manager about this and by the end of this inspection, this had already been acted upon.
- Records showed people received the medicines they needed. People who were able to manage their own medicines were supported by the service to do so, to maintain their independence.
- The management of medication was checked regularly to ensure that staff practice was safe.

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

- People and their relatives told us they felt safe at the home.
- Records showed that safeguarding procedures were appropriately followed to protect people from risk of harm.

Staffing and recruitment

- At our last inspection we recommended that the provider reviewed how they recruited staff to ensure it was compliant with current best practice guidance. At this inspection, we saw this had been acted upon and safe recruitment practices were followed.
- Staff received an induction into their job role and during our inspection, there were enough staff on duty to meet people's needs. A staff member said, "There is a good team on my floor, there are plenty of staff and we all muck in and get on really well with each other".

Preventing and controlling infection

- Staff had completed appropriate training and were aware of the need to control the potential spread of infection.
- There was a clear system in place for the maintenance of cleanliness and hygiene in private and communal spaces.
- There was a robust infection prevention control procedures (IPC) including those relating to COVID-19 in place. A relative told us that when they visit, "We wear masks, sanitise our hands and have had temperature taken too, if we want to bring anything in we have to leave it and it is sanitised before [Name of person] can have it"
- Sufficient supplies of personal protective equipment (PPE) was available and staff knew how to wear and dispose of it safely. A staff member told us, "We haven't had any problems with PPE, there has always been enough for us".

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.

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

At the last inspection, the governance arrangements in place failed to ensure records relating people's needs and care were accurate and contemporaneous. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection, improvements to record keeping had been made. Although further improvements were still required, the provider had made enough improvement to no longer be in breach of regulation 17.

- At our last inspection, we recommended that the provider review their quality assurance systems and improve them. At this inspection, we saw that more effective checks on the quality and safety of the service had been put into place and were being used effectively to improve the service.
- The new registered manager and regional manager were clear about their roles and responsibilities with regards to ensuring people receive safe and high quality care.
- People and their relatives were positive about the service and how it was run. One relative however told us that trying to get in touch with the home to enquire about their loved one was sometimes difficult, especially at weekend.

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- At our last inspection, people's care plans were not always person centred. At this inspection, we saw that information on people's preferences, likes and dislikes and interests had improved.
- There was a positive culture and homely atmosphere. People looked well looked after, relaxed and comfortable in the company of staff.
- Relatives told us they felt staff knew and understood people well. Comments included, " [Name of staff member] seems to know [Name of person] well and is able to answer any questions we may have"; [Name of person] seems to get on with all the staff and is becoming very fond of them and they of him".
- The new manager was aware of their responsibility to report notifiable incidents to CQC.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Since the last inspection, resident meetings had taken place to seek people's view on the quality of the

service they received.

- Records showed that where people needed support from other health and social care professionals, referrals to specialist service had been made appropriately.
- Staff meetings took place regularly to discuss the running of the service and people's care. A staff member told us, "Since [Name of manager] has taken over as manager she has already improved the home, the atmosphere is so much better, we are a proper team and feel like a team".