

Oceancross Limited

# Grace Lodge Nursing Home

## Inspection report

Grace Road  
Walton  
Liverpool  
Merseyside  
L9 2DB

Tel: 01515237202

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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

Grace Lodge is a care home providing personal and nursing care to 35 people aged 65 and over at the time of the inspection. The service can support up to 65 people.

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

At our last inspection the provider had failed to ensure medicines were safely managed, effectively manage the risks associated with people's care and implement robust processes to monitor and improve the safety and quality of care being provided. Improvements had been made to the service since the last inspection, and people were safe and protected from avoidable harm.

People received their medicines safely and as prescribed. Changes had been made to the home's medicines dispensing and administration processes to ensure medicines were stored securely. Quality assurance processes around medicines administration had also improved. People had personalised risk assessments which gave staff the information needed to safely manage the risks associated with people's care.

Controlled drugs were managed appropriately; however we shared some good practice guidelines around the disposal of controlled drugs to ensure safe procedures were being followed.

People told us they felt there were enough staff at the home. One person said, "They are never far away from me." Staff were visible around the home and were readily available to support people when needed.

Recruitment process were managed safely, and incident and accidents were well recorded and analysed for patterns and trends.

People were safeguarded from the risk of abuse. People told us they felt safe living at the home and relatives felt the same. One relative said, "It is ten out ten for making sure [relative] is safe and we are kept informed." Staff were aware of their responsibility to report safeguarding concerns. The provider had systems in place to manage concerns of a safeguarding nature.

Governance procedures had improved, and regular audits were being completed on records. There was no formal process for the provider to record their visits or checks at the home, however this has since been implemented.

People living at the home and their relatives gave positive feedback about the staff. One person said, "Lovely people." Another person said, "I feel very reassured my [relative] is here."

### Rating at last inspection and update

The last rating for this service was requires improvement. (Published 26 September 2020)

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 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.

We carried out an unannounced focused inspection of this service on 8 September 2020. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve in relation to safe care and treatment and governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. 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 changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Grace Lodge on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will 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?**

The service was Safe.

Details are in our Safe findings below.

Good 

### **Is the service well-led?**

The Service was Well-Led

Details are in our Well - Led findings below.

Good 

# Grace Lodge Nursing 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 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.

#### Service and service type

Grace 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 service had a manager registered with the Care Quality Commission. 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.

#### 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 two people who lived at the service and four relatives about their experience of the care the home provided. We spoke with nine members of staff including the accounts manager, the owner of the home, nurses, care workers and other staff.

We reviewed a range of records. This included five people's care records and multiple medication records. We looked at three 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 now improved to Good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

At our last inspection the provider had failed to ensure medicines were safely managed. 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.

- People were supported to receive their medicines on time and by trained and competent staff. Medication procedures in relation to controlled drugs had improved, and when people received support with medicines this was clearly documented on the MAR charts.
- 'As required' (PRN) medicines and time critical medicines were safely and effectively administered and recorded.
- Quality assurance processes around medicines administration had improved, which meant staff could be assured people were receiving their medicines correctly. However, we discussed some improvement with regards to the return of Controlled Drugs. The registered provider has since sent us assurances this has been actioned.

### Assessing risk, safety monitoring and management

- Most of the risk assessments viewed had a robust risk mitigation process in place in areas such as pressure care, wound management and falls.
- We highlighted some inconsistent information in one person's falls risk assessment, which has since been updated, reviewed, and rewritten to contain more robust information to help staff minimise the risk of this person falling.
- People and their relatives said they felt safe at Grace Lodge. Comments included, "The whole place really is just very reassuring." Also, "They get top marks from me for keeping my relative safe, we are glad they are there." Also "It is ten out ten for making sure [relative] is safe and we are kept informed."

### Staffing and recruitment

- There were enough staff at the home to meet people's needs. Comments from people included, "They [staff] are always close by, " and the staff are 'lovely'. Staff were recruited safely, and only offered positions in the home following robust recruitment checks.

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

- There were policies and procedures in place to ensure people were safeguarded from abuse.
- Safeguarding concerns had been reported to the Local Authorities and staff knew how to report safeguarding concerns to the registered manager or escalate them further if needed.
- The registered manager kept a record of safeguarding concerns and any recommendations made were acted on.

#### Preventing and controlling infection

- The provider was using PPE effectively and safely.
- The provider was accessing testing for people using the service and staff.
- The provider was promoting safety through the layout and hygiene practices of the service.

#### Learning lessons when things go wrong;

- The registered manager and provider had an open and transparent approach to learning lessons to improve quality of care.
- We saw some recent examples of how feedback from external sources such as a recent safeguarding and recommendations which had been implemented within the service.

# Is the service well-led?

## Our findings

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 not always implemented robust and effective systems to assess, monitor and improve the safety and quality of care being provided. This was a breach of regulation 17 (Good Governance) 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.

- Quality assurance and audit processes had improved since the last inspection and were more effective at identifying and addressing issues. There was a lack of provider level audits. However, we checked and found these had been completed but not formally recorded. The provider has since implemented these. The provider has since implemented these.
- Record keeping had improved since the last inspection. However, some of the records and documents we required, during inspection were not accessible due to the registered manager being on leave. These were sent after our inspection.
- The home had a manager registered with CQC.
- Ratings from the last CQC inspection were clearly displayed within the home as required.
- CQC had been notified of 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.

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

- Due to the impact of COVID-19, there had been minimal feedback received from people's family members. However, there was a feedback box in reception, and relatives told us they were always asked 'how things were' when they visited the home.

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

- People were supported to receive safe care from staff who knew them well. When we spoke to staff regarding the culture of the home, their responses were positive. One staff member said they could tell the registered manager 'anything' and they were 'always fair.'

Working in partnership with others

- The service worked in collaboration with other organisations to ensure people received appropriate support.
- The manager and clinical lead worked closely with GPs, occupational therapists, and the local authority.