

Hawthorne Care Limited

# Highbury Residential Home

## Inspection report

38 Mountsorrel Lane  
Sileby  
Loughborough  
LE12 7NF

Tel: 01509813692  
Website: [www.carehomes-leicestershire.co.uk](http://www.carehomes-leicestershire.co.uk)

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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
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Is the service well-led?	Inspected but not rated
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# Summary of findings

## Overall summary

### About the service

Highbury Residential Home is a care home providing personal and nursing care to 24 people aged 65 and over at the time of the inspection. The service can support up to 27 people.

Highbury Residential Home provides accommodation to people in one adapted building. Some people living at the service had shared bedrooms while others had their own bedrooms with an en-suite toilet and sink. There were also communal lounges, dining area and a garden.

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

Improvements were being made to the service and a new registered manager was in post. While the registered manager was working hard to improve the governance of the service, concerns raised at the previous inspection had still not been fully met.

Staff were wearing personal protective equipment (PPE) in accordance with government guidelines more consistently. We found however systems to monitor and ensure staff were wearing PPE at all times needed to be improved.

Improvements to the service's cleaning schedules had not been implemented at the time of inspection. The service also could not evidence the environment was being consistently cleaned.

There were not enough staff to provide housekeeping services. The provider and registered manager were aware of this and were actively recruiting.

Improvements had been made to systems and processes to manage the service. Not enough time had passed however to embed the new systems and processes to demonstrate changes would be sustained.

This was a targeted inspection that considered elements of safe care and governance at the service. Based on our inspection of these areas, whilst improvements are being made, the service was not able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture consistently.

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 6 August 2021) and there were multiple breaches of regulation.

At this inspection enough improvement had not been made/sustained and the provider was still in breach of regulations.

### Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulation 12 (Safe Care and Treatment) and Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met on specific concerns we had about safe use of PPE, infection prevention and control measures and how the service was being led. The overall rating for the service has not changed following this targeted inspection and remains Requires Improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do 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.

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.

### Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to monitor the service to keep people safe and to hold providers to account where it is necessary for us to do so.

We have identified breaches in relation to how the service is kept clean, and how the service is led at this inspection. At the last inspection a warning notice was served identifying concerns we had about the service. Whilst some improvements have been made, not enough action has been taken by the provider and the warning notice continues to be unmet.

Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

### Follow up

We will meet with the provider following this report being published to discuss how they will make changes to ensure they improve their rating to at least good. We will work with the local authority to monitor progress. 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?

At our last inspection we rated this key question Requires Improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**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 at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

# Highbury Residential Home

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 12 (Safe Care and Treatment) and Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 on specific concerns we had about safe PPE use, infection prevention and control procedures and how the service was led.

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

The inspection was carried out by one inspector.

#### Service and service type

Highbury Residential Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. 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 reviewed information we had received about the service since the last inspection.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service

and made the judgements in this report.

We used all of this information to plan our inspection.

During the inspection

We spoke with six members of staff including the registered manager, deputy manager, senior care worker, cook, housekeeper and maintenance person.

We reviewed a range of records and documents relating to the management of the service, including policies and procedures.

We reviewed the provider's arrangements for infection prevention and control.

We also observed staff providing care and support to people during lunch time and in communal areas of the service.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at policies and procedures relating to agency staff; reviewed cleaning schedules, staffing rotas and visiting policies and processes.

# 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. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served about failing to ensure staff were following government guidance about safe use of PPE and implementing and maintaining cleaning schedules. We will assess all of this key question at the next comprehensive inspection of the service.

At our last inspection the provider had failed to ensure government guidance on safe PPE was followed; and failed to ensure cleaning of the service occurred at all times. This exposed people to unnecessary risk of harm and was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Not enough improvement had been made at this inspection and the provider was still in breach of regulation 12.

### Preventing and controlling infection

- Cleaning schedules were not always in place. We reviewed cleaning schedules and found they had not been completed since 10 October 2021. COVID-19 specific cleaning schedules had not been implemented following the previous inspection. This meant we could not be assured the service was also cleaned to minimise the risk of transmitting and contracting COVID-19 and other viruses. The registered manager was responsive to concerns raised and put in place new cleaning schedules for staff to use.
- There were not enough housekeeping staff. At the time of inspection there was one housekeeper available to clean the entire service and there was not a robust plan in place to ensure the service was always cleaned to a high standard. This meant there was a risk people could be exposed to transmitting and contracting COVID-19 and other viruses. Following the inspection, the registered manager reviewed the rotas to make sure the service was cleaned.
- New equipment had been purchased. Additional hoists were in use in the service, but cleaning records were not in place to evidence the hoists were cleaned after they were used. This meant there was a risk of people living at the service being exposed to cross contamination. The registered manager implemented a hoist cleaning chart following the inspection.
- Improvements to PPE use had been made. We found all staff wearing facemasks. However, staff were observed not always wearing aprons and gloves when providing direct care to people and when handling food. This meant there was a risk people were exposed to the risk of transmitting and contracting COVID-19 and other viruses.
- Visitor policies were in place. Measures were in place to ensure visitors were following government

procedures around visiting and entering the service. The registered manager told us they had implemented a new process to ensure visitors were registering Lateral Flow Tests (LFTs), as at times they did not have assurances LFTs being shown were current.



# 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 Inadequate. This meant there were widespread and significant shortfalls in service leadership. Leaders and the culture they created did not assure the delivery of high-quality care. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served about how the service was led. We will assess all of this key question at the next comprehensive inspection of the service.

At our last inspection the provider had failed to ensure systems and processes were robust to demonstrate the service was effectively managed. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Not enough improvement had been made at this inspection and the provider was still in breach of regulation 17.

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

- A registered manager was now in post and was working to make improvements at the service. Policies and procedures were now accessible to staff. However, systems and processes were not robust at identifying areas that required improvement. For example, it was not identified staff were still not always wearing PPE in accordance with government guidance; cleaning schedules were not regularly completed; a hot water tap was not working in staff toilets; a radiator was not covered in a room that was accessible to people; areas of the service were very cold and some furniture in people's bedrooms was damaged and in need of repair.
- Oversight of the service was being improved. The registered manager was completing audits and action plans to encourage changes that were needed to improve the quality of care people received. The changes needed time to embed at the service to ensure changes could be sustained.