

Strong Life Care Limited

# Earls Lodge Care Home

## 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

Earls Lodge Care Home provides accommodation and care for up to 52 older people, some of whom may be living with dementia and other mental health needs. The accommodation is arranged over two floors. The home is registered to provide residential and nursing care. However, the provider has taken the decision not to admit people with nursing care needs. There were 48 people living at the home on the day of our inspection.

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

People told us they were happy living in the home and overall, people received personalised care from staff who knew them well. Overall, risks associated with people's care were identified and risk assessments were in place to mitigate risks.

We have made one recommendation about medicines and one recommendation about people's care records. The provider responded to swiftly address these issues.

Staff confirmed they had received training in safeguarding and knew what actions to take if they suspected abuse. The environment was well maintained and there were effective infection prevention control practices in place. Accidents and incidents were recorded and analysed to identify any trends or patterns. This helped to mitigate future risks and ensured lessons were learnt.

There were enough staff available to meet people's needs in a timely way. The provider followed a safe recruitment procedure to make sure suitable staff were employed. We observed staff interacting with people and found they were kind and attentive.

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.

The provider had a culture of learning and improvement and there was an effective system of governance in place to monitor and improve the quality and safety of the service. The service sought people's views about how the service could improve. The people we spoke with, their relatives and staff felt the management team were approachable and responsive.

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 April 2019).

### Why we inspected

The inspection was prompted in part due to concerns received. A decision was made for us to undertake a focussed inspection to review the key questions of safe and well-led only. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

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.

The overall rating for the service has not changed. 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 Earls Lodge on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### 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 was 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.

# Earls 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.

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 three inspectors and a member of the CQC medicines team.

#### Service and service type

Earls Lodge is a 'care home.' People in care homes receive accommodation and 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 were two registered managers.

#### 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. 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

The inspection started on 21 July 2022 and was completed on 16 September 2022. During inspection visit we spoke with nine staff including both registered managers, one of whom is also the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also met briefly with the managing director who attended to provide further information.

We spent time observing people's care and interaction with staff in the lounges and dining areas to help us understand the experience of people living at the home. We asked five people who used the service about their experience of the care provided. We spoke with five relatives.

We saw the day to day care records, risk assessments and care plans for five people and multiple medicines records. We looked at personnel and recruitment records for two staff and a range of records in relation to the management of the service. We received feedback from two health care professionals.

We met with the provider to review and discuss further evidence on 23 August 2022. We subsequently reviewed further evidence in relation to the care provided to people and the management of the service. This included feedback from other healthcare professionals, evidence of quality and safety systems and processes and quality monitoring.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found.

# 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. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- Overall, people received their medicines as prescribed.
- People and their relatives were happy with the support people received with their medicines.
- We found there was room to expand the written guidance for staff for some medicines to be taken 'when required' (PRN), and for inhalers, creams and patches.

We recommend that the provider refers to current guidance in relation to PRN medicines, medicine prescribed with variable doses, and some topical medicines.

The management team provided us with evidence of improvements the service had made in these areas. These improvements were made in a timely way and to a high standard.

### Assessing risk, safety monitoring and management

- Overall, the risks associated with people's care were identified and risk assessments were in place to mitigate those risks.
  - Staff were vigilant about people's health and wellbeing and made sure they received timely access to support from health care professionals.
  - It was evident advice from health professionals was followed and people's needs were being met.
- However, there were instances where some, but not all sections of people's care records had been updated to reflect changes in their care and treatment.

We recommend that the provider refers to current guidance in relation to care planning and documentation when working in partnership with healthcare professionals.

Again, the management team provided us with evidence of improvements, made in a very timely way.

- Visiting health care professionals said they had confidence in the standard of care people received in the service.
- The provider ensured equipment such as hoists were maintained, and regular maintenance of the premises was carried out.

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

- The provider had systems in place to safeguard people from abuse.
- People we spoke with told us they felt safe. One person said, "I feel safe. We are well looked after."

- Staff had access to information about how to protect people from harm. They had completed safeguarding training and knew how to identify and report concerns.
- Safeguarding concerns were reported to external agencies when required.

#### Staffing and recruitment

- The provider followed safe staff recruitment processes to make sure suitable staff were employed.
- Staff we spoke with told us all the appropriate pre-employment checks had been carried out prior to them commencing employment at the home. Records confirmed this.
- There were enough staff working in the service to keep people safe, although some relatives we spoke with felt more staff would be beneficial. One relative told us, "Sometimes I get the impression they might be short of staff, hearing bells going off. I spoke with the managers and they said there are six more staff starting."
- During our inspection we found there was enough staff to meet people's needs promptly.
- Records showed staff numbers were regularly monitored and were consistent. The service used a dependency assessment tool to calculate the numbers of staff needed to meet people's needs. This was reviewed every four to six weeks, and when people's needs changed.

#### Preventing and controlling infection

- People and relatives, we spoke with told us the home was always clean and well presented.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

#### Visiting in care homes

- The provider was facilitating visits for people living in the home in accordance with the current guidance.

#### Learning lessons when things go wrong

- Accidents and incidents were managed appropriately.
- Records showed appropriate action was taken following any accidents and incidents and advice was sought from other health and social care professionals when needed.
- Accidents and incidents were recorded and analysed to identify any trends or patterns. This helped to make sure lessons were learned to mitigate future risks.

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.

# 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. At this inspection the rating 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.

### Continuous learning and improving care

- The service promoted a culture of learning and improvement.
- The management team had good oversight of the service. Clear procedures were followed to review practice and make sure personalised care was provided.
- There were a range of quality monitoring arrangements in place, and we saw these were effective. Quality and safety audits were completed and where these identified areas for improvement action was taken to address these in a timely way.
- There were systems in place to ensure people's assessments, and plans were accurate, and their medicines safely managed. These audits were effective in identifying, investigating and addressing any issues. This included any anomalies or gaps in people's plans and written records.
- The management team responded very quickly, acting during and following the inspection visit to address our recommendations to a high standard. They provided clear evidence of the improvements made.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Feedback was regularly sought from people, relatives and staff. There was clear evidence this was acted upon to improve the service.
- There were regular residents' meetings. A resident representative discussed people's ideas and opinions, if people were not available to attend.
- Relatives' comments included, "We are meeting on Friday, for a relatives' meeting." And "[The managers] ask me face to face what I think. They always keep me informed. They tell me anything about [my family member]. Last week staff updated me about [my family member] changes to their care. Staff are very good."
- We observed staff interacting with people and saw they were kind and caring. One relative said, "Staff are excellent, they are all excellent workers." Another relative told us, "Staff are lovely. If ask for everything [my relative] gets it. They all seem quite lovely."
- People and relatives spoke positively about the service. One relative said, "From what I've seen staff are competent. If I have an issue, I raise it. They try their best to deal with any issues and I've been satisfied with the outcome."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 members of the management team were clear about their roles and responsibilities and understood their duty of candour.
- People and their relatives were happy with the way the home was managed. One person said, "It runs OK. I'm happy with it. I see the managers all the time and we chat. The carers are just lovely."
- Staff we spoke with were keen to provide a good quality service. They told us they were part of a good team and worked well together.
- The provider had identified staff 'champions,' in areas such as, dignity, medication, end of life care, continence, mealtimes, nutrition and hydration. infection control and safeguarding. They attended training and events to support their involvement, passed on information and promoted good practice within the service. We saw examples of how this was put into practice, raised awareness in the staff team and improved people's lives. For example, the home had dignity champions whose role was to support and promote compassionate and person centred care.

Working in partnership with others

- The home worked closely with other agencies such as the local authority and healthcare professionals.
- Recommendations and advice from healthcare professionals were followed. This helped to make sure the care and support provided was up to date with current practice.
- We received positive feedback from health care professionals we spoke with. One health care professional said the staff communicated well with them. They felt the staff sought their input in people's care in a timely way and followed any guidance appropriately. Another professional told us they had no concerns about the service, as it supported people's needs well.
- We also saw positive feedback received by the home from health and social care professionals they worked in partnership with, including the GP and district nurses. One social care professional had written a thank you note to the team. This praised the supportive and caring way they had looked after one person, through the illness and subsequent death of their spouse.
- The provider told us that since 2020 the company had won several annual, regional and national business awards. This was in areas such as care employment, recruitment, retention and training. The provider is involved in supporting several community projects and charities, including The Prince's Trust Health and Social Care mentoring programme. The provider has made contributions to local, regional, national and international charities in last 12 months. For instance, two team members undertook a sponsored sky dive, raising over £4,000 for a local hospice.