

Foxley Lodge Residential Care Home

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Inspection report

24-26 Foxley Hill Road
Purley
Surrey
CR8 2HB

Tel: 02086684135

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Foxley Lodge Residential Care Home is a care home which can support up to twenty-two people in one adapted building. The service specialises in supporting people living with dementia. There were 18 people using the service at the time of this inspection.

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

People were safe at the service. Staff had been trained to safeguard people from abuse and understood how to manage risks to people to keep them safe. There were enough staff to support people. Recruitment checks had been undertaken on staff to make sure they were suitable to support people.

People had a choice of comfortable spaces to spend time in at the service. The provider adapted the premises when needed to meet people's needs. The premises were clean and tidy. Staff followed current hygiene practice to reduce the risk of infections. Visitors to the service were given information to help them reduce the risk of catching and spreading infection. Health and safety checks of the premises and equipment were carried out at regular intervals.

People's care and support needs were assessed prior to them using the service. Their care plans set out for staff how these needs should be met. Staff understood people's needs and how they should be supported with these. They received relevant training to help them to do this. Staff were supported by the home manager to continuously improve their working practices to help people achieve positive outcomes.

Staff were calm, kind and respectful of people. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People were supported to stay healthy and well. Staff helped people eat and drink enough to meet their needs, to take their prescribed medicines and to manage their healthcare conditions. Staff obtained prompt support for people when they became unwell.

The provider had recently acted to make management changes at service and provider level to ensure the safety and wellbeing of people using the service. People, staff, relatives and the relevant agencies had been notified of these changes.

People and staff's feedback indicated despite the changes the service had continued to operate as normal and managed well by the home manager. People were satisfied with the quality of care and support they received.

The home manager reviewed accidents, incidents and complaints to identify how the service could improve. People were encouraged to have their say about how the service could improve. The home manager used

their feedback along with regular audits and checks, to monitor, review and improve the quality and safety of the support provided.

The service worked with other agencies and healthcare professionals. The provider acted on their recommendations to improve the quality and safety of the service for people.

For more details, please see the full report which is on the Care Quality Commission (CQC) website at www.cqc.org.uk.

Rating at last inspection

The last rating for this service was good (published 26 October 2017).

Why we inspected

This inspection took place in response to concerns we received about the safety and quality of care and support provided to people and about the management and leadership of the service. A decision was made for us to inspect and examine those risks during the inspection.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe, effective and well-led sections of this full report.

We also 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 coronavirus and other infection outbreaks effectively.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Foxley Lodge Residential 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 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:

The inspection team consisted of two inspectors.

Service and service type:

Foxley Lodge Residential Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 registered manager who had recently stepped down from their role. A home manager was in post and had submitted their application to CQC to take over as the new registered manager for the service. The registered manager 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. We sought feedback from the local authority. We reviewed statutory notifications submitted by the provider. Statutory notifications contain information providers are required to send to us about significant events that take place within services. We used all of this information to plan our 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.

During the inspection

We spoke with three people using the service. We asked them about their experiences of the care and support they received at the service. As most people using the service were unable to speak with us due to their communication needs, we observed interactions between people and staff. We spoke with the home manager, the deputy manager and two care support workers. We reviewed a range of records. This included two people's care records, medicines stock and records, staff recruitment files, staff training and supervision information and other records relating to the management of the service.

After the inspection

We continued to speak with the home manager and sought clarification about the evidence gathered. We also reviewed additional documentation 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 good. At this inspection this key question remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People said they were safe at the service. One person told us, "I feel safe here because there are plenty of staff and I don't have any worries at all." Another person said, "The staff are nice and the manager makes sure the staff look after people properly."
- Staff had been trained to safeguard people from abuse. Staff told us if they witnessed or suspected abuse they would report this to the home manager.
- The home manager was clear about their responsibility to liaise with the local authority and other relevant agencies if a safeguarding concern about a person was reported to them. We saw a recent example of this where the home manager had worked with the relevant agencies to ensure the safety of a person and others.

Assessing risk, safety monitoring and management

- People's records contained information about identified risks to their safety and wellbeing. There were measures in place to manage these risks to reduce the risk of harm or injury to people and others.
- Staff understood these risks and what to do to keep people safe. One staff member explained to us in detail how they moved and transferred a person using appropriate equipment to make sure this was done safely.
- Staff had been trained to support people living with dementia and told us what steps they would take when people became anxious or distressed to reduce the risk of harm to people and others.
- The provider undertook regular health and safety checks of the premises. Safety systems and equipment used at the service were maintained and serviced at regular intervals to make sure these remained in good order and safe for use.
- We noticed the annual portable appliance test (PAT) of electrical equipment was overdue by two weeks at the time of this inspection. The home manager said this had been delayed due to the availability of the external contractor that undertook this work. This was due to be completed by November and the home manager said they would send us evidence once this was done.

Staffing and recruitment

- People said staff were available when they needed their support. One person said, "There is enough staff to help us."
- We observed staff were present and accessible to people and responded promptly when people required their support. We saw a good example of this when a person partially undressed themselves in one of the communal lounges and staff were quick to make sure the person's dignity was maintained.
- There were enough staff to support people. One staff member said, "I don't feel overworked as there is

enough staff on duty to support people with their needs." Another staff member told us, "Staffing levels are good here. We are not rushed around and we can spend time with people."

- The provider carried out the relevant checks required on staff that applied to work at the service to make sure only those suitable were employed to support people. Staff records contained evidence of the checks made by the provider.
- We noted for one staff member one of their work references did not match the referees declared on their application form. The home manager told us they had been unable to obtain a reference from one of the named referees. They had asked another previous employer of the staff member for a work reference instead. The home manager acknowledged in these instances this should be recorded on the staff member's records to explain the discrepancy in information and to show this information had been obtained from an appropriate source.

Using medicines safely

- People received their medicines safely and as prescribed. People's records contained information about their prescribed medicines and how they should be supported with these. This helped staff make sure people took them in a timely and appropriate way.
- Our checks of medicines stocks, balances and records showed people consistently received the medicines prescribed to them. Medicines were stored safely and appropriately.
- The provider undertook medicines audits at regular intervals to make sure staff were managing and administering medicines safely.
- The dispensing pharmacy had also undertaken a recent audit and no concerns about medicines at the service had been identified through their checks.

Preventing and controlling infection

- Risks associated with infection control and hygiene had been well managed. Staff followed current guidance and used personal protective equipment (PPE) safely and effectively.
- Visitors were given clear and detailed information to help reduce the risk of them catching and spreading infections.
- The premises was clean and cleaning took place at regular intervals throughout the day to prevent the spread of infection.
- The provider's infection prevention and control policy was up to date. The provider had plans in place to manage an infection outbreak at the service.
- Staff followed current food hygiene practice to help reduce risks to people of acquiring foodborne illnesses when preparing, serving and storing food.

Learning lessons when things go wrong

- There were systems in place for staff to report and record accidents and incidents.
- The provider reviewed accident and incident reports and took appropriate action when needed to reduce the risks of these events reoccurring.
- Accidents and incidents were discussed with staff to help them learn from these and improve the quality and safety of the support provided to people.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated good. At this inspection this key question remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's care and support needs had been assessed prior to them using the service.
- The provider obtained information from people, their relatives and the relevant agencies involved in their lives, about people's care and support needs. This helped the provider plan and deliver care and support to people in line with standards, guidance and the law.
- People's care plans contained information about their life and medical history, healthcare conditions, their care needs and the outcomes they wished to achieve from the support provided. Their care plans detailed for staff the support they required to have their needs met and included information about their choices about how, when and from whom this was provided.

Staff support: induction, training, skills and experience

- Staff were able to meet the range of people's needs. They received relevant training to do this, including specific training to support people living with dementia. Training was refreshed at regular intervals so staff stayed up to date with current practice and knowledge.
- New staff had to successfully complete a period of induction to demonstrate they had the appropriate skills to support people at the service.
- Staff told us training helped them understand people's needs and how these should be met. One staff member said, "I feel well trained to do my job."
- Staff were supported to learn and improve in their role. They had regular supervision (a one to one meeting) with the home manager at which they were encouraged to discuss their working practices, concerns they had about their role and any further training or learning they needed to help them provide effective support to people.

Supporting people to eat and drink enough to maintain a balanced diet

- Staff prepared meals that people liked, to help them eat well. One person said, "The food here is excellent, I like anything they make. I have no favourites. Everything is really good." Another person told us, "The food is one of the best things."
- The home manager obtained people's feedback about meals at residents' meetings to make sure this was meeting their preferences.
- Staff understood people's specific dietary needs and prepared meals that reflected these.
- We observed the lunchtime meal service and people were unhurried and able to eat at their own pace. Staff were calm and respectful when providing support to people who needed help to eat their lunch.
- We looked at records for two people who had experienced weight loss due to issues they had with food

and drink and saw staff had sought appropriate support for them from the GP. Staff followed their recommendations and both people were now eating better and regaining weight.

Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives, access healthcare services and support

- People's records contained current information about the support they needed to manage their healthcare needs. Staff understood how to support people with these needs and obtained support for people when they became unwell.
- Staff worked with healthcare professionals involved in people's care and followed their recommendations to help people achieve positive outcomes in relation to their healthcare needs.
- Information about people's current health and wellbeing was shared and discussed by the staff team each day. This helped keep all staff well informed and updated about any specific concerns about a person and how these were being managed.

Adapting service, design, decoration to meet people's needs

- The layout of the premises gave people flexibility about how they spent their time at the service. In addition to their own bedrooms, people also had use of a split level communal lounge, a dining room and a large garden. One person told us, "The home is comfortable...I am happy enough living here."
- The provider had made changes to the premises since our last inspection to meet people's needs. A new lift had been installed to help people move freely and with ease between floors. New washing machines and tumble dryers had also been purchased to improve the quality of the laundry service.
- The home manager told us about improvements planned for the service in the coming months to make the premises more comfortable for people to live in. This included repainting of doors and walls, new carpets and new armchairs. Minutes of residents' meetings showed planned improvements had been discussed with people to seek their feedback and views.

Ensuring consent to care and treatment in line with law and guidance

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 Act 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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA.

- Assessments of people's capacity to make and consent to decisions about specific aspects of their care and support had been undertaken and recorded in people's records.
- Where people lacked capacity to make specific decisions, staff involved people's representatives and healthcare professionals to ensure decisions were made in people's best interests.
- Applications made to deprive people of their liberty had been properly made and authorised by the appropriate body. The provider was complying with the conditions applied to the DoLS authorisations. Authorisations were reviewed by the home manager to check they remained appropriate.

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 good. At this inspection this key question remained the same. 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; 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 provider had acted to make changes at the service and at provider level to ensure the safety and wellbeing of people using the service. Prior to this inspection we were informed of a serious incident involving the registered manager who was also the nominated individual. (The nominated individual is responsible for supervising the management of the service on behalf of the provider.) This incident had taken place away from the service. In light of this incident the registered manager had agreed to step down from both roles and was no longer involved in the operation of the service.
- The current home manager, who had extensive experience of working at the service, had submitted their application to CQC to take over as both the registered manager and nominated individual. They assured us the previous registered manager would no longer be involved in the delivery and management of the service.
- People, staff, relatives and the relevant agencies had been notified of these changes and the home manager had been open and honest about the reasons why these had occurred.
- Feedback from people and staff indicated despite the changes in management and leadership the service had continued to operate as normal and managed well by the home manager. One person said, "The manager is really good and she's easy to talk with." A staff member told us, "She is a very good manager. She lets us know about new admissions, people's care needs and she is very strict with the paperwork. She checks things daily and her communication with the staff team is really good."
- The home manager had recently promoted a senior care support worker to the role of deputy manager to provide additional management support at the service. The deputy manager said, "I am learning a lot from the new manager...I enjoy the extra responsibility." They also told us they were working towards achieving an appropriate management level qualification.
- The home manager understood their responsibility for notifying CQC of events or incidents involving people. This helped us to check they had taken appropriate action to ensure people's safety and welfare in these instances.

Continuous learning and improving care

- The home manager undertook regular audits and checks to monitor and review the quality and safety of the service. Action was taken to address issues identified through these checks including supporting and encouraging staff to learn and improve their working practices.
- The home manager reviewed accidents, incidents and complaints to identify how the service could

improve. They told us they had used the outcome from a recent Local Government Ombudsman (LGO) complaint about another service to make sure a similar situation would not arise at this service. This included introducing better record keeping when people made complaints to provide a clear audit trail of actions the service took in response.

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; working in partnership with others

- People spoke positively about staff and their experiences of using the service. One person said, "The staff are very good, very caring, I am well looked after."
- The home manager acted on people's views and suggestions to make improvements people wanted. They used surveys and resident's meetings to obtain people's feedback and we saw changes had been made in response, for example, to food menus and activities.
- Staff knew people well and their interactions with people were focussed on meeting their needs. They were calm, kind and respectful when supporting people.
- Staff were encouraged by the home manager to work well together to meet people's needs. One staff member said, "Teamwork is good. Staff morale is good."
- The provider worked with a range of healthcare professionals involved in people's care. They made sure recommendations and advice from healthcare professionals was used to design and deliver care and support that met people's needs.