

Thornton Care Limited

# Thornton Lodge Care Home

## Inspection report

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## Ratings

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

# Summary of findings

## Overall summary

### About The service

Thornton Lodge Care Home is a care home for people who live with dementia, situated on Trunnah Road in Thornton. The home is registered for 11 people. There is a stair lift to the first floor. Bedrooms are situated on the ground and first floor. Some bedrooms have an en suite facility. Car parking facilities are available at the home. At the time of the inspection visit 11 people lived at the home.

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

Safeguarding procedures were in place to protect people from the risk of abuse by staff who understood and were trained on how to recognise and respond to concerns. Staff continued to be recruited safely and people told us sufficient staff were available and on duty to support people to live an independent life as possible while living with dementia. Medicines were managed safely and administered by trained staff. Infection control systems and audits continued to ensure a clean environment and reduce any risks to people.

The registered manager ensured staff received training that met their needs and supported people who lived at Thornton Lodge Care Home. People were happy with meals and quantity of food provided throughout the day. One person said, "Good food we are blessed with staff who are good cooks." People received support with their healthcare needs promptly. 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.

People told us how staff were kind, caring and treated them well. One person said, "They are so kind and caring I feel so relaxed and comfortable." People were treated with respect and they were involved with family members in their care planning. Information about local advocacy services was available, to ensure people could access support to express their views if required.

People's communication needs had been assessed. People were entertained and stimulated by activities provided for them. An activity coordinator was employed to ensure people were able to follow their interests and hobbies. People knew how they could raise concerns about the service and a complaints procedure was in place.

The owner and registered manager were clear about their roles and provided care which resulted in good outcomes for people. They worked in partnership with a variety of agencies to ensure people's health and social needs were met. The registered manager and owner used a variety of methods to assess and monitor the quality of the service. This ensured the service continued to be monitored and improve.

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 the last inspection

The last rating for this service was good (published 30 March 2017)

Why we inspected

This was a planned inspection based on the previous rating

Follow up: The next scheduled inspection will be in keeping with the overall rating. We will continue to monitor information we receive from and about the service. We may inspect sooner if we receive concerning information about the service.

## 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 caring?

The service was caring

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led

Details are in our well-led findings below.

Good ●

# Thornton 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 Care Act 2014.

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

Thornton Lodge Care Home 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 reviewed information we had received about the service since the last inspection, including information from the provider about important events that had taken place at the service, which they are required to send us. We sought feedback from Lancashire local authority and Healthwatch Lancashire. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

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 four people who lived at the home, relatives and the registered manager. We also spoke with four members of staff. We observed care practices and how staff interacted with people in their care. This helped us understand the experience of people supported by the service.

We looked at care records of one person and arrangements for meal provision. We also looked at records relating to the management of the home, recruitment of a staff member and medicines records. We reviewed staffing levels and walked around the building to ensure it was clean, hygienic and a safe place for people to live.

# 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 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 were safe and protected from abuse and their human rights were respected. Staff told us training was provided and regularly updated to support their role.
- People we spoke with told us they thought the service was safe and felt secure. One person said, "My [relative] has peace of mind knowing I am safe."

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

- The registered manager managed risk. They documented information for staff about people's risks and how best to support people who lived with dementia. They kept these under review and updated monthly. This ensured staff had access to current information when supporting people.
- The registered manager and owner reviewed incidents to ensure risks were reassessed to prevent reoccurrence where possible and update any actions that were identified. Regular audits were completed, and lessons learned were shared with staff to improve the service and reduce the risk of similar incidents.

Staffing and recruitment

- The registered manager continued to make sure appropriate staffing arrangements were in place to meet the assessed needs of people in a person-centred and timely way.
- Staff were visible to people in their care and provided support as and when required. A relative said, "Plenty of staff around for such a small home no problems there."
- Staff continued to be recruited safely. The registered manager continued to ensure checks had been carried out prior to staff commencing employment. A staff member recently recruited confirmed this.

Using medicines safely

- Medicines were managed safely, and people received their medicines when they should. One person said, "I get my medication when I should do every day."
- Staff who administered medicines had completed relevant training to administer medicines safely, documentation in training records showed this.

Preventing and controlling infection

- The registered manager continued to have safe and effective infection control procedures. Personal protective equipment such as aprons and gloves were available around the building and we observed they were used by staff during the day of our visit.
- Staff received training and regular infection control audits were undertaken to ensure standards were maintained and improved.





# 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 as good. At this inspection this key question has 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 had their needs assessed before they arrived at Thornton Care Home. Information gathered during the assessment process was used to develop a personalised plan of care.
- The registered manager continued referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. This supported staff and management team to ensure people received effective and appropriate care which met their needs
- The registered manager regularly reviewed care and support and updated care plans monthly or where people's needs had changed. This ensured people received the level of care and support they required at the right times and was current.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and carried out their roles effectively. Staff told us they regularly updated training sessions in dementia care to meet individual's specific needs.
- Staff told us they felt supported by the registered manager. One staff member said, "Yes we have supervision regularly, however she is always available as this is a small home and she is very supportive."

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

- Staff ensured people's nutritional needs were managed to ensure they received a balanced diet and sufficient fluids to keep them hydrated. Care plans confirmed people's dietary needs had been assessed when required.
- People were provided with meals and drinks throughout the day and comments were positive. For example, one person said, "Good food we are blessed with staff who are good cooks."

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

- The registered manager continued to work effectively with healthcare professionals to ensure people's healthcare needs were met. They worked closely with healthcare services including GPs and district nurses. We saw documented outcomes and support required in care plans we looked at.
- People were supported by staff to attend to attend healthcare appointments when required. Staff supported in managing their health and wellbeing needs by making appropriate referrals to specialist services.

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

- Accommodation was accessible, safe, homely and suitable for people's needs. Bathrooms could

accommodate people who required support with moving and transferring to the bath.

- People were able to bring their own items into their rooms and to personalise their rooms as they wanted to. Peoples rooms we saw confirmed this.
- There was dementia friendly signage around the building which help support people who lived with dementia.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met. There were authorised DoLS in place.

- Records contained evidence to demonstrate care planning was discussed and agreed with people and their representatives. Consent documentation was in place and signed by the person receiving care or their relatives who had legal status to provide consent on their behalf.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- People were treated with respect, patience, sensitivity and kindness. This was observed throughout the day of our inspection visit. Also comments we received were all positive and included, "Yes everyone is so nice, they cannot do enough for me." Also, a relative said, "Kind hearted and always respectful towards us."
- Staff had a good understanding of protecting and respecting people's human rights. They talked with us about the importance of supporting people's different and diverse needs. Care records seen had documented people's preferences and information about their backgrounds, so staff had a better understanding.

Supporting people to express their views and be involved in making decisions about their care. Respecting and promoting people's privacy, dignity and independence

- People and relatives continued to be consulted about their care and make decisions for their wellbeing and support they required.
- There was information available about access to advocacy services should people require their guidance and support. An advocate is an independent person, who will support people in making decisions, to ensure these are made in their best interests.
- People continued to be treated with respect and their dignity was upheld. We saw this was demonstrated by how staff supported people.
- People were encouraged to maintain their independence. Care records detailed people's likes and dislikes, interests and described what they liked to do themselves.
- Staff and the management team provided support that ensured people's privacy and dignity. For example, we observed staff knocked on people's bedroom doors before entering. Staff also were sensitive when supporting people with personal care and respected their privacy.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People continued to receive care and support which was personalised to them. Staff were familiar with people's likes and preferences including activities, and signs to indicate distress or when they were anxious. One staff member said, "We are small home and know everyone so well."
- People told us staff gave them choices and they were able to make every day decisions about their care and how they wished to spend their time.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The registered manager identified how people who lived with dementia needed information to be provided. Their communication preferences were written in their care plans.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were encouraged to take part in events at the home and develop relationships. People told us they were helped to pursue activities and interests of their choice. An activity co ordinator was employed to support people and enable them to follow individual interests as well as group events.
- The registered manager provided a range of activities to improve people's wellbeing. For example, recent trips to the illuminations in Blackpool and entertainers performing at the home. One relative said, "We join in with karaoke on Mondays they love it and I sing."

Improving care quality in response to complaints or concerns

- Complaints and concerns were taken seriously, and a system was in place. People knew how to make complaints and felt confident these would be acted upon. One formal complaint had been received and the provider was in the process of following their procedure to investigate the concerns.
- People told us they had no reason to complain about anything however they were sure concerns would be dealt with appropriately.

End of life care and support

- People's end of life wishes had been recorded so staff were aware of these. No one was on end of life care. However, training had been provided and updated when required.

# 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 good. At this inspection this key question has 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.

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

- The owner and registered manager planned and delivered effective, safe and person-centred care. Current and relevant legislation along with best practice guidelines had been followed. This was to ensure the diverse needs of everyone who used their service were met.
- The registered manager and owner continued to maintain an open and transparent culture which contributed to staff morale being high and enabled them to deliver good care for people. One staff member said, "I love it here, I have worked in care years and never felt so supported by the manager and other staff."

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; Continuous learning and improving care

- The registered manager encouraged candour through openness. People told us good communication and relationships had been developed between all stakeholders involved with Thornton Care Home. A relative said, "Everyone at the home is approachable and so kind to us."
- The owner and registered manager regularly assessed and monitored the service through formal and informal methods such as audits, and meetings with people. We saw evidence they had acted upon any findings from the audits. This demonstrated improvements were made to continue to develop and improve Thornton Care Home.

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

- The registered manager was experienced and had good staff who were knowledgeable about the needs of the people they supported.
- Discussion with staff confirmed they were clear about their role and between them provided a consistent and organised service.
- The registered manager understood their legal obligations, including conditions of the Care Quality Commission (CQC) registration and those of other organisations. They had submitted statutory notifications to CQC about people using the service, in line with current regulations. A statutory notification is information about important events which the service is required to send us by law.

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

- The registered manager created an open culture and encouraged people to provide their views about how

the service was run. For example, surveys were completed annually, and 2019 results were all positive from people and their relatives. One survey from a relative wrote, 'The always keep me informed with mums health to which I am thankful.'

- Relatives were regularly involved in consultation about the provision of the service and its quality.

#### Working in partnership with others

●The registered manager continued to work in partnership with other organisations to ensure they followed current practice This supported staff to provide a quality service and keep people safe. These included healthcare professionals such as GPs and district nurses. This ensured a multi-disciplinary approach had been taken to support care provision for people in their care.