

Foxhill Manor care home: Did CQC rating mean it had to close?

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FOXHILL MANOR NURSING HOME

Shut in 2014 following a damning Care Quality Commission report, Foxhill Manor offered "placements of last resort" to dementia and mental health patients. Could it have been saved and what does the Foxhill story tell us about the state of modern care?

When care inspectors descended on Foxhill Manor one morning in 2014, they found a bathroom door hanging off its hinges, broken windows and water which ran so hot it could have scalded residents.

Less than 48 hours after the Care Quality Commission (CQC) visit, the half-empty 20-bed Northamptonshire home announced it was closing. The decision to close voluntarily, some claim, pre-empted a CQC decision to close it by force.

According to the CQC, there are now 425 fewer care homes nationally than there were just two years ago.

The National Care Association says while closure is the only option in certain cases, some homes are shut unnecessarily.

But was Foxhill Manor one of them?

TABLEAUPUBLIC

Detailed evidence about the home's demise was heard last week at the Nursing and Midwifery Council's (NMC) Stratford offices in London.

It laid bare the complex - though not atypical - workings of a struggling home.

Unlike many homes owned by groups of various sizes, Foxhill Manor was a lone nursing home owned and run by 62-year-old Ramsamy Nullatamby.

About two years before its closure, financial issues pushed the home into administration.

In 2013, the administrators Grant Thornton appointed healthcare consultancy Rockhaven to be its managing agent, which in turn sent in Lorraine Clarke-Blake, a registered nurse since 1974, to monitor and advise the care home.

She encountered an establishment with outdated decor and antiquated systems, but she told the NMC she had "no concerns".

'Aesthetic needs'

"The staff failed to fully document the care plans - although the care was always provided," she said.

"We now live in a society where if it is not written down then it is as though it hasn't happened. We have to demonstrate what we are doing."

She focused on record-keeping and patient care plans because they were the only areas of concern highlighted during previous CQC inspections.

"This home was in administration and they were looking to sell it as a going concern," she said.

"So while there were aesthetic needs at the home it was the intention that whoever bought the home would need to invest in it. That was reflected in the price.

"There was never an issue of whether the home was not clean in the time that I was there. I don't think there were any infections relating to hygiene. When I visited, the home was always clean."

TABLEAUPUBLIC

The carpets, she said, "were old but they were still functional". And if equipment was needed, she said, then Grant Thornton would pay.

After six to nine months things were improving in terms of care plans and risk assessments.

"It all boils down to how much money are you getting into the home," she said.

"We went from 18 down to about 12 residents because the local authority (Northamptonshire County Council) put an embargo on the home for no other reason than it was in administration.

"Some residents and relatives were concerned that the home was going to close and a couple of them decided that they would look elsewhere for a home. A couple of people took that opportunity to move - not necessarily because they did not like the home, but because they thought, 'well, we were thinking of moving Dad nearer to us anyway'.

"The income coming into the home reduced and reduced."

Fatal rating

Mrs Clarke-Blake's description is all too familiar to Nadra Ahmed, executive chairman of the National Care Association.

When care homes go into administration, she said, local authorities impose "embargoes" on placing patients with them. This strangles them financially, making it increasingly difficult to fund improvements and making eventual closure more likely.

A similar thing happens, says Ms Ahmed, with **CQC ratings**. Being labelled "inadequate" can be fatal.

THINKSTOCK

In the last year, about 350 nursing homes were rated "inadequate" by the CQC. Of these, at least **20 have shut** and a further 30 have changed hands.

"Our services are so reliant on reputation - you only need one thing to go wrong and you're in trouble," said Ms Ahmed.

"Sometimes your rating might be for something quite minor but if you get an inadequate rating councils look at you in a different way and banks will not lend to you," she said.

"It is a catch-22 situation and some providers feel it is one uphill struggle too many."

Following the CQC inspection of Foxhill Manor in June, Mrs Clarke-Blake was called by Mr Nullatamby.

"As soon as I walked in the door, I found out a couple of residents had some very challenging behaviour and there had been damage. One of the doors was hanging off in the bathroom."

Mrs Clarke-Blake, while shocked the door was not fixed immediately, is adamant it had only recently been broken.

The broken windows, she said, were in an unused room.

The home was given 48 hours to complete repairs, but before that deadline was reached its fate had been sealed.

"It was then a case of managing the residents to transfer safely to other homes," said Mrs Clarke-Blake.

The scene witnessed by the CQC that inspection morning, says Mrs Blake-Clarke, was not normal.

It was, she maintains, a home that offered "placements of last resort" to people with severe dementia and mental health needs. People, she said, who, "when they got agitated and upset, they would be very irate". Walls would be punched, bathroom doors would be broken.

But she maintains the care provided was decent, the home was functioning and the record-keeping was vastly improved by the time it was closed. The home could have been salvaged.

Not so, says Grant Thornton.

Wendy Watherston, from the administrators, said: "We thoroughly investigated the possibility of finding a buyer for Foxhill Manor.

"Unfortunately, due to the challenging market conditions at the time, and issues associated with the age and conversion type of the home, reduction in resident numbers, and the lack of a suitable buyer, there was no option but to commence a closure of Foxhill Manor.

"The decision to close Foxhill Manor was taken in the full knowledge of the Care Quality Commission, Northamptonshire County Council and Nene Clinical Commissioning Group, all of which were consulted throughout the sales process."

The CQC said: "Foxhill Manor has always been on CQC's radar, particularly with regards to the environment and the competency and ability of the provider to be able to take appropriate action.

"There were also concerns with regards to the financial stability of the provider and whether they were able to resolve the issues in a timely manner.

"Clearly if the administrators decided to close the home it suggests there was an acceptance that some issues could not be resolved."

Private sale

It remains unclear what happened to the residents at the home.

The council said it worked "with Nene Clinical Commissioning Group, care home residents and their families to find suitable alternative accommodation" but did not disclose whether the residents were housed together or separately in new accommodation.

We will never know whether Foxhill Manor - which was sold for about £900,000 as a private home - could have been turned around.

But Ms Ahmed is convinced some closed homes could have been saved.

"Some places do need shutting down," she said. "But there are other places where there are things you can do (to improve them).

"I think the question is this: Are we striving for the right things? What does excellent care look like? There isn't a straight answer. We all have different perspectives on what that is."

As for the CQC, it suggests the following: "If providers can focus on listening and acting on the voice of people using services, and their families, invest in training and valuing good managers and staff - they will be on their way to getting it right as these sorts of qualities are what we find in many of the 'good' and 'outstanding' services we see."

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