

Barchester Healthcare Homes Limited

Adlington Manor

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

Adlington Manor is a care home providing personal and nursing care to 62 people aged 65 and over at the time of the inspection. The service can support up to 88 people. Care is provided in two units: Rowan Unit which provides specialist care for people living with dementia and Cedar Unit which provides general nursing care.

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

People were supported by staff who had been trained to identify and report safeguarding concerns. People were safe because potential risks to their health and wellbeing had been mitigated and were being managed effectively. Staffing levels were appropriate. People were safely supported to take their medicines. We have made a recommendation about medicines management.

People's healthcare needs were monitored and access to a variety of health care professionals was made available where required. People were seen to eat and drink well. People were offered choice and where people had assessed specialist dietary needs, staff knew these and supported people accordingly. 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 and their relatives were positive about the service and said staff were kind and caring. Staff developed caring relationships with people and were sensitive to their individual choices. People were treated with dignity and respect and their right to privacy was upheld. The service could provide people with information about local advocacy services, to ensure they could access support to express their views if they needed to.

People were encouraged and supported to be as socially active as they wished. In addition to group activities, one to one activities were provided. The service had good links with the local community. The provider and registered manager kept records of actions taken in response to complaints, investigations undertaken and the feedback given to complainants, in line with the complaints procedure.

There was a positive and open culture. Staff roles and responsibilities were clear. The service worked in partnership with a variety of agencies to ensure people received all the support they needed. People were happy with how the service was managed. Staff felt well supported by the registered manager.

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

Rating at last inspection

The last rating for this service was good (published 04 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

Adlington Manor

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

This inspection was carried out by two inspectors, an assistant inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Adlington Manor is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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. 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 also contacted Healthwatch to see if they had information to share about the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

During the inspection

We spoke with nine people who used the service and four relatives about their experience of the care provided. We spoke with 12 members of staff including the area director, registered manager and deputy manager. We reviewed a range of records. This included nine people's care records and multiple medication records. A variety of records relating to the management of the service, including clinical governance were also reviewed.

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 has remained the same. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Topical medicines and those used to thicken foods and fluids were not always recorded at each administration.

We recommend the provider consider current guidance on recording medicines and take action to update their practice accordingly.

- The provider had a safe system to manage medicines.
- Staff who supported people with their medicines were trained and had their competency checked.
- The registered manager conducted regular medicines audits to ensure people received their medicines as prescribed.

Systems and processes to safeguard people from the risk of abuse

- The provider had policies and procedures in place to guide staff on how to safeguard people from the risk of abuse and whistleblowing.
- The registered manager and the management team understood their responsibilities around reporting any concerns or allegations to the appropriate authorities.
- Staff told us they received training on safeguarding people from abuse and demonstrated good knowledge on the different types of abuse, the signs they would look for to recognise possible abuse and actions they would take to report their concerns.
- People told us they felt safe living at Adlington Manor. One person told us, "I feel safe because there are always so many staff around." One relative stated, "Yes, [person] is safe here. The building security is good."

Assessing risk, safety monitoring and management

- The provider assessed risks to people's safety and acted to minimise risks. Risk assessments were regularly reviewed.
- Staff were very attentive to people's safety and well-being.
- Environment and equipment safety checks were routinely conducted.

Staffing and recruitment

- People were supported by sufficient staff with the right skills and knowledge to meet their needs. People confirmed that staff were available when they needed care and support.
- Staffing levels were monitored and reviewed according to people's changing needs.

Preventing and controlling infection

- People were protected by the safe use of infection control procedures and practises.
- Staff had access to personal protective equipment to prevent and control the spread of infection.
- We observed the home to be clean and free from malodours.
- The service received a five-star rating by the foods standards agency in September 2019. This gave us assurance that the service was following appropriate food hygiene procedures.

Learning lessons when things go wrong

- Systems were in place to record and review accidents and incidents.
- The registered manager met with the area director to review accidents and incidents. Systems and processes were in place to help minimise them reoccurring.
- Incidents that occurred in all the provider's homes were analysed and where lessons were learnt these were shared with the staff team.

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's needs had been fully assessed before they began living at the service. Assessments focused on people's emotional needs, preferences and their physical care needs.
- We saw good practice guidance in relation to pressure care, falls prevention, mental health and wellbeing.

Staff support: induction, training, skills and experience

- Staff told us they received regular supervision and competency checks.
- Care staff had the opportunity to be supported to gain further qualifications in care. One nurse told us, "I am completing a level five qualification that I hope will lead to a management role. The provider is very supportive."
- Nurses were supported with their revalidation. Revalidation is the process all nurses go through to renew their registration with the Nursing and Midwifery Council.

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

- People were supported to eat and drink enough.
- Information about people's nutrition and hydration needs was recorded in their care plan and people's weight was monitored.
- People were offered a choice of food and received meals in line with their needs. Snacks were always readily available. One person told us, "The food really is excellent."
- Staff were aware of people's specialist dietary requirements and supported people accordingly. Care plans recorded people's specialist needs as well as their likes and dislikes in relation to food and drink.

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

- People were supported to see health professionals such as GP's and dieticians depending on their needs
- A relative we spoke with told us, "The service always keep me informed of any medical issues or incidents."
- People received support with their oral healthcare. People had been visited by the dentist and staff told us they had the confidence to support people with their oral care.

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

- All areas of the home were accessible to people including the garden and outdoor spaces.
- Appropriate signs were visible throughout the home to enable people to find their way around and locate their bedrooms and toilet facilities.

- People had decorated their bedrooms according to their choice and liking. People could bring in furniture from their previous home so that a familiar surrounding could be created for their comfort.
- Further attention could be given towards additional enhancements within the home to assist people living with dementia. For example, use of colour, photographs, sensory items, personal memorabilia, all of which could aid and assist people's dementia journey.

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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The provider and staff understood the importance of seeking peoples' consent and supporting them in the least restrictive way.
- Staff had received training in MCA and we observed staff asking people's consent before providing care and support.
- Applications for DoLS had been submitted where appropriate and there was a clear tracking system in place to monitor the dates these were authorised or needed to be reapplied for.
- Care records identified where relatives held Lasting Power of Attorney and relevant documentation was in place.

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 supported and treated with dignity and respect; and involved as partners in their care.

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

- People and relatives said staff were kind and caring. Comments included; "Staff treat me very well and they all know my name", "Staff treat me with respect" and "Staff are lovely."
- People were cared for by compassionate staff and who responded to them as unique individuals. Staff were aware of people's life stories and used these to engage with people.
- There was a relaxed and caring atmosphere and we saw people were comfortable and happy around staff. The staff encouraged people to express their views and listened with interest and patience. We saw staff sat next to people so that they were on eye level which helped with communication.

Supporting people to express their views and be involved in making decisions about their care

- Staff understood people's communication needs; they used this knowledge to support people with making choices.
- People were offered choices thought out the day. For example, they were able to decide when they got up and went to bed, in what they wanted to wear and where they chose to spend their time.
- Relatives advocated on behalf of some people; whilst others had independent advocates. These individuals had been involved in making decisions about people's care.

Respecting and promoting people's privacy, dignity and independence

- Staff chatted with people who enjoyed their company. Staff said that it was a happy place to work. People told us all the staff were caring and were able to meet the needs of people.
- We saw staff making sure people's privacy and dignity needs were understood and always respected. For example, we saw that staff knocked on people's doors and asked for permission to go in.
- Staff recognised the importance of upholding a person's right to equality, recognised diversity, and protected people's human rights.
- Staff received training on equality and diversity. This helped ensure that staff were aware of their responsibilities in how to protect people from any type of discrimination.

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 requires improvement. At this inspection this key question has now improved to good. This meant people's needs were met through good organisation and delivery.

End of life care and support

- People's wishes around their future care needs were not always captured in detailed plans. End of life and spirituality care plans were not always completed to help guide staff about people's future wishes.

We recommend that the provider consider current guidance on future care needs and update their practice accordingly.

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

- At the last inspection the provider had not ensured people's care plans held consistent information. At this inspection we found care plans had been improved and reflected people's needs accurately. They had been regularly reviewed and updated as people's needs changed.
- People and their relatives had been involved in planning their care.
- Care plans contained sections called 'All about me'. These contained information on people's life histories. Staff were able to use the information to support people if they became distressed, by talking about subjects familiar to them.
- Staff we spoke to knew about people's individual needs and were able to tailor the care provided to support the individual in the way they preferred. Meeting people's communication needs.

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 was aware of the specific requirements of the AIS and was in the process of documenting the communication needs of people in a way that met the criteria of the standard.
- People's communication needs were identified, recorded and highlighted in their care plans. These needs were shared appropriately with other health and social care professionals.
- Information could be made available in different formats to suit people's needs where required.

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

- Staff recognised the importance of personal relationships and people were encouraged to maintain relationships with friends and family. They were encouraged to visit at any time and told us they felt

welcome. One member of staff told us they ensured people had photographs of family, so they could think of them and remember experiences.

- People had a range of activities they could be involved in to allow them to lead as full a life as possible. Activities included, crafts, quizzes, music and movement, singing, word games and board games. One person said, "There is very good entertainment". Most days the activity coordinator spent one to one time with people.
- A service mini bus enabled people to go out on trips within the local community and beyond.

Improving care quality in response to complaints or concerns

- People felt concerns raised were addressed by staff without delay and staff were responsive to what they told them. One relative told us, "I have never had to complain but I expect they would be receptive, the management team seem very approachable." Another relative said, "I would feel confident complaining at the office."
- People were confident to raise any concerns with the registered manager or staff. Where concerns had been raised these had been investigated and resolved and an apology offered where it was identified improvements could be made.

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

- People received a service from staff who worked in an open and friendly culture. Staff at all levels were approachable and keen to talk about their work. Staff said the registered manager was accessible and approachable and dealt effectively with any concerns they raised.
- We observed people approaching the registered manager and vice versa. It was apparent that people felt relaxed in the registered manager's company and that they were used to spending time with them. The registered manager knew people and their needs well.
- Staff told us they discussed staff practices within supervision and at staff meetings.

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 a clear vision about being a respected and responsive care provider, which was focused on promoting good care and compassion.
- Relatives confirmed they were kept up to date about anything significant that happened to their relative. They told us they were never left wondering or concerned about what had happened and that the registered manager was pro-active in ensuring they had all the information about their relative.
- The registered managers and provider were aware of their duty of candour responsibilities.

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

- The registered manager understood the responsibilities of their registration with us. They reported significant events to us, such as safety incidents, in accordance with the requirements of their registration.
- There were robust auditing systems in place to ensure care and support were provided as intended. The service had their own internal quality audits which checked records and procedures had been maintained and followed.
- The management team were supportive of staff who wished to develop further. They provided mentoring and various training and promotional opportunities.

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

- People, relatives and staff had opportunities to give feedback about the home. Regular meetings were held.

- The provider sought feedback from people and staff through questionnaires. People confirmed they had been consulted about the quality of service provision. The registered manager confirmed that, where any concerns were identified, this was discussed with people who used the service and improvements were made.
- The provider held regular awards to celebrating staff effort and achievement.

Continuous learning and improving care; Working in partnership with others

- There was an effective audit system in place that included audits of different aspects of the running of the service. The audits included care plans, medicines and the health and safety of people and the premises. Where issues were identified, actions were taken to ensure everything met the required standard.
- Accident and incident forms were completed. These were checked by the registered manager who analysed them for trends and patterns.
- The registered manager said relationships with other agencies were positive. Where appropriate the registered manager ensured suitable information, for example about safeguarding matters, was shared with relevant agencies. This ensured people's needs were met in line with best practice.