

Gorseley Clough Nursing Home Limited

# Gorseley Clough Nursing Home

## Inspection report

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## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Outstanding 

Is the service caring?

Outstanding 

Is the service responsive?

Good 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

### About the service

Gorseley Clough Nursing Home is a care home providing personal and nursing care for up to 50 people and specialises in supporting people with a variety of types of dementia and whom may present with complex challenges. At the time of the inspection there were 41 people living at the home.

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

People who lived at Gorseley Clough Nursing Home received excellent care from an exceptionally well led service, passionate and dedicated staff team. The positive culture, ethos, vision and values of the service shone through from the moment of entering the home, ensuring people were at the heart of the service.

The home has undergone a major refurbishment over the past three years, and this has been completed to an exceptionally high standard. The design and decoration, both internally and externally followed best practice standards for creating an environment that supported people living with dementia, memory problems, behaviours that challenge and mental health support needs.

People were treated with exceptional care and kindness. They and their relatives thought very highly of the staff and praised their caring, thoughtfulness and willingness to go above and beyond the call of duty for them. One relative told us, "We were shown round the home by the manager and we felt valued, not just another customer. Their whole ethos about care spoke volumes to us."

The passion and motivation of the registered manager and senior staff created a committed staff team. These key members of staff supported nursing and care staff to provide an outstanding level of person-centred care to people through regular reflection and learning.

People had access to a wide range of activities which enabled them to live fulfilled and active lives. There were numerous examples of staff's endeavour to provide meaningful experiences and lasting, happy memories. A range of activities were available and well attended across the home. Activities were extremely person-centred and were held individually and in groups.

There had been a significant investment in staff training and development of staff, which had resulted in improved outcomes for people, particularly those living with dementia. Several staff attended university and a number of staff had graduated with foundation degrees in health and social care.

People receiving end of life care experienced a comfortable, dignified and pain-free death. Staff had received bespoke training to help them meet the needs of people and their families. Staff provided emotional support and practical assistance needed at the end of the person's life. One relative commented, "It was an extremely sad and distressing time for us when [person's name] reached their end of life pathway. However, the staff at Gorseley Clough were just amazing. They treated [person's name] with the utmost dignity and care."

The home was exceptionally well led. There was a continuous ethos of learning and improvement for the people, the staff and management of the home. Everyone we spoke with felt wholly supported by the management team. The provider and registered manager had complete oversight of the home and were at the forefront of it. The provider had systems in place to monitor and continually improve the home and people's experiences, working collaboratively with external agencies, maintaining strong communications, the sharing of good practice to ensure the achievement of high quality care and support across the organisation.

Staff involved in the inspection demonstrated a genuine passion for the roles they performed and their individual responsibilities. Visions for people and plans for the future were understood and shared across the staff team. They embraced new initiatives with the support of the registered manager and colleagues. They continued to look at the needs of people who used the service and ways to make positive changes.

Risks to people's safety and well-being were managed through an effective risk management process. There were sufficient experienced staff deployed to meet people's needs. Medicines were managed safely and in line with best practice guidance. One person's relative told us, "[Person's name] medicines have been reviewed and they are now on a lot less, which has improved things greatly."

Care plans were in place which captured people's needs. Staff could accurately describe individuals' plans of care and people were involved in developing and reviewing them along with people and their representatives.

Staff took great pride in creating an atmosphere that welcomed people. People had a pleasant, well-presented dining experience which offered a variety of appetising food choices available at times that suited their individual preferences. Staff supported people to maintain food and fluid intake, including, a continuous supply of snacks, and making people hot drinks to help them relax and maintain their comfort.

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. Staff had an excellent understanding of when the principles of the Mental Capacity Act should be applied.

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 1 May 2019).

#### 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.

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 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 exceptionally effective.

Details are in our effective findings below.

Outstanding ☆

### Is the service caring?

The service was exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was exceptionally well led.

Details are in our well led findings below.

Outstanding ☆

# Gorsey Clough Nursing 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.

#### Inspection team

The inspection was carried out by one inspector at the home and an Expert by Experience who made calls to relatives. 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

Gorsey Clough Nursing Home is a nursing home. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. 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 was a registered manager in post.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

Before the inspection we reviewed the information, we had received about the home since they registered with us. We reviewed CQC notifications. Notifications describe events that happen in the service that the provider is legally required to tell us about.

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.

We used all of this information to plan our inspection.

During the inspection

We spoke with the four people, ten relatives, the registered manager, deputy manager, a nurse and four staff. We observed staff practices and how they interacted with people. We reviewed a range of records relating to the management of the home. This included people's care records, training records and staff recruitment records. We considered all this information to help us to make a judgement about the home.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We also looked at records and associated documentation concerning care plans, governance, and safe systems of work.

After the inspection

We carried out a video call meeting with the registered manager. This was to discuss what we found during our visit and to collect further evidence through questions and discussion. We continued to seek clarification from the registered manager 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 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.

Systems and processes to safeguard people from the risk of abuse

- Staff had been trained in safeguarding vulnerable adults. They knew what signs to look for if a person might be at risk of harm and how to report these concerns.
- There was an open and transparent culture that encouraged people to raise any safeguarding concerns. Comments from staff included, "I wouldn't hesitate to raise my concerns if I observed something untoward" and "As a team, we wouldn't stand for poor performance."
- The registered manager and staff recognised their responsibilities and duty of care to raise safeguarding concerns when they suspected abuse may have occurred. Agencies they notified included the local authority, CQC and the police.
- The service had a member of staff who was the home 'Freedom to Speak Up Guardian'. Freedom to Speak Up Guardians encourage a culture where issues can be raised without fear of negative consequences. They also help their organisations identify and address barriers to speaking up.

Assessing risk, safety monitoring and management

- The provider had systems to assess and manage risks to people's safety. Risk assessments and care plans provided guidance to staff about how to support each person safely with their individual needs.
- Staff understood risks relating to people's health and well-being and how to respond to these. This included risks associated with weight loss, maintaining skin integrity, difficulty with swallowing and potential choking risks. People's care records provided staff with detailed information about these risks and the action staff should take to reduce them.
- Staff had a good understanding of people's needs and were trained to use a variety of techniques and person centred practices to reduce distress and frustration for people living with dementia. This was by applying carefully thought out approaches, which were used consistently by the staff group. For example, we observed a staff member providing a person with a hand massage to reduce their anxiety.
- The provider had arrangements for the ongoing maintenance of the premises. The registered manager carried out environmental risk assessments and ensured equipment was safe and regularly serviced.

Staffing and recruitment

- Enough staff were deployed to meet people's needs. The registered manager had implemented a recognised staffing dependency tool which was adapted to work flexibly and go beyond task-based care. This helped staff truly deliver person-centred care in all aspects of the persons lived experience at the home.
- The registered manager was passionate about the recruitment of staff who had the right values working in health and social care and took a 'values based' approach to the recruitment and selection of staff. Once in post, staff were matched to the most appropriate department that suited their skills, knowledge, experience,

personality and interests.

- Recruitment procedures ensured necessary checks were made before new staff commenced employment. Relevant references for new staff were requested, for example from previous employers in care. Disclosure and barring service checks (DBS) were carried out to confirm whether applicants had a criminal record and were barred from working with potentially vulnerable people.
- Each person, relative and staff member we spoke with felt that staffing levels were excellent at the home. There was high ratio of staff as well as a very low turnover that meant people benefitted from continuity of care. Comments from people included, "There is always staff available and the nurses who care for me are excellent" and "Oh yes, there's always someone (staff) to talk to."

#### Using medicines safely

- Medicines were managed safely, and people received their medicines as prescribed. People told us they received their medicines when they needed them. We observed one person ask staff for pain relief as they felt unwell. Staff responded in a prompt manner and administered their medicines.
- The home used an electronic medicines management system. Medicine Administration Records (MAR) were therefore electronic. The records we checked showed that medicines were administered correctly and recorded the total of each medicine in stock.
- The provider had procedures in place to ensure medicines were stored and managed appropriately. Staff who administered medicines had been specifically trained to do so and the registered manager completed regular competency checks to ensure procedures were followed.
- The service worked closely with the local medicine optimisation team from the Clinical Commissioning Groups (CCGs) and local medical practice to improve medicine practise in the service. At the time of our inspection, the home was working to introduce a system for ordering medication online. A health professional told us, "The home is always willing to take on new initiatives such as this, and is always keen to work with us to try and reduce people's anti-psychotic medication, by using a therapeutic approach."

#### Preventing and controlling infection

- 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 following guidance in relation to visiting at the home. At the time of the inspection the home was open to visitors. People's relatives and significant others were given the option to become an essential care giver. This meant they would be still able to visit if the home experienced an outbreak. The registered manager told us that in the event of an outbreak the home still facilitated end of life care visits when people were unwell.

#### Learning lessons when things go wrong

- There was a learning culture at the home. The registered manager was keen to learn lessons when things went wrong and was responsive to feedback. Any concerns or shortfalls were quickly investigated, and



action taken to address the concerns.

- The registered manager used staff meetings, handovers and supervisions to update staff and discuss learning and share ideas.
- The registered manager monitored accidents and incidents in the home. They looked at trends and used a holistic approach to prevention. This included implementing person-centred strategies such as doll therapy and one to one support.

# 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 now improved to Outstanding. This meant people's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

Staff support: induction, training, skills and experience

- The learning environment at the service was one of empowerment and learning without barriers. Staff were encouraged and supported to be the very best they could be, and to achieve their maximum potential.
- The registered manager was committed to supporting, motivating and encouraging staff to be their very best and fulfil their potential. A pathway to further learning had been embedded into the culture of the service, with several staff recently graduating with a degree in Health and Social Care, enabling a further two staff members to enrol on a further degree in adult nursing. The enhanced development of staff had changed the culture at the home ensuring staffs knowledge and capabilities provided people with high quality care, reflective of current best practice.
- Every member of staff we spoke with, without exception, praised the provider's and registered manager's robust approach to the training and up-skilling of staff. One staff member told us, "In the couple of years I have worked here, I have changed as a person due to the level of training and guidance I have been given. I love this home." Another told us, "The managers are truly amazing, their standards are very high, and we all have an outstanding mentality working here."
- Staff were motivated to complete additional training courses which were centred around the specific needs of people. They told us training opportunities were always accessible to them. One staff member said, "Training is always on offer, which is great as I am a nurse and it's great to revisit topics such as syringe driver training."
- The registered manager was in the process of creating an academy suite at the home to further support the delivery of onsite learning and training to staff and welcome other care services to join in with training and learning being provided to further support the quality of care provided to people across the local area.
- People and their relatives felt the staff were very skilled and competent. Visiting professionals were very complimentary about how the service and staff responded to people's needs. One professional said, "The staff are all very highly trained and that's really reassuring."

Supporting people to live healthier lives, access healthcare services and support; Supporting people to eat and drink enough to maintain a balanced diet

- Staff played an essential role in helping people to live healthier lives, which included eating well again and stabilising weight. Staff ensured people's everyday health needs were met effectively.
- Family members we spoke with praised the exceptional difference staff had made to their loved one's lives since moving into the service. One relative told us about the increased confidence staff had instilled in their family member and said, "It feels and looks like a cross between a home and hotel. We were shown round by the manager and we felt valued, not just another customer. The manager's whole ethos about care spoke

volumes to us. I no longer have any anxiety about how [person's name] is being cared for as [person's name] is with people who love them."

- People's nutrition and hydration needs were very well met. The standard of catering and mealtime experiences was excellent. Food was of a high quality and always presented to make it look appetising.
- Staff embraced people's cultural and religious preferences regarding food and festive celebrations which were catered for. At the time of our inspection an alternative menu choice had been designed for Ramadan. Areas of the home had also been decorated to celebrate Ramadan.
- Softer diets were presented in an appetising way. Snacks, afternoon cakes and fruit were readily available daily. People told us they could have whatever they fancied.
- Mealtimes were extremely relaxed. The atmosphere in the dining room was calm and people could take their time with meals. Staff sat with people and encouraged those who didn't have great appetites with their meals. Menus were read out to people, so they knew what was on offer and staff showed food to people to enable them to make a choice.

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

- The service worked in partnership with various other services including GP's, district nurses and mental health specialists to name a few. We received a vast number of positive endorsements about the service from health professionals, these included: "[Registered manager's name] is always keen to support new projects we put forward to them. The manager is keen to upskill the staff, and this is great to see", "Working with [registered manager's name] at Gorsey Clough has ensured a positive relationship between the home and the University. [Registered manager's name] has a vision with regards to ensuring staff are offered opportunities to realise their potential and the part that development opportunities play in the recruitment and retention of staff in the nursing home" and "For me, Gorsey Clough is an outstanding home."
- Collaborative working with other agencies, such as hospitals, GPs and district nurses, had ensured effective care and improved people's quality of life. The registered manager recognised there wasn't an up-to-date evidence-based model of end of life care used within the local authority. As a result they approached NHS Northern Care Alliance and worked alongside the director of nursing for end of life and bereavement care to develop a quality assurance accreditation framework for care homes and care homes with nursing on the implementation of SWAN Model (Sign, Words, Actions and Needs) for end of life and bereavement care. The SWAN model of care allows and gives teams the permission to act and break rules that do not exist. An example of this was a dying person's wish to have gin administered for their oral care as this was their wish and this was provided.
- There were champions within the service who actively supported staff to continually improve the care and support being provided, and people experienced excellent healthcare and wellbeing outcomes because of this. Champions were available to offer support and advice within equality diversity, mental capacity, dementia care and infection control. This meant staff were able to support people in a way that reflected best practice. Feedback captured at the service provided a number of positive outcomes for people. One relative commented, "The change in [person's name] after only a week was extraordinary! [Person's name] regained their spark, appetite and love of food."

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

- Since our last inspection, a full refurbishment of Gorsey Clough Nursing Home had been completed. The design and decoration had been completed to an exceptionally high standard and followed evidence-based best practice guidance for creating a supportive environment for people living with dementia.
- There was a very homely feel to the service. Everyone was consulted on décor for the communal areas and consideration was also given to best practice guidance to ensure the home's environment met the needs of the people being supported, e.g. Dementia friendly. Since the last inspection, lighting throughout the home

had been changed and contrasting colours had also been used to help people make sense of their surroundings.

- The registered manager was very proactive in encouraging staff to look at how they could improve people's health and wellbeing and to look at innovative ways to do this with changes to the home environment. Staff recognised some people were struggling to hear. A hearing loop system was installed which helped people with hearing impairments communicate more effectively.
- The provider and registered manager had set out to create a Mediterranean-style dementia friendly garden to enable those living with dementia to enjoy the outside space. Work on the gardens was ongoing at the time of our inspection, but plans we viewed confirmed the work around these gardens had been considered with people's involvement and preferences very much at the forefront.

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

- People's needs were holistically assessed in line with recognised best practice. Comprehensive assessments of people's physical and mental health care and support needs were completed prior to anyone being admitted to the home. This was to ensure staff could meet their needs effectively.
- People, and their relatives, where appropriate, were consulted throughout the assessment process and their needs and choices were reviewed on a regular basis or when people's needs had changed.
- People's assessments included information about their physical and health needs, emotional needs, communication and relationships, and how best to support people to make choices. Their strengths and areas of independence were particularly noted. The service handled new admissions to the home sensitively, as they were aware the stress and anxiety people moving to care homes had on the person and their families.
- We received very positive feedback from a healthcare professional about how well the service worked with them to ensure care was delivered in line with current best practise. They said, "The home in my opinion is outstanding, I cannot fault them at all. They take on support packages that we would consider to be complex and do a brilliant job at this."

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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- At the time of the inspection, there were current DoLS authorisations in place for the people who were being deprived of their liberty. The registered manager ensured any conditions were met and the arrangements were regularly monitored and reviewed.
- The service had a member of staff who was the MCA champion who took the lead on MCA matters and ensured the staff kept up to date with best practice.
- Staff had received training in the MCA and were very confident putting it into practise. They understood that some people could have fluctuating capacity and how this manifested itself.

# 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 now improved to outstanding. 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

- There was a strong and visible, person-centred culture at the home. We observed staff were highly motivated, offering care and support that was exceptionally compassionate and kind. This positive culture was helped as staff had built trusting and positive relationships with those they cared for.
- People and relatives overwhelmingly told us how wonderfully kind and compassionate the staff were. Every person and relative we spoke with gave heartfelt comments throughout our inspection. One person told us, "I am very lucky to be in this home. The carers are angels." Another person told us, "I am very happy here. They [care staff] don't forget me and I love them all." Comments from relatives included, "I've nothing but the highest regard for the care staff. The staff here really know about dementia, how to handle it and know that what someone says is not personal but as a result of the condition", "I was told today that [person's name] had a shave for the first time in six months. The perseverance and encouragement have paid off, that's caring" and "The personal care provided is excellent."
- People were supported by staff who truly cared about them and went the extra mile to make sure they felt loved and were happy. One person's family member spoke of how much they missed their family member and shared an experience where staff recently went the extra mile and arranged a VIP valentine's day meal for people with a three-course dinner served. The staff dressed for the occasion in the appropriate waiter/waitress attire. The family member was touched by the efforts of the staff team and was emotional sharing this touching memory.
- People and their family members also provided extremely positive feedback about the home on carehome.co.uk, with the home rated 9.9 out of 10. Further comments from relatives included, "The last three days have been horrendous for us as a family. We have cried, laughed, and reminisced on the life of our relative. We have sat with [person's name] and helped him through the last two and a half days of their end of life pathway. We cannot thank the manager and the rest of the lovely staff at Gorsey Clough enough for their support, love and care to [person's name] and to us, they have fed us, kept us going with endless cuppa's and biscuits, but most of all, they have shown compassion" and "Absolute top-class nursing care provision at Gorsey Clough. [Person's name] has been in Gorsey Clough a little over a year now in the most challenging of times. It is a testament to both the management and care team at the home that we have nothing but praise and thanks for the way they have looked after [person's name] during this time."
- The staff encouraged people to celebrate all different cultures and appreciation days from around the world. One example included the celebration of Chinese New Year in February 2022. The home celebrated this event with a bespoke menu connected to Chinese culture and heritage. The home was decorated with lanterns to celebrate Chinese New Year and staff shared knowledge with people about Chinese New Year.

- The registered manager worked tirelessly to develop a welcoming and inclusive environment at the home. They talked about being a 'community' where people could feel comfortable and secure. They had achieved this through a variety of ways including training, instilling the homes values amongst the staff team and leading by example. Staff talked about themed meal events that were opened up to people's friends and relatives. With restrictions being eased the home were keen to encourage people and friends/relatives to interact with one another and get to know each other through planned events.

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

- Staff were constantly seeking ways to explore people's views and involve them in decisions about their care. The staff team knew people so well they adapted their approach to gain consent in a way that people felt comfortable with and understood. People were supported to express their views, preferences and wishes as to how they wanted to receive their care and support. These included how they wanted the service decorated, the activities and excursions they wanted to take place and the food they wanted to eat.
- Throughout the inspection visit we saw staff spending time with people. We heard laughter between staff and people and saw respectful interactions. People were offered choices and were listened to.
- People's families said they were well-informed and felt involved in their relative's care. A relative told us, "The manager is always 'ahead of the curve'. In being prepared for changes in COVID-19 visiting rules, there was never a delay in implementing changes, it was like he knew what to expect."

Respecting and promoting people's privacy, dignity and independence

- People were encouraged to be as independent as possible in their day to day lives. Their care plans acknowledged people's strengths and abilities. People living at the home and their relatives shared how staff practice and the range of opportunities available meant for some their quality of life had improved or been maintained. For example, one person reflected on how they now felt safe and more in control of their life compared to their previous home. The commented, "I was very poorly in my last home, but this place is truly something else. I am very, very happy here."
- One relative explained how staff promoted dignified care. They said, "[The person's] been getting excellent care. They no longer have continence problems, [person's name] is checked regularly so their dignity is maintained. I cannot praise or thank them (staff) enough."
- The service had commenced challenging conversations with people, staff and relatives about sexuality and disabilities. This had raised awareness of quality and diversity. To support this process the service had a lesbian, gay, bisexual, transgender and queer or questioning (LGBTQ) champion and support was always on offer to people or staff.
- The promotion of privacy, dignity and independence was at the heart of the service's culture and values. One person who used the service told us, "I am treated very well here, if I wasn't, I would tell you. The staff treat me respectfully and I can do as I please without being nagged."

## 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 remains good. This meant people's needs were met through good organisation and delivery.

#### End of life care and support

- The home provided an exceptionally high standard of care to people with palliative and end of life care needs. All staff had received training in end of life care.
- Staff cared for and supported those that mattered to people at the end of their life with empathy and understanding. The registered manager told us they helped to care for people's relatives by offering them a room where they could stay at night, freshen up or spend time to themselves. Hairdressing facilities were offered along with meals and drinks provided at no cost.
- Relatives sent cards and letters thanking the staff for the care and attention they had given. Comments included, "My father spent his last three months in this lovely home. The manager and his staff were always helpful kind and caring, in particular the nurses who looked after him in his final week. I am thankful and grateful" and "From the moment my 90-year-old mother arrived at Gorsey Clough, my wife and I felt at ease. My mum was quite poorly on arrival. The amazing care and attention showed and given to her was absolutely wonderful."

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

- People were given plenty of opportunities to take part in a wide range of activities, which contributed positively to their well-being. The registered manager and staff worked particularly hard to get to know people and ensured opportunities suited people's age, interests and personal preferences.
- There was two dedicated wellbeing coordinators who worked at the home seven days a week. A weekly activities program was in place which had been designed by people and staff together. Weekly activities included exercise classes, baking and games.
- The home had worked hard to ensure people could have access to meaningful activities despite restrictions caused by the COVID-19 pandemic.
- The registered manager expressed how the staff had worked hard to keep everyone in contact in with their relatives during the COVID-19 pandemic. When visiting in the home wasn't previously available due to government restrictions, the serviced utilised technology such as Skype video calling to enable people to maintain contact with friends and relatives.
- The electronic care plans contained detailed information about people's many interests with clear instruction for staff on how to support people to maintain these interests using their current abilities.
- People were actively encouraged to contribute to the planning of their care and support and were placed at the centre of the assessment process, which they confirmed with us. Family members and relevant health and social care professionals who knew the person well were also involved in this process, which supported those who were unable to express their needs. A staff member said, "We are always considering how we can

best support people and care plans are often tailored to ensure we get this right."

#### 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.

- Information was provided in ways which people could understand, including large print and easy read, where pictures were used to aid people's understanding.
- Staff understood how people communicated. They knew how people expressed themselves, so recognised if people were in pain or how they indicated their choices.

#### Improving care quality in response to complaints or concerns

- The registered manager and wider leadership team took concerns and complaints seriously. Managers understood this was a good way to ensure the needs of people living at the home, and their relative needs, were met and was a method of continuous improvement. The home had not received any complaints for the past 12 months, the managers were open, honest and transparent and listened to concerns raised by families.
- People said they had no complaints or concerns about the care they received. Relatives also told us they had no complaints. One relative told us, "I visit weekly, but can contact the manager anytime I need to, he's very approachable."



# 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 requires improvement. At this inspection this key question has improved to outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- The journey to outstanding started for Gorsey Clough back in March 2019; since then, the sustained improvements across the service had been extraordinary. The registered manager gave an honest account of how, over the past three years they worked tirelessly to turn the service around. We were told about the significant challenges in terms of challenging poor practices, eliminating care that was task orientated, and redesigning a service that which led to a highly positive culture.
- There was a clear management structure that passionately promoted person-centred values and a strong commitment to outstanding care. For example, the registered manager constantly supported staff to be their very best and reach their potential to ensure people received excellent care and support services, reflective of current best practice. There was excellent and open communication between the registered provider, registered manager, staff and people who used the service to ensure everyone's voice was heard and everyone's views contributed to the delivery of high quality, person centred care at the service.
- There was a strong emphasis on continually striving to improve. The registered manager recognised, promoted and implemented innovative initiatives to promote high quality service delivery and nursing care. Over the past three years the registered manager formed a pathway with a local university for staff to develop and fulfil their full potential by undertaking foundation degrees in health and social care. To date the home has supported five care staff to complete foundation degrees, with one staff member gaining merit and four staff with distinctions. At the time of our inspection, another 11 staff had been enrolled on this programme. A professional for the university told us, "[Registered manager's name] has a vision with regards to ensuring staff are offered opportunities to realise their potential and the part that development opportunities play in the recruitment and retention of staff in the nursing home."
- Without exception, the staff spoke positively about the provider and registered manager. They confirmed they felt very well supported, which in turn motivated them further to go above and beyond. Feedback from people and relatives was extremely positive. One person said, "I am very well cared for here and [registered manager's] name is a good friend of mine." Comments from people's relatives included, "[Registered manager's name] is amazing, he does anything for the family as well as the resident. I had to undergo treatment recently and he said if I ever needed to talk him, he was there for me. The staff have the same attitude as well" and "We love the manager, it's much better since he came, the staff are nicer and friendlier too."
- Staff commitment and skills were recognised, and their morale was high. They told us both the registered and deputy managers were approachable and led by example. Staff were proud of the high standards

expected of them and the quality of care they provided which they consistently tried to improve. Comments from staff included, "I have worked in the care industry for over 30 years and the level of service provided here has been unmatched in my time", "I feel valued and hungry to learn more" and "[Registered manager's name] is truly remarkable. What [manager's name] has done to this home over the past couple of years is in my opinion is outstanding."

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

- The registered manager, deputy and staff team were passionate about their roles and worked effectively together and shared the same visions to ensure they achieved positive outcomes and enhanced the wellbeing for people.
- The registered manager and the staff team were highly driven and motivated to ensure high quality care was provided. The registered manager had created a pathway for the management of falls and incidents at the home by implementing a new quality assurance framework, this resulted in a sharp decrease of incidents within the home over the last 12 months. The managers were able to evidence this by generating reports to determine how themes and trends had been captured and responded to. Any lessons learned were then communicated to the wider team.
- There was an exceptionally strong focus on person-centred care and leading by example. Gorseley Clough was one of the country's first 'Nightingale' homes, older people experiencing symptoms of COVID-19 could be discharged from hospital into a designated unit in the home. The registered manager was recognised for their efforts in August 2021 and was awarded the 'Chief Nursing Officer Silver Award'. The assistant director of Bury's adult social care commented "Your [registered manager] enthusiasm just blows me away – I wish there were a thousand of you. We were one of the first places to open these units before the government even thought about it, and for that we are truly thankful."
- The registered manager was also recognised by a national breakfast news broadcaster and won the 'One Million Minutes campaign' award in December 2021. This award recognised the efforts of the registered manager and staff team at Gorseley Clough's for their efforts during the COVID-19 pandemic.
- There were effective quality assurance systems in place which enabled the registered manager and registered provider to oversee the service and monitor the quality of the service provided. This included regular audits of medicines, accidents and incidents and health and safety. Action was taken to address any areas for improvement identified through audits and incident reviews.

Continuous learning and improving care; Working in partnership with others

- Without exception staff told us they felt appreciated in their everyday work by the registered manager, senior staff and provider. Comments from staff included, "The home has gone from strength to strength over the past few years and I feel very much a part of these changes" and "[Registered manager's name] is always on hand to look after the staff. I had some personal matters and the support I received was amazing."
- The registered manager worked tirelessly to pursue improvements to the service. The service implemented the Care Home Equation for Safe Staffing (CHESS) Model. This is an evidence-based research model supported by the University of Belfast Development and piloting of a safe-staffing model for care homes. The registered manager provided an example where a person arrived at the home requiring a high level of staff support. However, due to the CHESS model being firmly embedded at the service, they were able to reduce the person's antipsychotic medication and incidences reduced, with the person's wellbeing improving in the process.

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 management team and provider promoted an ethos of openness and transparency which had been

embedded by the staff team. There was learning where things went wrong and open discussions with people and their relatives. Where there were concerns about a person's well-being, these were raised with appropriate authorities such as the local authority safeguarding team.

- The registered manager told us that they only provided care for people whose needs they could meet. This helped to reduce incidents as staff were skilled and equipped to provide the support people required.