

The Fountain care Management Ltd

Nettleton Manor Nursing Home

Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

Summary of findings

Overall summary

About the service

Nettleton Manor is a residential care home providing personal and nursing care to 33 people at the time of the inspection. The service can support up to 43 people in one adapted and extended building over two floors.

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

The risks to people's safety were assessed and measures were in place to mitigate these risks. Staff had received appropriate update training for their roles. Medicines were well managed and there was clear auditing processes in place to monitor the quality of the service.

Staff received training on infection prevention and control practices, their practice was monitored by senior staff and they followed national guidance in relation to wearing personal protective equipment during the Covid-19 outbreak.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk Rating at last inspection (and update)

The last rating for this service was Requires improvement (published 20 November 2020). We found breaches of regulations and the provider was served with a Warning Notice. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

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 coronavirus and other infection outbreaks effectively.

We undertook this targeted inspection to check whether the provider had met the breaches of Regulations 12 and 17 of the Health and Social Care Act 2008 (Regulated activities) Regulations 2014 and that the Warning Notice we previously served had been met. The overall rating for the service has not changed following this targeted inspection and remains Requires Improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

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The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Inspected but not rated
At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.	
Is the service well-led?	Inspected but not rated



Nettleton Manor Nursing Home

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 17 good governance and Regulation 12 safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by one inspector and an assistant inspector.

Service and service type

Nettleton Manor is a 'care 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.

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

We gave the provider one hour's notice of the inspection. This was due to the COVID-19 pandemic to ensure we had prior information to promote safety.

What we did before the inspection

Prior to our inspection we reviewed information we held about the service. This included the previous

inspection report, feedback from the local authority, information received and statutory notifications. A notification is information about important events which the provider is required to send us by law. We used this information to plan our inspection.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with three people who used the service about their experience of the care provided. We spoke with six members of staff including, registered manager, deputy manager, care workers, the maintenance person and the housekeeper. We also spoke with visiting health professionals. We reviewed a range of records. This included two people's care records and multiple medication records. We looked at a variety of records relating to the management of the service, including quality audits, policies and procedures.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data, staff rosters and policies.

Inspected but not rated

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 requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess all of the key questions at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management; Staffing; Using medicines safely; Preventing and controlling infection

When we last visited the service, the provider was in breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Providing safe care and treatment. Risks to people had not always been identified and care was not always planned to keep them safe, People were not always supported by staff with up to date training to support them in their roles, to keep them safe. Records did not always support the safe administration of medicines. People were not always protected from the risks of infection as staff did not always follow national guidance in relation to wearing and removing personal protective equipment (PPE).

- During this visit we saw staff were wearing appropriate PPE and showed a good knowledge of when the equipment should be worn and how to don and doff their PPE. Staff had been provided with update training following our last visit which had supported their knowledge. The registered manager and deputy manager were undertaking regular checks to ensure staff practices were in line with the government recommended guidance.
- Risks to people's safety had been identified and their care was centred around managing and reducing these risks. One care plan we viewed had guidance on how to support a person whose anxiety affected their behaviours. Staff had guidance to help them effectively support the person.
- Since our last visit the registered manager had worked with the local authority to support staff with specialist training. The training matrix we viewed showed this training was being undertaken on a monthly basis to further support staff with up to date specialist training for their roles. This included supporting people with underlying health conditions such as Diabetes or chronic heart failure. The registered manager told us she ensured staff had the opportunity each month to register for the different modules where they felt their skills needed up dating.
- People were supported with their medicines administration and medicines were managed safely. We viewed the medicine administration records (MARs) the information in the records gave staff clear guidance on how people should take their medicines. As required medicines had protocols in place to provide staff with guidance on how and when to administer these medicines.

The above evidence showed the provider was no longer in breach of Regulation 12 of the health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Inspected but not rated

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. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

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

When we last visited the service the provider was in continued breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, Good Governance. There were on going issues with the quality monitoring processes not highlighting issues we had found in people's care plans and medicine records.

- At this visit we found the registered manager and deputy manager had worked to address the concerns we had raised in relation to the auditing processes. They had reviewed their auditing tools to ensure the tools were fit for purpose. Some of the audit tools were still being introduced, however, the ones which had been used by staff showed they were highlighting issues for the registered manager and her team to address.
- The staff team were working together to use the quality monitoring processes to improve the different aspects of care. For example, the head of housekeeping undertook regular audits of the environment and equipment such as mattresses.
- Although we saw the registered manager and her team had used the audits to highlight and address issues of concern they found, some audits would benefit from some further analysis as actions carried out had not always been recorded. The registered manager accepted this was an area she would further develop.
- The above evidence shows the provider is no longer in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. However, the processes in place need time to be embedded and further improved to show the improvements found would be sustained.