

# Mark Jonathan Gilbert and Luke William Gilbert Manchester House Nursing Home

## Inspection report

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27 November 2020

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

Manchester House is registered to provide accommodation and nursing care for up to 67 older people and younger adults. There were 53 people accommodated at the time of the inspection.

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

People's experience of using the service was positive. People received the care and support they needed when required. People said they were supported by the same carers most of the time. People and family members told us staff were helpful and kind and treated people with dignity and respect. Positive relationships had been developed between staff and people they supported.

All the people we spoke with told us they felt safe living at Manchester House. We were told, "Staff are excellent" and "I like living here, It's a good place." One relative told us how their loved one had improved overall following admission to the service.

People reported good support regarding the management of their medicines and told us they got their medicines on time. The medications records we looked at were clear and supported best practice. Staff administering medicines were suitably trained and competent.

Risks associated with people's care were identified and managed to minimise harm. The service supported a wide range of people with complex and diverse nursing care needs. Supporting care records mostly identified risks clearly and there were plans in place to help keep people safe.

The service was following good practice guidance regarding the management of COVID-19 and maintaining standards of hygiene and infection control.

Following the last registered manager leaving, a senior manager for the provider was running the service and providing effective leadership. A new manager had been appointed and was due to start in the New Year.

The provider's governance systems and organisational structure was well developed and provided effective monitoring and support for the service.

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 31 July 2018).

Why we inspected

We responded to our current risk rating of this service, which showed the service as high risk. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service has remained as Good. This is based on the findings at this inspection.

We found no evidence during this inspection that people were at risk of harm. Please see the Safe and Well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Manchester House Nursing Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### 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 well-led?**

**Good** ●

The service was well led.

Details are in our well led finding

# Manchester House 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 Care Act 2014.

#### Inspection team

The inspection was carried out by two inspectors.

#### Service and service type

Manchester House Nursing Home 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.

The service had a manager who was in the process of registering 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 service 12 hours' notice of the inspection. This was because we wanted to check key staff would be available to support the inspection and to check the COVID-19 status of the home prior to the visit.

Inspection activity started on 24 November when we visited the service and ended on 27 November 2020 when we made telephone calls to staff and relatives of people living at Manchester House.

#### What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority.

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. We used all this information to plan our inspection.

During the inspection

We spoke with eight people who used the service and two relatives about their experience of the care provided. We received feedback from 11 members of staff as well as the quality manager, estates manager and the acting manager. We also spoke with a visiting professional.

We reviewed a range of records. This included five people's care records and medication records. A variety of records relating to the management of the service, including audits, policies and procedures were also reviewed.

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.

After the inspection

Although we gave some verbal feedback to managers on the initial day of the inspection visit we arranged a Videoconference on 30 November 2020 to reiterate and discuss the full inspection findings in more detail.

# 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 remains the same. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- People received their medicines at the right time and appropriate administration records were maintained.
- Staff told us they had training to administer medicines and that managers assessed their competence to administer safely.
- Medicine administration and safety was audited on a regular basis. Recently the provider had employed a pharmacy technician to support and monitor safety and quality standards regarding medication.

### Staffing and recruitment

- People told us they received support when needed and they felt care staff were competent.
- All staff felt supported by managers at the home and there was good morale amongst staff who worked closely as a team.
- There were well- established policies and procedures in place to ensure staff had been recruited safely to work with vulnerable people.

### Assessing risk, safety monitoring and management

- Risk assessments were completed to identify areas of risk and how people needed to be supported.
- Risk assessments were reviewed regularly to reflect people's current care needs. Individual assessments included assessments and plans for COVID-19.
- People said they felt safe. Most people told us staffing was fairly consistent, particularly given the current pressures around COVID-19. One person commented, "The staff are excellent, can't fault them."

### Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems in place.
- Staff understood their safeguarding responsibilities and had confidence in managers to address any concerns.

### How well are people protected by the prevention and control of 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.

Learning lessons when things go wrong

- Incidents and accidents were recorded.
- The acting manager and senior quality manager reviewed the records to identify what needed to be done to identify trends and prevent reoccurrence.



# 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 remains the same.

This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 previous registered manager had left the service some months ago. Meanwhile the service was being managed by a senior manager for the provider in an acting role. The manager had applied for registration in the interim period before a new manager was due to commence in the new year.
- The feedback form people living at the service evidenced a settled and consistent approach by the acting manager.
- Systems and processes were in place to monitor the quality and safety of the service being provided and these helped to continuously improve the service.
- The provider had displayed the quality rating from the last inspection at the home and on their web site.
- The service had sent statutory notifications informing us of changes and events in the home as required.

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

- People received support they needed to meet their needs.
- Staff told us they enjoyed working for the service and that staffing was relatively settled considering the size and complexity of the service. Staff reported management changes had been carried out with minimum disruption so that a consistent approach had been maintained.
- Staff told us "It's good at the moment, we are well supported" and "The manager listens and there is good communication; we have been given more responsibility recently."

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

- Regular reviews took place for people using the service to ensure the support was meeting their needs.
- The complex nature of people's diverse care needs was reflected in the care records we saw. People told us they were listened to and involved as much as possible.

Continuous learning and improving care

- There had been some ongoing changes to the overall governance systems and organisational structure which reflected ongoing developments in other services operated by this provider.

- Quality assurance measures identified areas for improvement; for example, the ongoing development of the environment in the home.
- The registered provider kept up -to -date with much of current best practice and relevant health and social care requirements.
- The acting manager and senior managers were responsive to the feedback we delivered during the inspection and were positive regarding continuing to improve the service.

#### Working in partnership with others

- The acting manager and staff worked with local authorities and healthcare commissioners.
- Feedback from local authorities confirmed that commissioners had no current concerns about the service.
- Staff described how they reported concerns and worked with healthcare professionals.
- We received positive feedback from the health care professional we spoke with who told us people were well-supported by the service.