

Marley Court Nursing Home Limited

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Inspection report

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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

About the service

Marley Court nursing home provides personal care and accommodation for up to 49 people, some of whom are living with dementia. When we inspected there were 42 people living in the home. Accommodation is provided over two floors with lift access.

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

People received good quality care from staff who had been recruited safely and had received training; which helped ensure they were able to meet people's needs.

People's care and support needs were kept under review and plans of care were updated in a timely way. This helped ensure people's safety and wellbeing. A new electronic care record system alerted care staff to support needs when they were due. This helped improve the timeliness of care.

People were protected from the risk of infection by staff who had received enhanced training to manage the impact of the Covid 19 pandemic.

Management oversight of the quality of care and care records had improved. Relatives of people living in the home told us they were confident in the new manager and identified recent improvements.

Rating at last inspection and update: The last rating for this service was requires improvement (published April 2019). At this inspection we found enough improvement had been made.

Why we inspected

We undertook this focused inspection to check whether the provider had made the necessary improvements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

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.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Marley Court on our website at www.cqc.org.uk.

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 findings below.

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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.

As part of the Care Quality Commission's (CQC) response to the coronavirus pandemic we looked at the infection control and prevention measures the provider had in place. This helped us identify examples of good practice in infection prevention and control.

Inspection team

The inspection was completed by one inspector.

Service and service type

Marley Court 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.

We gave the service 24 hours' notice of the inspection. This was because we wanted to be sure it was safe for us to visit during the current Covid 19 pandemic.

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 providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

We spoke with one person who used the service and the relatives of four people, about their experience of the care provided. We spoke with six members of staff including the manager, nursing staff and care staff.

We reviewed a range of records. This included two people's care records and one person's medicine records. We reviewed a variety of records relating to the management of the service, including audits and policies and procedures in relation to the Covid 19 pandemic.

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. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

At the last inspection we found risks had not always been managed because care records had not been updated in response to changes in people's needs. At this inspection we found improvements had been made and were assured risks were being assessed and managed.

- The provider had clear and robust risk management policies and procedures which helped protect people from avoidable harm.
- The manager had clear oversight of the risk management plans in place and an effective system to ensure they were updated and reviewed when required.
- Staff understood the support people needed to manage risks, including; support with eating, minimising falls and maintaining healthy skin. A new electronic care record system prompted staff if any support tasks were outstanding. Staff confirmed this had improved their practice and said nursing staff followed up with them if any tasks appeared to be late.

Systems and processes to safeguard people from the risk of abuse

- The provider and management team continued to follow safeguarding policies and procedures which helped protect people from abuse. Staff understood how to recognise safeguarding concerns and how to raise them.
- Relatives we spoke with were confident people were safe in the home. One relative said "The staff give me confidence, they have everything in place and give (name) care and attention. Another relative said, "I have 100% confidence (name) is safe because the communication between the staff is really good."
- The registered manager kept a record of all safeguarding concerns and incidents. Investigations and lessons learned were completed and shared with the team.

Staffing and recruitment

- The provider continued to follow good practice in relation to recruitment with all necessary checks being completed prior to staff starting work.
- The registered manager calculated the staffing needed based on people's needs. This had been reviewed and updated regularly. Relatives we spoke with said they thought there were enough staff when they visited. Staff we spoke with felt there were enough staff to keep people safe but at times they were very busy.
- The provider had recruited extra staff in response to the Covid19 pandemic to provide more meal time support and to facilitate more activities within the home.

Using medicines safely

- Medicines continued to be managed safely.

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.

Learning lessons when things go wrong

- The provider continued to analyse incidents which helped the service learn lessons and adapt practice in response.
- We reviewed records which evidenced the manager had followed this procedure in relation to; supporting a person to have a safe visit, responding to relative concerns about nutrition and addressing the medicines supply.

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 now improved to Good. 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

- The provider and management team had clear strategies which helped ensure staff were clear about their roles and the quality of care expected. Staff we spoke with told us, "Managers are very clear, we have good handovers and clear guidelines." and "It is well managed, Management are approachable and clear about what they expect."
- The registered manager had good oversight of the quality of care and records within the service. This included daily meetings, daily walk rounds and handovers. Monthly analysis of these checks helped establish trends and identified any changes needed. The provider had a robust auditing system which helped ensure standards were maintained.

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

- The registered manager addressed all incidences of poor practice with support from the wider organisation when required. This helped ensure consistency and fairness.
- The provider had developed a culture of recognition and reward which helped staff feel valued.
- Staff we spoke with were committed to providing person centred care and demonstrated sensitivity to the situation people had been experiencing due to the pandemic. Staff assisted people to remain in touch with relatives using a variety of methods which included social media and window visits.

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 and management team understood their obligations to be open and honest with people when incidents occurred.
- The registered manager contacted relatives to inform them of any incidents, including those which were not notifiable to any other authority. A relative we spoke with said, "They always keep me informed if something goes wrong or if something happens."
- Records we reviewed showed the registered manager had made all the appropriate notifications including to CQC and the local authority.

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

- The provider and registered manager had increased how they engaged with everyone in response to the

recent pandemic. Resident surveys and meetings showed what was important to them and their relatives. Records we reviewed identified how the service had responded. This included the use of social media and smart phones to keep in touch.

- To support people living in the home to remain engaged and involved additional staffing had been deployed which focussed on additional activities. A relative we spoke with said, "The activities are really good, people are stimulated and interacting more."
- Staff felt they had been well supported and valued by the registered manager and provider. Staff we spoke with told us, "They thank me for working and check after my welfare and wellbeing."

Continuous learning and improving care

- The registered manager was committed to continuous learning and development to improve the quality of care people received.
- The registered manager and staff team were working to achieve Gold standard framework in end of life care. Nursing staff reported feeling more confident supporting people when admitted for end of life care from hospital. Staff were more confident to open communication with people and their families. The registered manager had won a regional award for palliative care.

Working in partnership with others

- The registered manager and staff team continued to work effectively in partnership with other agencies.
- Visiting professionals were supported to visit safely, this included; district nurses, podiatry and the hair dresser.
- Staff maintained contact with professionals involved in people's support through telephone consultations and zoom meetings.