

Colin C McCabe

# Glenarie Manor

## Inspection report

15 Aigburth Drive  
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Date of inspection visit:  
01 February 2018

Date of publication:  
28 March 2018

### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

We last inspected Glenarie Manor on the 19, 20 and 21 September 2016. At this visit the home was rated inadequate. The provider 'Colin C McCabe' had breached multiple health and social care regulations which placed people at significant risk of harm. Subsequent to this visit, the provider sold the service to a new provider and this provider has now taken over the management of the home.

At the present time, the service is still currently registered with the old provider. This is because the new provider is currently going through the registration process with CQC to register the service under 'their name'. Once this registration process is complete, they will become the legal provider of the regulated activity, accommodation with personal or nursing care for people who live at the home.

This inspection took place on the 01 February 2018 and was unannounced. We undertook this inspection to check that whilst the provider's registration process with CQC was being undertaken, the service was safe and well-led. This type of inspection is called a focused inspection and this report will only cover our findings in relation to the domains of safe and well-led.

Glenarie 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.

Glenarie Manor supports people living with complex mental health needs and provides accommodation with nursing care. The home can accommodate up to 26 people. At the time of our visit, 25 people lived at the home.

The home is a large, Victorian house situated in Sefton Park. Local shops and public transport are within walking distance. Accommodation consists of 26 single bedrooms. On the ground floor, there is a communal dining room for people to use and on the first floor there is TV room and games room.

The service had a manager who was in the process of registering with the Care Quality Commission (CQC). A registered manager is a person who has registered with CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

We spoke with six people who lived in the home. They all gave positive feedback about the home and the new staff who worked in it. It was clear from what people said that the service had significantly improved under the new provider and that they felt they had a much better quality of life. Everyone we spoke with was happy with the support they received and during our visit we observed people were relaxed and comfortable with staff members. One person told us they didn't realise how strict the home was before the new provider came into manage the service and another said that they felt life now held much more

opportunities for them.

The manager had a clear understanding of how to protect vulnerable people from abuse and safeguarding incidents were reported appropriately to the Local Authority and CQC.

People's risks were assessed and we saw that staff had clear guidance on how to prevent or mitigate these risks. The number of staff on duty was sufficient to meet people needs and records showed that safe recruitment procedures had been followed when new staff members were employed.

Accidents and incidents had been properly documented and appropriate action had been taken to prevent further harm. Complaints received had been listened to and responded to in a timely manner by the manager.

The home was safe and suitable for the people who lived there. Health and safety checks were completed on the premises and its equipment to keep it in good repair. The manager told us about the improvement plans they had in place to refurbish and improve people's living environment over the coming months.

There were a range of quality assurance checks in place to monitor the quality and safety of the service. The manager was open and transparent about the current checks in place and told us that further improvements were required to ensure that the current checks were sufficiently robust to mitigate risks to people's health, safety and welfare. They told us that they were supported by the regional manager and the provider and both could be relied upon for managerial support as and when required.

We saw that staff meetings took place and the manager met regularly with the nurses to ensure that their practice was consistent with the needs of the home.

We found that the current management of the service was good. Significant improvements to the service and people's well-being had been made since the new provider had taken over. The manager in post was open, transparent and a good role model for other staff members providing support. People told us that they were much happier since our last inspection and it was clear they felt safe.

## 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 ●

Risk assessments were detailed and contained clear information about the person and how to minimise the risks to maintain their safety.

Staffing levels were maintained to meet the needs of the people who lived in the home. Staff recruitment was safe.

The building was maintained, clean and refurbishments plans were ongoing.

### Is the service well-led?

Good ●

The home had a manager who was in the process of registering with CQC.

Notifications were sent to CQC in accordance with legal requirements.

Audits and other management processes were improving and the service overall had drastically improved following the last inspection.

# Glenarie Manor

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This focused inspection took place on 01 February 2018 and was unannounced. It was carried out by an adult social care inspector and an adult social care inspection manager.

Before the inspection we contacted Liverpool City Council Quality Assurance department. They told us that they had no concerns about the service since the new provider had taken over. We looked at all of the information that CQC had received about and from the service since the last inspection. This included notifications about issues that had happened in the service.

During the inspection we spoke with the manager and a nurse on duty. We spoke with six people who lived in the home. We looked at building safety records. We looked at staff rotas and recruitment records. We looked at care records for four people who lived in the home.

# Is the service safe?

## Our findings

We spoke with six people who lived in the home and they all spoke positively and warmly about the home and the staff who supported them. Comments we received included "It's nice here. The staff are very nice. It's much better now" and "It's much better now. You can have a cup of tea when you want and I manage my own money now which is better. It was strict before – you can do what you want now."

We looked at four care files and saw that risks in relation to people's needs and safety had been properly assessed with clear risk management plans in place to mitigate any risks in the delivery of care. For example, risks in relation to falls, nutrition, medication and behaviours that challenged were all assessed and staff had guidance to follow to prevent or minimise any potential risk of avoidable harm.

We asked the manager about safeguarding and the procedures to follow in relation to protecting vulnerable people from potential abuse. We found the manager had a clear understanding of local safeguarding procedures and their responsibilities within it. CQC had been notified appropriately of any incidents of a safeguarding nature.

We looked around the building and saw that it was clean and well maintained. We looked at the records relating to the maintenance of the building and saw that all of the required checks had been carried out. All of the safety certificates were up to date and refurbishment plans were underway and we could see that some areas of the home had already been improved and were less institutionalised than we had noted at the last inspection.

The home's fire safety provisions were adequate and the home's fire exits, fire doors, fire extinguishers, emergency lighting and fire alarm were monitored regularly to ensure they were in good working order. This ensured that the provider had taken appropriate action to protect people in the event of a fire.

We looked at staffing levels and saw that there were set numbers on each shift of two carers and a nurse during the day and one carer and a nurse at night. The manager was supernumerary and they told us that the staffing levels were flexed in accordance with people's needs. We saw that there was limited use of agency staff. The home had their own bank nurses who covered most of their required shifts.

We looked at accidents and incidents records. We saw that accidents and incidents were properly documented. This information was used by the manager to look for trends in how and when accidents and incidents occurred. This was so action to minimise the risk of repeated incidents could be taken.

We briefly looked at the management of medicines in the home and saw that overall there were no concerns. Medication audits were completed regularly and we saw that the home achieved 90% compliance in September 2017 and then 95% compliance in December 2017.

We looked at the recruitment records belonging to three members of staff employed to work at the home after our last inspection. We found that safe recruitment procedures had been followed. Each recruitment

file contained evidence that pre-employment checks had been undertaken prior to appointment to ensure staff were safe to work with vulnerable people. For example, all files contained an application form, previous employer references, proof of identification and evidence that a criminal records check had been undertaken prior to employment. There were also records to show that each new staff member had received an induction into their job role when they had commenced into employment.

## Is the service well-led?

### Our findings

Feedback about the manager and the improvements to the service was overwhelmingly positive. Many of the people we spoke with recognised the inspector and were very keen to tell them about how much happier they were and how the service had dramatically improved since the new provider had taken over. Comments we received included "Nurses treat you like a human being now" and "We are achieving a lot and we have more quality of life now." This person went on to tell us "I couldn't explore my horizons under the old management but I can now."

We entered the building and found a warm and friendly environment where people were relaxing and chatting in their home. The atmosphere in the home had positively and significantly improved. There was a definite culture change with staff and the people who lived in the home. They were seen to be laughing together and chatting socially about the day to day things people talk about when they know each other well. It was clear that people who lived at the home felt relaxed and comfortable with the new staff team.

A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The service had a manager who was currently in the process of registering with CQC. The manager understood their responsibilities in relation to the service and to registration with CQC and had updated us with notifications and other information. People who lived in the home spoke highly of the manager and told us that they liked and trusted her.

The service had been taken over by a new provider following our last inspection. The service was still currently registered to the old provider but the new provider was currently going through the registration process with CQC and was present in the home and was managing the service provision.

From April 2015, providers must clearly display their CQC ratings. This is to make sure the public see the ratings, and they are accessible to all of the people who use their services. The provider had ensured the home's previous ratings were displayed appropriately in a clear and accessible format, on the notice board in the office and in the entrance area to the home.

We looked at the arrangements in place for quality assurance and governance. Quality assurance processes are systems that help providers assess the safety and quality of their services, ensuring they provide people with a good service and meet appropriate quality standards and legal obligations. We reviewed several audits and records relating to the management of the home. The manager was very honest and told us that they were a work in progress but we could see that lots of improvements had been made and were continuing to be made. The manager told us that they were supported by the regional manager and that the provider was also regularly a presence in the home and could be relied upon for support.

We saw that staff meetings were taking place and the manager met regularly with the nurses to ensure that their practice was consistent with the needs of the home.



We saw that complaints about the service were taken seriously and had been thoroughly investigated in accordance with the home's complaints procedure.