

Mapleford (Nursing Home) Limited

# Mapleford (Nursing Home) Limited

## Inspection report

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30 September 2019

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## Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

**Requires Improvement** ●

Is the service well-led?

**Requires Improvement** ●

# Summary of findings

## Overall summary

### About the service:

Mapleford (Nursing Home) Limited is a nursing and residential care home which provides nursing and personal care to up to 54 people, including older people, younger adults, people with mental ill health and people living with dementia. At the time of the inspection, 38 people were living at the home.

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

We found the provider had made a number of improvements since the last inspection and the requirements of the warning notices had been met.

Staff had completed the necessary training to be able to provide people with safe care. Staff members' competence to move people and administer their medicines safely had been assessed. The provider had made improvements to the safety of equipment and the premises, to ensure the home was suitable for people to live in.

Management and oversight at the service had improved. The manager completed a variety of effective audits and submitted regular reports to the provider. The manager and provider met regularly, which ensured the provider remained up-to-date with any improvements needed at the home.

### Rating at last inspection and update

The last rating for this service was requires improvement (published 27 June 2019) when there were three breaches of regulation. These related to premises and equipment, staff training and competence, and the monitoring of quality and safety at the home. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

Following our inspection, we served two warning notices on the provider, in relation to Regulation 12 HSCA RA Regulations 2014 Safe care and treatment (staff training and competence) and Regulation 17 HSCA RA Regulations 2014 Good governance (monitoring of quality and safety). We required the provider to be compliant by 17 June 2019.

### Why we inspected

We undertook this targeted inspection to follow up on the warning notices and the other identified breach from the last inspection, to ensure the provider was meeting their legal requirements. CQC are trialling targeted inspections to measure their effectiveness in relation to services where we have carried out enforcement activity, such as issuing warning notices.

This report only covers findings in relation to aspects of safe care and treatment and good governance. The overall rating for the service has not changed following this targeted inspection and remains requires improvement. This is because we have not inspected all areas of the safe and well led key questions.

### Follow up

We will monitor the progress of the improvements we found, working alongside the provider and local authority. 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?

**Requires Improvement** ●

The service remains requires improvement.

Details are in our safe findings below.

### Is the service well-led?

**Requires Improvement** ●

The service remains requires improvement.

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.

### Inspection team

The inspection was carried out by one inspector.

### Service and service type

Mapleford 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 did not have a manager registered with the Care Quality Commission. The manager had been in post since July 2019 and had recently submitted an application to become the registered manager for the home.

### Notice of inspection

This inspection was unannounced.

### What we did before the inspection

We reviewed information we had received about the service from the provider since the last inspection, such as details of serious injuries and safeguarding concerns. We reviewed information received from the local authority and other agencies involved with the service, during regular Quality and Performance Improvement Planning (QPIP) meetings, which we had attended since the last 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. We used all of this information to plan our inspection.

#### During the inspection

We spoke with the manager of the home. We inspected the premises to check if issues from the last inspection had been addressed and to ensure the environment was safe for people to live in. We reviewed a range of records, including staff training and competence records, and records relating to checks of equipment and the home environment, including fire, water and infection control.

#### After the inspection

We reviewed additional information received from the manager, including management meeting notes, an updated home improvement action plan and an update about fire safety improvements at the home.

# 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 remained the same. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

We have not changed the rating as we have not assessed all aspects of this key question. We will assess all of this key question at the next comprehensive inspection. The purpose of this inspection was to check if the provider was meeting the requirements of the warning notices and the other identified breach from the last inspection.

### Assessing risk, safety monitoring and management

At our last inspection the provider had failed to ensure staff had the skills to provide people with safe care and had failed to ensure the home environment was safe.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12 or regulation 15. The provider was meeting the requirements of the warning notice served on them for breach of regulation 12.

- The provider had ensured all care staff had completed up-to-date practical moving and handling training and had been observed supporting people to move, to ensure they were able to do this safely. All nurses had been subject to a competence assessment to ensure they were able to administer people's medicines safely.
- The provider had ensured the home environment was safe for people to live in. The manager and maintenance staff completed weekly and monthly checks of the home environment, including checks of water temperatures, equipment, fire safety and infection control. A fire risk assessment had been completed and improvements were ongoing. An action plan was in place and the local fire service were involved in monitoring this. A recent legionella risk assessment had been completed and the necessary improvements were being addressed. Legionella bacteria can cause Legionnaires disease, a severe form of pneumonia. All fire extinguishers at the home had been serviced, the passenger lift had been inspected and repaired, and the home's fire evacuation procedure had recently been reviewed.
- The broken tiles and cracked cupboard door found during the last inspection had been replaced and we found no concerns about the environment which could pose a risk to people's safety.

# 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 remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

We have not changed the rating as we have not assessed all aspects of this key question. We will assess all of this key question at the next comprehensive inspection. The purpose of this inspection was to check if the provider was meeting the requirements of the warning notices and the other identified breach from the last inspection.

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

At our last inspection the provider had failed to assess, monitor and improve the safety and quality of the service.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17. They were meeting the requirements of the warning notice.

- We found evidence of improved management and oversight of the service. The manager and maintenance staff completed a variety of weekly and monthly audits, including those related to the home environment, health and safety, fire safety, equipment, infection control, care documentation and staff training. Action plans were in place and necessary improvements were being addressed in a timely way. We found the audits and checks completed were effective in ensuring appropriate standards of quality and safety were being maintained at the home.
- The manager submitted a monthly report to the provider, which included information about the home environment, complaints, safeguarding, staffing and the outcome of audits completed. This enabled the provider to have effective oversight of the service. The manager and provider met regularly to ensure the provider remained up-to-date with the service and any improvements needed.
- All of the issues we identified at the last inspection had been addressed, including gaps in staff training, a lack of staff competence assessments for moving and handling and medicines administration, and the improvements needed to the safety of the home environment. A home improvement plan was in place, which included the completion of the remaining fire and legionella actions, the replacement of carpets in the main lounge and further redecoration throughout the home. Timescales were included for the completion of each action. We will monitor these following the inspection.



