

Springcare (Knutsford) Limited

Bucklow Manor Nursing Home

Inspection report

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Ratings

Overall rating for this service

Good 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Good 

Is the service well-led?

Good 

Overall summary

This inspection took place on 7 May 2015 and was unannounced.

Bucklow Manor is registered to provide accommodation for 49 people who require nursing care and/or who are living with dementia. It is located near the town of

Knutsford. The home is divided into two parts; a nursing section and a section for people who are living with dementia. There were 26 people living in the home on the day of our visit.

The home had a manager in post who had applied to be registered with CQC. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are

Summary of findings

‘registered persons’. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run.

At our last inspection in January 2015 we found that improvements were needed in respect of the training, professional development, supervision and appraisal of staff and with regard to missing records such as quality audits.

We also served warning notices on the provider with regard to the care and welfare of service users and how they assessed and monitored the quality of service provision.

Following this the provider sent us an action plan telling us about the improvements they intended to make.

We noted improvements to the home during this inspection and evidence to show the compliance actions and warning notices had been met.

The experiences of people who lived at the home were positive overall. People told us they felt safe living at the home, staff were kind and compassionate and the care they received was good. People remarked that the food was good.

We found the home was meeting the requirements of the Deprivation of Liberty Safeguards (DoLS) and staff followed the Mental Capacity Act 2005 for people who lacked capacity to make decisions for themselves.

We saw that people’s medicines were securely stored and safely managed. The provider had a policy to guide staff regarding the safe management of medicines. Staff were aware of the actions to take in the event of an error when giving medicines.

There were robust recruitment checks in place so that people were protected from being supported by unsuitable or unsafe staff.

We looked at the duty rotas and spoke to staff about the numbers of staff on duty. We found there were adequate numbers and skill mix of staff on duty to meet the needs of people living at Bucklow Manor. We saw agency staff were rostered to work at the home but the same staff members worked each week to provide continuity of care.

We saw records which showed that staff training had taken place and all staff were up to date with appropriate training so that people could be confident they were properly cared for.

The home had a complaints procedure in place and we saw that complaints were logged and actions taken following investigations were recorded so that the service could be improved.

Summary of findings

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

People who used the service told us that they felt safe.

Staff had a good understanding of safeguarding and knew what to do in order to keep people safe.

We found that staff recruitment was safe as appropriate pre-employment checks had been carried out to ensure that only suitable staff were employed to work with vulnerable adults.

The provider used assessments to identify specific risks and to minimise or avoid them.

Where staff administered medicines they knew how to do this, were trained and were checked from time to time.

Good



Is the service effective?

The service was effective.

Staff had received training to equip them to care and support people in their care.

There were sufficient staff to provide support to the people who lived at the home.

Staff knew that it was important to gain people's consent to the care they were providing.

The registered provider was taking steps to make sure that staff were trained in the latest developments in connection with Mental Capacity Act 2005.<

Good



Is the service caring?

The service was caring

We found staff were respectful to people, attentive to their needs and treated people with kindness in their day to day care.

People were able to make choices and were involved in decisions about their day.

Good



Is the service responsive?

The service was responsive

People received care and support which was personalised and responsive to their needs.

People knew how to make a complaint and felt confident any issue they raised would be dealt with promptly.

Referrals had been made to the relevant health professionals for advice and support when people needed it.

Good



Is the service well-led?

The service was well led

People spoken with said that they felt the manager did a good job and was approachable and provided a well-run home and felt that things had improved and was more organised.

Good



Summary of findings

The procedures in place to monitor and improve the quality of the service were effective and actions were taken to address any issues that were found. This ensured that people lived in a home that was safe and well led.

Bucklow Manor Nursing Home

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 inspection took place on 7 May 2015 and was unannounced.

The inspection team comprised of two adult social care inspectors. Before the inspection we reviewed the information we held about the service. This included a review of any notifications sent to us about incidents in the home, which the service is required to send us by law.

We contacted Cheshire East Council who commission the service for some people living in the home. They sent us their report from their last monitoring visit and issues raised by them had been actioned.

We met with people throughout the home and saw how care was provided to people during the day. We spoke to 10 people who lived in the home and one relative. We interviewed the manager, and seven staff including senior staff, the chef, domestic staff and health care assistants. We looked at five people's care records and documentation in relation to staff recruitment and training, risk assessments, quality assurance audits, policies and procedures and the management of medicines.

We used a number of different methods to help us understand the experiences of people who live at Bucklow Manor. This included the Short Observational Framework for Inspection (SOFI). SOFI is a specific way of observing care to help us understand the experience of service users who could not talk with us.

Is the service safe?

Our findings

We spoke with people who lived in the home and they said they felt safe.

People said “We are well looked after here,” “Staff have a good attitude with you” and “I like it here”.

We saw in the care files that appropriate risk assessments had been completed for each person. There were plans in place to manage risks to individuals safety for example falls, moving and handling and pressure ulcers. We saw that risk assessments had been evaluated and if needed updated each month. We spoke with staff who were aware of people’s risk assessments and how to effectively support people to keep them safe.

We saw that staff assisted people to mobilise around the home in a safe way and according to their care plan. Each person had a mobility care plan and a moving and handling risk assessment in place. Accidents and incidents were looked at on an individual basis and action was taken to reduce, where possible, reoccurrence. The manager also completed a monthly review of accidents and incidents in order to identify patterns and to ensure appropriate action if needed was taken.

All fire exits were clearly marked and firefighting equipment present. A fire risk assessment for the home was in place and the manager was in the process of updating this. There were Personal Evacuation Emergency Plans (PEEPS) completed for each person so that staff would not know the best way to help people evacuate the building in the event of an emergency.

We saw that regular checks were carried out by the manager, provider and the home’s maintenance staff to help ensure that a safe environment was available to everyone. There were note books outside the maintenance staff office so staff could report errors found such as light bulbs which needed replacing.

We looked at the duty rotas and found that there were two RGNs and six care staff on duty each day. We saw that some of the care staff were agency workers. On looking at the duty rotas and speaking to staff it was clear that the same agency carers worked regularly at Bucklow Manor. These staff members were on duty three or four times weekly and had been at the home for some time to aid with continuity of care. In addition to care staff, a number of other

housekeeping; laundry and kitchen staff and the manager were on duty to support the needs of the people who used the service. On night duty we saw there were one RGN and three care staff on duty.

We were shown the adult protection procedure. This was designed to ensure that any possible problems that arose were dealt with openly and that people living at the home were protected from possible harm. Training records showed us that staff had received training with regard to safeguarding and staff we spoke with were aware of procedures to follow regarding any suspicion of abuse. All of the staff that we met told us they would not hesitate to report any concerns or any signs of abuse.

We looked at a sample of staff files including a newly recruited member of staff, to check that the appropriate checks had been carried out before they were employed to work at Bucklow Manor. Personnel files were organised and included appropriate checks to show safe recruitment and management of staff especially in checking references and criminal record checks so that they could be assured they were safe to work with people living at Bucklow Manor.

We looked at a sample of medication records, the storage of medicines and checks on the management of medications. The arrangements for managing medicines were safe. Medicines were kept safely and were stored securely. Clear records were kept of all medicines received into the home and of any medicines that had been returned to the pharmacy as no longer required. Records showed that people were getting their medicines when they needed them and at the times they were prescribed. Staff had been trained in the safe handling, administration and disposal of medicines. All staff who gave medicines to people had their competency assessed by a senior staff member and they had completed training. There was evidence that people who required medicines outside of the prescribed times of morning, afternoon and evening were receiving these medicines appropriately. For example some medicines needed to be given an hour before food and the senior staff were aware of this practice. It was recorded fully on the medicine administration sheet when these medicines should be given and why. Similarly, arrangements had been made to ensure that where doses of the same medicine were repeated throughout the day, enough time was left between each dose. This meant that people benefitted from their medicines. We were shown reports of regular medicine audits.

Is the service safe?

Some prescription medicines are controlled under the Misuse of Drugs Act 1971. These medicines are called

controlled drugs or medicines. Controlled medicines were stored safely and separate records maintained. The stock of controlled medicines reflected the amount recorded in the controlled drugs book.

Is the service effective?

Our findings

People we spoke with told us they were happy with the way staff cared for them. They felt their needs were being met by staff at Bucklow Manor. One person told us how they needed to be moved by the use of a hoist and said “Staff always explain everything to me” Another person who was sat in the dining room watching TV said “I always stay here it is what I choose to do, staff bring me drinks and chat on their way past.” Relatives spoken with said “My relative is well looked after here, not seen anything untoward at all.”

People living at the home told us they enjoyed their meals and had plenty of choice and alternatives were available if requested. People made positive comments such as: “The food is very good and you get plenty”, “Food is good”, “Food is really nice and plenty of choices” and “Good place this, always offering tea.”

We carried out a Short Observational Framework for Inspection (SOFI) at lunchtime and found positive interactions between staff and people living at the home. We observed staff respectfully supporting various people to sit in the dining room in preparation for their meal or choosing to sit in their own bedroom. We observed the lunchtime meal experience. There was a calm and relaxed atmosphere, with some chat between staff and people and from table to table. Most people managed to eat their food without help, but some needed food cut up. We observed people who required assistance were provided with discreet and sensitive support from the staff team. The kitchen staff had recently received four stars from the environmental health department for a well-managed kitchen.

We saw that care records contained a range of information about how to support people with their various dietary needs and included a malnutrition universal screening tool (MUST). The MUST document is an assessment that once completed highlights risks to individuals in relation to their nutritional needs and intake. Care plans demonstrated that people's weights were monitored on a regular basis. This was done to ensure that people were not losing or gaining weight inappropriately. We saw that referrals had been made to the dietitian if advice was needed about dietary issues. We saw that if people needed support with swallowing that the Speech and Language team (SALT) were contacted and an assessment of their swallowing reflex was undertaken.

At the last visit we raised concerns about a person who was not being given a soft diet and was at risk of choking. An action plan was sent to CQC following the visit which informed us that care plans had been updated and that staff were aware of the dietary needs of the people living at the home. We saw that the care plans had been updated and staff spoken with were aware of the need to follow the advice of the SALT team and of the special diets required for some people.

We looked at policies that were in place for staff to follow in relation to the Mental Capacity Act 2005, the Deprivation of Liberty Safeguards (DoLS) and consent to care and treatment. The Mental Capacity Act 2005 (MCA) says that before care and treatment is carried out for someone it must be established whether or not they have capacity to consent to that treatment. If not, any care or treatment decisions must be made in a person's best interests. These policies provided information to support staff about the procedures they should follow when a person was unable to make certain decisions for themselves.

We reviewed the records for two people who had been assessed as being deprived of their liberty. Staff were knowledgeable in regard to these procedures and were able to recognise when a DoLS authorisation was necessary to safeguard people's rights. We found staff had acted in accordance with the requirements of the Mental Capacity Act 2005 in order to ensure each person's rights were protected and that they received appropriate care and support to meet their needs.

We saw records of ‘Best Interest Meetings’ and it was clear that the involvement of people's next of kin had been sought to contribute to the decisions being made. Records seen were clear, concise and up to date. This showed us that the service knew about protecting people's rights and freedoms and appropriate referrals were made to keep people safe.

At our last inspection we had concerns about the level of training being provided to staff and asked the provider to improve training in areas such as venepuncture, (the process of obtaining blood), diabetes, catheterisation, dementia, record keeping, end of life, medication and first aid. At this visit training records were seen for staff employed at Bucklow Manor and for the agency staff working there. These records showed training had been undertaken and the record also helped identify when they were due for refresher training in various topics.

Is the service effective?

Staff spoken with told us they had received regular training and that they were provided with all the training they needed to help them with supporting people who lived at the home. We spoke with the agency care staff who worked at the home on a regular basis and they felt “like one of the team”. Most of the staff we had spoken with had received training covering the Mental Capacity Act and all of the staff that we spoke with demonstrated a good understanding about this subject.

We saw records for the supervision of all staff to help show how they were provided with regular and consistent support. Supervisions are regular meetings between an employee and their line manager to support staff

development and to discuss any issues that may affect the staff member; this may include a discussion of on-going training needs. All staff should expect to be provided with supervision to help with their development within the service to ensure they provide a consistent level of good quality support to service users. The records looked at recorded training that staff had requested over and above the training which was provided by the home. For example, one staff member felt that they needed more support with dementia training and how to support people that challenge the service. This staff member had completed some dementia training and was booked on a further course as they had requested.

Is the service caring?

Our findings

We spoke with people who lived at Bucklow Manor and they said they were happy with the staff and the care they received. Comments such as “Staff are good,” “Staff are caring,” and “Staff look after me.” were made.

At our last inspection we had concerns that some aspects of people’s personal hygiene had not been attended to. During this inspection we saw records of people’s hygiene needs being met and it was recorded that people were given a choice of a bath or shower and how often this was offered and completed. We saw that people looked well cared for at Bucklow Manor.

Care plans included people’s preferences with regard to the gender of staff who supported them with personal care and we saw that this was respected. Staff understood the importance of respecting people’s rights. People wore clothing appropriate for the time of year and were dressed in a way that maintained their dignity. Good attention had been given to people’s appearance and their personal hygiene needs had been supported. Some people were seen wearing colour co-ordinated outfits and non-slip footwear. Several people were wearing clean reading glasses and many ladies had their nails painted.

We saw good relationships between the staff and the people living at the home. People looked comfortable with

the staff on duty and we saw that people were having a laugh and joke with staff. It was clear from the way staff interacted with people that they cared about them. We saw that the home had a relaxed atmosphere and staff we spoke with told us they enjoyed supporting the people living in the home.

People living in the home had an end of life care plan. This recorded how people wished to be cared for in the end stages of their life. For example, it recorded if they wished to stay in the home or be transferred to hospital. This meant that staff and their GPs were fully aware of how the person wanted to be treated and supported at the end of their life. Pain and symptom control were fully recorded and any nursing or caring interventions were fully recorded so all staff were kept up to date with any changing needs.

We saw that personal information about people who lived at Bucklow Manor was stored securely which meant that they could be sure that information about them was kept confidentially.

Information was given to people before they moved into the home in the form of a service user guide. This gave people adequate information that the home would be able to meet their needs. We saw that leaflets were available in the main entrance hall with regard to advocacy services.

Is the service responsive?

Our findings

Everyone living at the home had a plan that was personal and individual to them. These plans were used to guide staff on how to involve each person with their care plan and provide the care and support they needed and requested. All of the plans we looked at were well maintained and were up to date. The plans were reviewed regularly so staff knew what changes, if any, had been made. This meant that staff had information to hand that helped ensure people received care that reflected people's individual needs.

Staff demonstrated a good understanding of the people they supported in relation to their changing behaviours and changing needs. Records and discussions with staff demonstrated that people who use the service had access to a variety of health services such as local GPs; dieticians and speech and language therapists (SALT teams) opticians, social workers, hospital consultants and clinical specialists. Records demonstrated that people living at the home were escorted to attend hospital appointments and received visits from visiting professionals which helped them to co-ordinate their care necessary for their health and for any changing health care needs.

People told us, and records confirmed that residents meetings took place where people talked about anything relevant to the smooth running of the home and communal living. Minutes of these meetings were circulated.

Relatives and people we spoke with during the inspection told us they knew how to complain but had no complaints. People living at the home were very confident in regard to being able to raise any comments.

The home's complaints procedure was displayed in order that people could refer to this if needed. At the entrance of the home, we saw that there was information displayed regarding the fees, service user guides and contact details for the Care Quality Commission so that people could make contact if they wished to share information about the service they received. Records were in place that showed that where concerns or complaints had been raised, the manager had responded to these on an individual basis in writing.

The home had recently employed an activity coordinator whose role it was to organise and plan any activities within the home. They were completing an induction programme and were in the process of meeting with people to ask what they would like to do in the future and a full programme of activities would then be available. A PAT dog called Scruff visited the home every week and people looked forward to his visits. A mini-bus was available for people to be taken to local garden centres or for pub lunches. A clothing party had been arranged for Friday 7 May. A local vicar's wife came to the home every week to support a "Wellbeing club".

Is the service well-led?

Our findings

People spoken with said that they felt the home was well managed and felt that things had greatly improved since the new manager had been in post. People said “The managers door is always open.” And “I feel like I am listened to now.”

Staff spoken with said “Supervisions and staff meetings take place,” “I feel the home is managed well,” and “I love working here it is much better now.” One member of staff told us, “you can talk about your problems with the new manager; there is much better team work now.”

The manager had been in post since April 2015 and had applied to be registered with CQC. Previously they had been involved in supporting the previous manager with the action plan for CQC and for Cheshire East Council so were aware of issues raised and how to address them. We found the manager and senior staff demonstrated an excellent knowledge of all aspects of the service, the people using the service and the staff team.

At the last inspection we had concerns about how the quality of care being provided at the home as being assessed and we served a Warning Notice about this. During this inspection we found that the manager and area manager monitored the quality of the support provided at Bucklow Manor by completing regular audits which we reviewed during our visit. They were very detailed and covered a large variety of topics and areas throughout the home including: Health and safety; infection control; care files; falls; medications and environmental audits. The registered provider and manager evaluated these audits

and created action plans for improvement, when improvements were needed. These audits showed evidence of regular monitoring of the quality of care and support being provided.

We looked at a sample of records called ‘notifications.’ A notification is information about important events which the service is required to send to the Care Quality Commission (CQC) by law in a timely way. These records showed that the manager was knowledgeable of these requirements and was transparent in ensuring the Care Quality Commission was kept up to date with any notifiable events.

The manager demonstrated knowledge and understanding of safeguarding issues in line with her position. She was able to explain when and how to report allegations to the local authority and to the CQC. There were clear whistle blowing procedures in place which the manager said were discussed with staff during supervision and at staff meetings. Discussions with staff and records confirmed this.

During the inspection we saw the manager was active in the day to day running of the home. We saw they interacted and supported people who lived at Bucklow Manor and spoke with staff. We spoke with the manager and it was clear that they knew the needs of the people who lived at the home and the atmosphere was relaxed and positive.

All of the staff told us they felt supported and enjoyed their work. They made various positive comments about the new management style of the home. Staff were all positive about the direction in which the home was going and told us recent improvements had been made. Staff told us staff meetings were held regularly, where they had lots of opportunity to raise questions and speak to senior staff.