

London and Manchester Healthcare Ltd

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Inspection report

Gainsborough House Nursing Home
8 Gainsborough Road
Warrington
Cheshire
WA4 6BZ

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Tel: 01925241479

Website: www.lmhealthcare.co.uk

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

London and Manchester Healthcare Limited, Gainsborough House is a care home providing personal and nursing care to 57 people. The service can support up to 72 people across three separate wings, each of which has separate adapted facilities.

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

Improvements had been made in infection control and identification of risk. However, improvements were still needed regarding medicines management, monitoring and quality assurance.

There were a range of provider and manager audits in place. However some audits were in need of improvement due to the issues we found.

Feedback we received from staff, people and relatives was mainly positive, and some comments made from families indicated that communication from the home had improved.

The recruitment of staff was safe and there were enough staff on duty to meet people's needs. However, comments we received from families indicated that there was a slight concern regarding the changes to the management team and staff and how this impacted continuity of care.

Risks to people's health and safety had been assessed and mitigated and equipment had been serviced and maintained. Accidents and incidents were recorded and reviewed in order to minimise the risk of reoccurrence. Safeguarding and complaints were also managed appropriately and monitored by the management.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update The last rating for this service was inadequate (published 18 May 2021). The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection enough improvement had been made and the provider was no longer in breach of regulation 17. However, enough improvement had not been made in regulation 12 and the provider was still in breach of regulations.

This service has been in Special Measures since 7 April 2021. During this inspection the provider demonstrated that improvements have been made. The service is no longer rated as inadequate overall or in any of the key questions. Therefore, this service is no longer in Special Measures.

Why we inspected

This inspection was carried out to follow up on action we told the provider to take at the last inspection.

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 COVID-19 and other infection outbreaks effectively.

We have found evidence that the provider needs to continue to make improvements. Please see the safe and well-led sections of this full report.

You can see what action we have asked the provider to take at the end of this full report.

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 changed from inadequate to requires improvement. 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 London and Manchester Healthcare Limited on our website at www.cqc.org.uk.

Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to monitor the service to keep people safe and to hold providers to account where it is necessary for us to do so. We have identified a continued breach in relation to medicines management at this inspection.

Follow up

We will request an action plan for the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will 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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

London and Manchester Healthcare Limited

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 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.

Inspection team

This inspection was carried out by two inspectors, one inspection manager, one medicines inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

London and Manchester Healthcare Limited, Gainsborough House Nursing Home 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 did not have a manager registered with the Care Quality Commission. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

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 and professionals who work with the service. 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.

During the inspection

We spoke with four staff members. We reviewed a range of records. This included six people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with six people who live in Gainsborough House and seven relatives. We spoke with two professionals who regularly work with the service.

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 inadequate. At this inspection this key question has now improved to requires improvement. 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.

Using medicines safely

At our last inspection the provider had failed to manage medicines safely so people were placed at risk of harm. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Not enough improvement had been made at this inspection and the provider was still in breach of regulation 12 in regard to safe management of medicines.

- We found medicines to be returned were still not being stored securely.
- We looked at three medicine fridges and found concerns with the monitoring of two of them.
- Medicine Administration Records were not always signed correctly so we could not be sure that medicines had been given safely.
- The home could not provide evidence that medicines were checked when a new person came into the home so we could not be sure this was always completed safely.
- Body maps were in place to guide staff where to apply medicines patches. We found staff had not left enough time between using the same area of skin for three people, which may have increased the risk of skin irritation.
- We looked at four people who had their medicines given in a covert (hidden) manner and found their care plans did not guide staff on how to administer the medicines in a safe way.
- Time specific medicines were now recorded safely.
- Medicines used as when required now had information to support their safe use.
- We found one person's fluid thickener was not always prepared correctly so there was a risk of choking.

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

At our last inspection the provider had not ensured risks in relation to people's care were properly managed to prevent avoidable harm. This is a breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12 in regard to risks in relation to people's care being properly managed to prevent avoidable harm. However, we identified improvements were still needed.

- There continued to be gaps in people's monitoring information for example nutrition and fluid intake charts.
- We saw that risk assessments were now reviewed with updates included from professionals such as GPs or dietetic services. However, we identified that this information had not always been followed. For example, staff had not followed health professional's advice in relation to a change in one person's thickener for drinks. The manager immediately acted on these findings.
- Each care file we looked at now held appropriate information about people's health needs. This meant that staff had the appropriate guidance on how to safely support people.
- Each care file we looked at now held a risk assessment with regards to COVID-19 for people living in the home.
- Regular health and safety checks of the environment had been completed. Service agreements and safety certificates were all in date.
- Accidents, incidents, infections and pressure area concerns were recorded, and audits had been undertaken to look for trends to help reduce the risk of future incidents.
- People told us they felt safe living in the home and this was reflected in discussions with relatives. We were told "[Person] is very safe and I feel confident she is well looked after. I observed a carer giving [person] her breakfast and he was so kind, patient and chatting to her the whole time, he did not know I had arrived and was observing the scene."

Preventing and controlling infection

At our last inspection infection control did not adhere to government guidelines to protect people from the risk of, or, spread of infection. This was a breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12 in regard to infection control.

- We were assured that the provider was preventing visitors from catching and spreading infections.
- 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. All relatives we spoke with said correct PPE was always worn when they were visiting, and they are still providing appropriate test results prior visiting the home.
- 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. Relatives told us the home was kept very clean and their loved one's bedrooms and bedding was always clean. They all said their family members were always clean and very well presented.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Staffing and recruitment

- Staff files we looked at held the appropriate information needed to ensure fit and proper persons were employed.
- All staff had had their criminal conviction checks in place.
- During the inspection we saw that there appeared to be an appropriate number of staff on duty.

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 inadequate. At this inspection this key question has now improved to requires improvement. 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.

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; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

At our last inspection the provider had failed to operate effective systems to ensure the quality and safety of the service which placed people at risk of harm. They had also failed to maintain accurate and up to date records. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17. However, some additional improvements were needed.

- Audits had improved, and we saw evidence of this through care plans and infection control processes. However, additional improvements were needed in regard to medicines and health monitoring recording processes.
- The provider was able to show how they visited regularly and carried out their own audits.
- The manager and provider had shared information with the CQC as required, and the staff we spoke with were clear about what was expected of them within the home.
- The provider and new management team were working closely with the local authority to improve processes. This was supported in the feedback we received from the local authority. We were told "Weekly visits have been welcomed by the service and staff commented that the culture at the home was one of positivity and that the management team were supportive and approachable."
- The provider had improved processes for appropriate oversight of the home and a new management team was in place who were open, transparent and very receptive to feedback given during the inspection.
- Staff management and oversight of practice had improved. The provider recognised when staff needed to have accountability for their actions and we saw disciplinary processes were in place and followed when appropriate.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

At our last inspection the provider had failed to operate effective systems to ensure the quality and safety of the service which placed people at risk of harm. They had also failed to maintain accurate and up to date records. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- There had been another change to the management team following the last inspection. The staff were positive about the change and commented that there had been positive change to the culture of the organisation.
- Families we spoke with knew who the manager was, we were told "There seems to be some positive people now in place with the new management and I feel hopeful for the future."
- Referrals to other health and social care professionals were now made in a timely manner when people needed additional support.
- Any complaints or concerns about the service brought to the provider's attention were now responded to quickly and appropriately.
- Care plans now held the appropriate information of professionals to be contacted. For example, diabetic nurse information.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

| Regulated activity | Regulation |
|--|---|
| Accommodation for persons who require nursing or personal care | Regulation 12 HSCA RA Regulations 2014 Safe care and treatment |
| Treatment of disease, disorder or injury | The provider had failed to manage medicines safely so people were placed at risk of harm. |