

Mrs Janet Walters

# Hamilton Rest 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 well-led?        | Good ● |

# Summary of findings

## Overall summary

This was an unannounced inspection which took place on 12 April 2016. We had previously inspected the service on 19 January 2016 when we found four breaches of the Health and Social Care Act (HSCA) 2008 (Regulated Activities) Regulations 2014. We issued the provider with two warning notices in relation to the regulations regarding safe care and treatment and the governance systems in the service. We issued two requirement notices in relation to the safety of the premises and staff training and supervision.

Following the inspection the provider sent us a plan of the actions they intended to take to meet the relevant regulations. This inspection was carried out to check that the provider had met the warning notices and the requirement notices. We found the necessary improvements had been made. This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Hamilton Rest Home' on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Mrs Janet Walters is registered to provide accommodation at Hamilton Rest Home for up to 23 older people who require personal care. Hamilton Rest Home is a large detached property situated on a main road in Whitefield. It is within easy reach of local shops, public transport and the motorway network. Accommodation is provided in mainly shared rooms. At the time of this inspection there were 16 people using the service.

When we undertook the inspection the service did not have a registered manager in place. The manager had been in post since January 2016 and had submitted an application to register with CQC as manager at Hamilton Rest Home. We were advised that the manager was interviewed regarding their application to register with CQC later on the day of the inspection and their application was subsequently approved on 15 April 2016. Therefore from the date of 15 April 2016 the service had a registered manager in place.

Improvements had been made to the premises to protect people from the risk of burns from hot pipes and radiators. All pipework and radiators had been covered and individual risk assessments were in place to inform staff of the action they should take to protect people when moving around the building. The manager and provider were undertaking weekly health and safety checks to help ensure the safety of everyone who lived and worked in the home.

Medicines were stored safely and staff responsible for administering medicines had completed refresher training. All staff had been assessed to ensure they were competent to administer medicines safely.

Care records showed that risks to people's health and well-being had been identified and regularly reviewed. We saw that plans were in place to help reduce or eliminate the identified risks.

The manager had introduced arrangements to ensure that staff received the training and supervision they required to carry out their roles effectively. Staff we spoke with told us they considered the training was of good quality. Staff also told us that they were supported to develop their skills and knowledge by

undertaking additional responsibilities within the home, with support from more experienced staff.

The manager had introduced a system of robust quality monitoring procedures to help ensure that people received safe and effective care. The manager and provider demonstrated their commitment to continuing to drive forward improvements in the service.

## 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.

People who used the service told us they had no concerns regarding their safety in Hamilton Rest Home.

Improvements had been made to protect people from the risks associated with hot pipes and radiators. Regular checks were in place to check the safety of the environment.

Appropriate arrangements were in place to ensure the safe storage of medicines.

Risk assessments were in place and regularly updated to help ensure people received safe care.

### Is the service effective?

Good ●

The system was effective.

Systems were in place to ensure staff received the training and supervision they required to be able to deliver effective care. Staff were supported to develop their skills and knowledge by taking on additional responsibilities within the service.

### Is the service well-led?

Good ●

The service was well-led.

The service had a manager in place. Their application to register with CQC as manager at Hamilton Rest Home was approved shortly after the inspection. The manager demonstrated a commitment to continued improvements in the service.

Staff told us they enjoyed working in the service and found both the provider and manager to be approachable and supportive.

Quality monitoring systems in the service had been improved. Action plans were in place to address any identified shortfalls.

# Hamilton Rest 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 12 April 2016 and was unannounced. The inspection team consisted of one adult social care inspector.

Before our inspection we reviewed the information we held about the service including notifications the provider had made to us and their action plan submitted following the last inspection. We contacted the Local Authority safeguarding team, the local commissioning team and the local Healthwatch organisation to obtain their views about the service.

During the inspection we spoke with four people who used the service and a visiting relative. We also spoke with the provider, the manager and two members of care staff.

We undertook a tour of the building and observed care in communal areas of the home. We looked at the care records for three people who used the service. We also reviewed a range of records relating to how the service was managed including staff training records, quality assurance systems and policies and procedures.

## Is the service safe?

### Our findings

All the people we spoke with who used the service told us they had no concerns regarding their safety in Hamilton Rest Home. Comments people made to us included, "I'm happy here", "I do feel safe here but I don't really think about it. Staff are nice and kind" and "I'm safe enough here. I'm treated well and I'm happy."

At our last inspection we found that appropriate action had not been taken to protect people who used the service from the risk of burns should they come into contact with hot pipes and radiators. During this inspection we checked all the bedrooms and communal areas and found that all radiators and hot pipes had been covered; these were checked on a weekly basis. Individual risk assessments were also in place to protect people when moving around the building from the risk of burns from hot pipes or radiators.

At our last inspection we noted a window restrictor on a first floor window was broken. During this inspection we found that all windows throughout the building had been fitted with new window restrictors. Records we reviewed showed these were checked on a weekly basis. This helped to ensure the safety of people who used the service.

Records we looked at showed the manager was completing regular checks of the water temperatures in all the bedrooms and bathrooms. New showers had also been installed with thermostatic temperature controls. These measures should help ensure the safety of people who used the service.

At our last inspection we found that arrangements to ensure the safe handling of medicines needed to be improved. During this inspection we noted that all medicines due to be returned to the pharmacist were stored in the manager's office which was kept locked. A trolley which had previously been used to store medicines had been removed as it did not meet required standards for safe storage.

Since the last inspection we noted the manager had introduced protocols to provide guidance for staff on the reasons why a person might need an 'as required' medicine. The manager had also completed competence assessments with all staff who were responsible for the administration of medicines. These staff had also completed refresher training in the safe handling of medicines. This helped to ensure that staff had the knowledge and skills to be able to safely carry out this task.

At our last inspection we had concerns that staff were not maintaining accurate records regarding the administration of 'thickeners'. Thickeners are added to drinks, and sometimes to food, for people who have difficulty swallowing, and they may help prevent choking. During this inspection we looked at the records for one person who required thickened fluids. We noted that a complete record was now maintained of all the thickened fluids the person had received.

The care records we looked at during the inspection showed that risk assessments and risk management plans were in place in relation to falls, nutrition, mobility and pressure care. We saw that risk assessments had been regularly reviewed and care plans updated to take into account people's changing needs. The

care staff we spoke with told us they would always check care records to ensure they were providing safe care to people who used the service.

## Is the service effective?

### Our findings

At our last inspection we found that staff had not received required refresher training in topics including infection control, moving and handling and food hygiene. During this inspection we saw that the manager had developed a robust training plan to ensure all staff were brought up to date with required training. The manager told us the provider had invested in a series of accredited training programmes which were delivered by the manager using DVDs, following which staff were required to complete workbooks to demonstrate their knowledge and understanding. We noted that staff were also continuing to access training provided by the local authority.

On the day of our inspection staff were completing first aid training. We noted staff had also completed training in safeguarding adults, food hygiene, fire prevention, Mental Capacity Act/DoLS and dementia awareness. The manager shows us the staff training matrix which showed that all staff should have completed required refresher training by 17 May 2016.

Staff we spoke with confirmed there had been an increase in training available to them since the manager had commenced employment at Hamilton Rest Home. One staff member told us, "I've never done so much training in my life; it's really good." Another staff member commented, "[Manager] has sorted loads of training. It's much more thorough than what I am used to."

Records we reviewed during our last inspection showed staff had not received supervision since the previous registered manager left the service in November 2015. Supervision meetings help staff discuss their progress and any learning and development needs they may have. During this inspection records we reviewed showed that staff had received supervision with either the manager or assistant manager and that further sessions had been planned. We noted that supervision sessions had been used to discuss practice issues and observations carried out by the managers, including staff supporting people at mealtimes. The two care staff we spoke with confirmed they had received supervision and had been supported to continue their professional development by taking on additional responsibilities within the service, with support from more experienced staff.

## Is the service well-led?

### Our findings

At the last inspection we found there was no registered manager in place, although an experienced manager had been appointed. On this inspection the manager told us they had submitted their application to register with CQC as manager for Hamilton Rest Home and were awaiting their 'fit person' interview. Immediately after the inspection we were advised that this interview had taken place and the manager's application to register had been approved on 15 April 2016.

Both the manager and provider told us they were committed to ensuring people who used the service were happy and safe in Hamilton Rest Home. They told us they had responded swiftly to the concerns highlighted during our last inspection and were confident that robust arrangements were now in place to ensure everyone in the home was properly protected from the risks we had previously identified.

All the people we spoke with during the inspection spoke positively about the manager and provider. One person who used the service told us, "[The manager] is lovely, very pleasant. You can have a laugh and a joke; he makes you feel at ease." Comments staff made to us included, "[The manager] is good. I speak to him if I have a problem and it gets sorted. He is very approachable and listens. He is keen on making sure we do things properly", "[The manager] is very approachable" and "[The provider and manager] listen to me. [The provider] will always provide the tools for me to help people."

Records we reviewed showed that the manager had held meetings with both people who used the service and staff since they started work at Hamilton Rest Home. We noted that the manager had been transparent with people regarding the findings of our last inspection and the action they intended to take to ensure compliance with all the required regulations. During our inspection our checks confirmed that the provider was meeting the requirement to display their most recent CQC rating.

Staff we spoke with told us they had felt able to make suggestions to either the provider or manager about how the service could be improved. A staff member commented, "I am always suggesting things and they definitely listen to me."

We noted that since our last inspection a new system of policies and procedures had been introduced into the service. These policies were available in the staff office for ease of reference. The manager told us they intended to use staff meetings and supervision to discuss selected policies with staff and ensure their understanding regarding their roles and responsibilities.

At our last inspection we found the systems to monitor the quality of the service were not sufficiently robust. Records we reviewed during this inspection showed the manager had introduced a number of regular checks, including those relating to the health and safety of the premises. We saw that the manager was undertaking a weekly check of all bedrooms and communal areas; these included a check of any exposed pipework or radiators, water temperatures, window restrictors, nurse call system and fire doors. The provider had employed a part time handyperson who was responsible for completing maintenance tasks identified as necessary during these weekly checks.

The manager had introduced regular infection control audits within the service. We noted that since the last inspection they had installed handwashing facilities in the laundry. They had also ensured personal protective equipment (PPE) and hand sanitising gel was available throughout the home. The manager also showed us the results of the most recent audit completed by the local authority infection control team and the actions they had taken to address identified shortfalls; this included replacing items of equipment such as commodes.

We saw that regular medication audits were completed by both the assistant manager and manager. Records we reviewed showed that no issues had been identified during the audits. The manager told us any errors would be discussed with staff during supervision and within staff meetings to help drive forward improvements in practice.

Since our last inspection the provider had distributed a satisfaction survey to people who used the service, their relatives and any visiting professionals. A total of eight responses had been received up to the date of the inspection. We looked at the results of the survey and noted most of the responses had been very positive. One relative had commented, "We have found everything to our complete satisfaction. Thank you for the very good service provided." The manager told us they were waiting for more surveys to be returned in order to analyse the results and provide feedback to people.

We noted that one complaint had been received at the service since our last inspection. Records we reviewed showed that the manager had taken appropriate action to investigate the complaint and provide feedback to the complainant. Learning from the complaint had been discussed with staff in order to help improve the service provided.