

Manor Care Home Limited

Manor Care Home - Middlewich

Inspection report

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04 December 2020
23 December 2020

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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

About the service

Manor Care Home - Middlewich is a residential care home providing personal care to 35 people at the time of the inspection. The service can support up to 44 people across two separate floors, each of which has separate adapted facilities.

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

Improvements identified at our last inspection had been sustained and built upon. Safety, effectiveness and leadership had improved significantly. People received safe and effective care and outcomes were good.

People told us they felt safe and well cared for. All relatives told us their loved ones were in safe hands. Safeguarding systems, policies and procedures ensured people were safe and protected from abuse. Risks to people's health, safety and welfare, were identified and managed safely with the involvement of the person or their representatives.

We were assured by the additional measures in place to help prevent the spread of COVID-19. Risks relating to infection prevention and control (IPC), including in relation to the COVID-19 pandemic were assessed and managed. Staff followed good IPC practices.

Medicines were safely managed, and systems were in place for reporting accidents and incidents and learning from them.

There were sufficient numbers of suitably trained and experienced staff on duty and safe recruitment procedures were followed. Staff presented as well trained, caring professionals. Visiting professionals told us that care staff were skilled and knowledgeable about meeting people's needs.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People's nutritional and hydration needs had been assessed and were being met. One person said: "The food is excellent, compliments to the chef, two choices and if you don't want that you can have something else."

The registered manager and staff were clear about their roles and responsibilities and they promoted a positive, person-centred culture. Staff worked well together as a team, and there was good partnership working with others to meet people's needs.

Effective systems were in place for checking on the quality and safety of the service and making improvements where needed.

Rating at last inspection.

The last rating for this service was requires improvement (published November 2019) there were no breaches of regulation.

Why we inspected

This was a planned inspection based on the previous rating. 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 coronavirus and other infection outbreaks effectively.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. 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 Manor Care Home - Middlewich on our website at www.cqc.org.uk.

Follow up

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?

Good ●

The service was safe.

Is the service effective?

Good ●

The service was effective.

Is the service well-led?

Good ●

The service was well led.

Manor Care Home - Middlewich

Detailed findings

Background to this inspection

Background

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 one 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.

Manor Care Home – Middlewich is a care home. People in care homes receive accommodation and nursing and personal care. Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at on this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We announced the inspection visit 48 hours before it took place. This was because we needed to give the manager time to prepare in advance of our visit due to the COVID-19 pandemic. Inspection activity started on 03 December 2020 and ended on 23 December. We visited the service on 03 December 2020.

What we did before the inspection

We reviewed the information we received about the service since the last inspection. We sought feedback from the local authority. We looked at the report published by Healthwatch subsequent to their visit to the home on 14 February 2020. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

We spoke with six people who used the service about their experiences of the care provided. We also spoke with the manager, and five members of staff including three care team leaders, one care assistant, and an activities coordinator. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We also spoke with a visiting community nurse and sought their views of standard of care provided.

After the inspection visit

Due to the impact of the COVID-19 pandemic we limited the time we spent on site. Therefore, we requested records and documentation to be sent to us and reviewed these following the inspection visit and continued dialogue with the manager by telephone. We reviewed a range of records. This included several people's care records and multiple medication records. We looked at the recruitment files for two staff employed since the last inspection. A variety of records relating to the management of the service were also reviewed. Our Expert by Experience spoke with one person who used the service and 12 relatives on the telephone. We also spoke with a further four staff members and a visiting doctor on the telephone and sought their views on the management of the home and the standard of care provided.

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 now improved to good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Although we did not identify a breach of regulation at our last inspection, we did find improvements were required to the outside of the premises. On this inspection we found the premises including external areas were safe and well maintained.
- Risks to people's health and safety were identified and well managed so people were safe and protected from avoidable harm.
- The service had contingency plans in place to manage unforeseen emergencies and each person had an up to date personal emergency evacuation plan.
- Regular safety checks were carried out on the environment, equipment and utilities.

Systems and processes to safeguard people from the risk of abuse

- People who lived at the home told us that they felt safe. All relatives told us their loved ones were in safe hands.
- Staff were aware of how to raise concerns and most staff had completed safeguarding training.
- A whistleblowing policy was in place and staff were aware of the procedures to follow.
- Referrals had been made appropriately to the local safeguarding team and detailed records were maintained.

Staffing and recruitment

- There were enough suitably, skilled and experienced staff on duty to meet people's needs safely and consistently.
- The number of staff on duty and skill mix were determined based on people's needs and dependency levels.
- The provider followed safe procedures for the recruitment of staff and all appropriate checks had been completed before new staff were employed in the home.
- All people and relatives spoken with praised the staff for the standard of care provided. One relative said: "We think our (relative) is in the best home, the carers are fabulous (relative) likes them all and engages with them, they know (relative) well and have a good rapport with (relative)."

Using medicines safely

- Medicines were received, stored, administered, recorded and disposed of safely.
- Staff involved in administering medicines had received training around medicines and had access to relevant guidance regarding the administration of medicines which may be required on an 'as and when required' basis.

- Medicines audits were carried out regularly.

Preventing and controlling infection

- The provider's infection prevention and control (IPC) policies, procedures and practices were revised during the inspection. We were assured by the additional measures in place to help prevent the spread of COVID-19.
- Risks relating to IPC, including in relation to the COVID-19 pandemic, were assessed and managed.
- Staff followed good IPC practices. Increased cleaning schedules had been developed, implemented and maintained and regular testing was in place.
- All areas of the home were seen to be clean, hygienic and odour free.
- Sufficient supplies of personal protective equipment (PPE) were available and staff knew how to wear and dispose of it safely.

Learning lessons when things go wrong

- Records of accidents and incidents were maintained and analysed to help identify any patterns or trends. Where patterns were seen, action was taken to see if lessons could be learnt or whether additional action needed to be taken.
- A visiting doctor who was the home's clinical lead in the local Primary Care Network told us that the manager and staff were knowledgeable and worked in partnership with them to ensure people received safe and effective care. Staff were said to be proactive in developing positive responses when people presented with behaviours that could be deemed challenging.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

At our last inspection we recommended the provider consider how they can demonstrate people have consented to the care they receive. The provider had made improvements.

- Staff had completed training around the MCA and they understood the principles of the act and associated DoLS.
- Applications for DoLS authorisations had been made when needed and were regularly reviewed.
- Mental capacity assessments had been completed to identify whether a person had capacity to make a specific decision and where appropriate best interest decisions were recorded.
- People were supported to be involved in daily decisions about their care and staff sought their consent.
- Care staff routinely recorded where consent to care had been given on the home's electronic care planning system.

Staff support: induction, training, skills and experience

At our last inspection we recommended the provider continues to review their approach to staff training to ensure all staff have required skills and competencies to safely support people. The provider had made improvements.

- Staff presented as well trained, caring professionals. Visiting professionals told us that care staff were skilled and knowledgeable about meeting people's needs.

- The registered manager had developed and implemented a training action plan with set targets as to what training staff would receive and when. This along with the staff training matrix showed that staff had benefited from training on a range of appropriate topics.
- New staff received induction training which consisted of training in key areas, and shadowing more experienced staff, to ensure they were competent before they could work unsupervised.
- Staff told us that they were well supported and appreciated the support and direction from the management team. There was a system in place to ensure staff received supervision and appraisal and staff told us they felt able to raise any issues they had with the registered manager.

Supporting people to eat and drink enough to maintain a balanced diet

- People's nutritional and hydration needs had been assessed and were being met.
- Records showed that people were offered and supported with sensitivity and care to eat a balanced and nutritious diet.
- People told us that they had access to drinks and snacks throughout the day and they praised the standard of catering. One person said: "The food is excellent, compliments to the chef, two choices and if you don't want that you can have something else."
- We observed that the dining experience was relaxed, pleasant and sociable. Staff were engaging and showed skill and sensitivity in the way they assisted people to eat their meals.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People had routine access to healthcare professionals and had been referred to specialists when required.
- Information regarding people's changing health needs was shared between staff during shift handovers, and people's care was adjusted as required.
- Visiting professionals told us that the manager and staff worked closely with them to ensure the health care needs of people were met. A visiting district nurse said: "The staff are responsive and knowledgeable about people and their needs. They follow our guidelines and recommendations and keep records such as repositioning charts up to date". They told us that people were making good progress, including those with complex health care needs.

Adapting service, design, decoration to meet people's needs

- The design and layout met the physical needs of people living at the home.
- Rooms were personalised containing people's own photographs, items of furniture and pictures and other personal items.
- Adaptations had been made to support people with dementia and provide them with a stimulating and interesting environment. Part of the ground floor area had been transformed into "Wheelock Street", named after a busy street in the local area. This area included a mock florist, newsagent and post office, complete with removable flowers, magazines and a pot box.
- A lift gave access to all floors of the home. Bathrooms had been adapted to help ensure all people could access them.
- A range of hoists were available to meet varying needs.
- A gazebo had been erected in the home's grounds to facilitate visiting during the COVID-19 pandemic and adaptations were being made to facilitate visiting inside the home in the near future. Staff had access to information technology including a tablet and mobile phones to facilitate Zoom, Facetime and WhatsApp video calls. People and their relatives told us that these facilities were put to good use.

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 now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Effective systems for checking on the quality and safety of the service and for making improvements were in place and were being followed.
- In response to the findings of previous inspections and a commitment to improve and develop the service the provider engaged the services of a care home consultant in October 2020. Internal audit was undertaken and aims, objectives and plans for improvement were confirmed in a service improvement plan.
- The service improvement plan was kept under review. We could see from our observations and the findings of this inspection that significant improvements had been made and sustained in the delivery of person centred and effective care.
- The registered manager was clear about their responsibilities to act in an open and transparent way when things went wrong. Incidents and accidents were analysed, and arrangements in place to ensure learning was shared with the staff team, to help ensure people received safe and effective care.
- The registered manager and staff completed training and kept up to date with the law and current good practice guidance to update their knowledge and learning.

Working in partnership with others; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager and staff worked effectively and cooperatively with other health and social care professionals to develop practice and improve outcomes for people who lived at the home.
- The registered manager and provider regularly engaged with people using the service, their relatives and staff through meetings, informal discussions and quality surveys. Relatives were unanimous in their praise for the registered manager who was said to be available and responsive. When issues were raised action was taken to address them.
- Relatives told us that they appreciated the way they had been kept informed via telephone calls and the monthly newsletter. One relative said: "I do talk to the manager and find them very proactive; they send out a monthly newsletter which is important at the moment and we use the Facebook pages too."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Over the last two years the registered manager and provider had worked progressively and successfully to improve the standard of care facilities and services provided at the home.
- The registered manager promoted a culture of person-centred care by engaging with staff, everyone using

the service and relevant others such as family members and outcomes were good.

- People praised the standard of care they received, comments included: "I love it here, I'm very happy" and "I love it here, it's in my heart and I want to live here the rest of my life". Relatives spoke about the positive outcomes for their relatives after moving in and gave examples as to how care plans had been tailored to meet people's needs.

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

- The provider met the regulatory requirements to be open and transparent with people using the service when things went wrong.
- The CQC had been notified about incidents and events which occurred at the service, in accordance with the regulations.
- The ratings from the last inspection were clearly displayed at the service and on the providers website.