

HC-One Limited

Pendleton Court Care Home

Inspection report

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Date of inspection visit: 09 December 2020 14 December 2020

Date of publication: 06 January 2021

Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Pendleton Court is a care home which provides support for up to 58 people who require either residential, general nursing, or dementia nursing care. The home is a large converted mansion house situated in an elevated position at the rear of a residential estate. Accommodation is provided over three floors in single ensuite bedrooms. At the time of the inspection there were 36 people living at the home.

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

People felt safe living at Pendleton Court. Risk assessments and care plans provided staff with sufficient information to enable them to care for people in line with their wishes and keep them safe. Staff knew how to identify and report safeguarding concerns, with training provided and refreshed. Medicines were managed safely, by staff who had been trained and had their competency assessed. Accidents and incidents had been documented and reviewed to identify trends and help prevent reoccurrence.

The home completed a range of audits and quality monitoring procedures, to ensure all aspects of care, support and safety were regularly assessed and actions taken to address any concerns. People, relatives and staff's views were captured via regular meetings and annual questionnaires. Staff told us they enjoyed working at the home and felt supported in their roles.

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 good (published June 2019).

Why we inspected

We received concerns in relation to safeguarding, staffing levels, cleanliness and the overall management of the home, with the home having recently experienced their third managerial change in the last six months. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We found no evidence during this inspection that people were at risk of harm from the concerns raised. Please see the safe and well-led sections 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.

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 overall rating for the service has remained 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 Pendleton Court 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 reinspection 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.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good



Pendleton Court Care Home

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

The inspection was carried out by one inspector.

Service and service type

Pendleton Court 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.

At the time of inspection the home did not have a manager registered with the Care Quality Commission. A registered manager and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. The previous registered manager had left and their replacement was in the process of completing the registration process.

Notice of inspection

We gave a short period notice of the inspection due to the Covid-19 pandemic to ensure we had prior information to promote safety. Inspection activity started on 8 December 2020 and finished on 14 December 2020, at which point we had received all the additional information and clarification we had requested from the provider. We visited Pendleton Court on 9 December 2020.

What we did before the inspection

Prior to the inspection we reviewed information and evidence we already held about the home, which had been collected via our ongoing monitoring of care services. This included notifications sent to us by the home. Notifications are changes, events or incidents that the provider is legally obliged to send to us without delay. We also asked for 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. We used all of this information to plan our inspection.

During the inspection

We spoke with five people living at the home about their experiences of the care and support provided. We also spoke with four care staff, a maintenance person, the manager, a visiting support manager and the area director.

We reviewed a range of records relating to the safe and well-led key questions. This included five people's care records, risk assessments, safety records, audit and governance information.

After the inspection

We requested additional evidence from the provider. This included monitoring charts, meeting records, audit, quality monitoring and governance information.



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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at Pendleton Court and were happy with the care and support they received.
- Staff had received training in safeguarding and knew how to report concerns. Information about safeguarding was on display throughout the home.
- Action had been taken to improve the reporting and oversight of safeguarding concerns. Concerns had been reported in line with local authority guidance, with a log kept to track referrals and outcomes.

Using medicines safely

- Medicines were managed safely. Staff who administered medicines had received training and had their competency assessed to ensure medicines were given as prescribed.
- Documentation, including medicine administration records (MAR) and the controlled drugs register had been completed accurately and consistently.
- Where people were prescribed 'as required' medicines, such as paracetamol, guidance was in place to ensure staff knew why, when and how to administer this, along with potential side effects to look out for.
- Robust medicines audits had been completed, which had identified any shortfalls, such as missed doses or issues with record keeping. Investigations into any issues had been carried out, with actions plans generated and completed.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The home had assessed risks to people's safety and wellbeing. Care files contained a range of both generic and person specific risk assessments, which provided guidance for staff on how to support people safely.
- The home had effective systems in place to ensure the premises and equipment were safe and fit for purpose. Safety certificates were in place and up to date for gas and electricity, the lift, hoists, and fire equipment, which had all been serviced as per guidance.
- Where people had experienced falls, unplanned weight loss or were at risk of skin breakdown, referrals to the necessary professionals for guidance and/or assessment had been made.
- Following any accidents and/or incidents, an investigation had been completed to look at potential causes and how to minimise a reoccurrence. Where necessary people and their relatives had been informed of action taken.

Staffing and recruitment

• Enough staff had been deployed to meet people's needs.

- The home used a system to determine how many staff were required per day to support people safely. People and staff we spoke with confirmed staffing levels were sufficient.
- Safe recruitment procedures were in place. Staff personnel files viewed confirmed any required safety checks had been completed and contained all required recruitment documentation.

Preventing and controlling infection

- The home had robust cleaning and infection control processes in place.
- Additional measures had been implemented due to the COVID-19 pandemic. Policies, procedures and cleaning schedules had been updated, along with restrictions on visitors to the home and a regular testing regime.
- Staff confirmed they had received the necessary guidance and support to keep people safe and follow procedures.



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 good. At this inspection this key question has remained the same. 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

- The provider and manager used a range of audits and monitoring systems to assess the quality and performance of the home and care provided. We found these were robust and had been used to generate actions and drive improvements.
- The home used a continuous home improvement plan to record any actions or issues identified via auditing, monitoring or via feedback from people and/or staff. We saw this had been regularly reviewed and actions addressed timely.
- The provider and manager understood their regulatory requirements. The previous inspection report was displayed within the home and online. Relevant statutory notifications had been submitted to CQC, to inform us of things such as accidents, incidents, safeguarding's and deaths.

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

- We found the home to be an inclusive environment. People's views had been captured through monthly resident meetings and annual questionnaires.
- The home utilised a 'you said..we did..' process for informing people and relatives of actions taken and/or changes to the home based on their recommendations and feedback.
- Staff told us they enjoyed working at the home and felt supported. They reported no impact from the changes in management during 2020 and had felt able to approach the wider management team, such as the deputy managers or area directors during this time.
- Staff meetings were held regularly. Staff told us they were happy with the frequency of meetings and were keep updated with relevant information.

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 registered manager and provider were aware of their responsibility regarding duty of candour. Duty of candour ensures providers are open and transparent with people who use services and other 'relevant persons' (people acting lawfully on their behalf) in relation to care and treatment. People had no concerns about the openness of the home or its staff. Effective communication was maintained through meetings and daily interactions with care staff.

Working in partnership with others

- We noted a number of examples of the home working in partnership with other professionals or organisations to benefit people living at the home.
- Normal service and involvement had been affected due to visiting restrictions being in place, as a result of the COVID-19 pandemic. However, the home had adapted where possible. Religious services were being provided via video messaging. Contact with a local school had continued, who had agreed to hold a carol concert in the grounds.