

## Making Space

# Sherdley Court

### Inspection report

91 Rainhill Road  
St Helens  
Merseyside  
L35 4PD

Tel: 01925571680  
Website: [www.makingspace.co.uk](http://www.makingspace.co.uk)

Date of inspection visit:  
08 June 2022

Date of publication:  
08 July 2022

### 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

Sherdley Court is part of Making Space, a not for profit organisation operating a range of mental health services across Lancashire and Merseyside. Sherdley Court provides accommodation and personal care to people with a primary diagnosis of a functional mental illness and people who have additionally developed dementia. At the time of our visit there were 25 people living in the home.

### People's experience of the service and what we found

Risks to people's health and well-being had been assessed and staff had access to information on how to support people safely. Staff responded to changes in people's health in a timely manner and contacted relevant health and social care professionals for advice and guidance where needed. People's prescribed medicines were managed safely by staff with relevant skills and training.

People told us they felt safe living at Sherdley Court and felt comfortable speaking to staff and managers if they were worried about something. Staff completed safeguarding training and knew how to respond to any incidents of concern. Accidents and incidents were reviewed by the registered manager to look at ways to prevent them from happening in the future.

There were enough staff on duty to meet people's needs and keep them safe. Where people needed additional support due to a change in health or well-being, the registered manager ensured additional staff were deployed. Safe recruitment processes were in place to make sure staff were suitable to work at the service.

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.

The home was clean and hygienic; staff responsible for the cleanliness of the home completed regular cleaning tasks and ensured associated records were completed to reflect this. Staff had access to PPE and were seen wearing masks correctly. Staff were given regular updates and guidance in infection prevention and control; particularly in relation to COVID-19. Safe visiting arrangements were in place in line with current national guidance.

A range of audits and checks were in place to identify any areas of improvement needed to the quality of care people received. Systems were in place to gather the feedback of people and staff and we received positive feedback about the open and transparent culture promoted by the registered manager. People told us they were happy with the care they received and staff told us they enjoyed working at Sherdley Court.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at the last inspection

The last rating for this service was good (published 20 May 2019).

### Why we inspected

We undertook this focused inspection as part of a random selection of services rated Good and Outstanding. We only looked at the key questions safe and well-led. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for this service has remained good based on the findings of 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 COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Sherdley Court on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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 ●

This service was safe.

Details are in our safe findings below.

### Is the service well-led?

Good ●

This service was well-led.

Details are in our well-led findings below.

# Sherdley Court

## 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 Health and Social Care Act 2008.

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.

#### Service and service type.

Sherdley Court is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Sherdley Court is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the 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. We reviewed notifications received from the service in line with their legal obligations. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

During the inspection

We spoke with five people who used the service to gather feedback about their experience of the care provided. We spoke with seven members of staff; this included care workers, laundry assistants and deputy manager. We also spoke with the registered manager and area manager.

We reviewed a range of records including five people's care plans and associated records, medicine administration records for four people and other records relating to the overall management of 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 our last inspection we rated this key question good. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff received safeguarding training and knew how to identify and respond to incidents of concern.
- The registered manager kept a record of safeguarding concerns. These showed evidence of appropriate action being taken and referrals to relevant health and social care professionals.
- People told us they felt safe living at Sherdley Court. One person said, "Staff make me feel safe."

Assessing risk, safety monitoring and management

- Risks to people's health, safety and well-being had been assessed and staff had access to relevant information about how to support people safely.
- Staff showed good knowledge about people's individual risks and how best to support them. One staff member told us, "I think people are well looked after, staff know people well so we can always tell if they are becoming unwell."
- The registered manager and staff were quick to identify when people's needs changed and required additional support to manage associated risks. Contact was made with relevant health and social care professionals in a timely manner to obtain additional support and guidance.
- Regular checks were completed on the environment and equipment used by people for mobility support to make sure it remained safe for them to use.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Staffing and recruitment

- There were enough staff on duty to support people safely.
- Some people displayed behaviours that staff may find challenging. Where needed, the registered manager

increased staffing levels to make sure these people received the support they needed to keep them and other people safe.

- Safe recruitment processes were in place. A range of pre-employment checks were completed to make sure new applicants were suitable to work for the service.

#### Using medicines safely

- Medicines were managed safely by staff who had received relevant training. This included the administering, storage and return of people's prescribed medicines.
- People told us they received their medicines on time. One person said, "Oh yes they [staff] do [give me my medication on time]. They are brilliant."
- Where people were prescribed 'as required' medicines, plans were in place to ensure staff were only administering when needed.

#### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- 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.
- COVID-19 visiting arrangements were in place and conducted in line with current guidance.



# 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 our last inspection we rated this key question outstanding. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager and provider promoted a positive culture that was person-centred, open and inclusive.
- We received positive feedback from people about the care they received and the relationships they had developed with staff and amongst each other. Comments included; "The staff are good, I can do most things myself but it is nice to know they are there," "We have all known each other for a long time, it is nice being somewhere with your friends" and "I love it here. The staff are lovely. I can talk to them about anything."
- Staff told us they enjoyed working at Sherdley Court and felt able to speak openly with the manager. Comments include; "It's a good company [Making Space] to work for" and "I would have no issues reporting any concerns if I had any."

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

- Since our last inspection, a new manager had been recruited. They had worked at Sherdley Court as a deputy manager and knew people well. They had good managerial knowledge and experience.
- The registered manager was well thought of by both people living at the home and staff. We received the following feedback; "I love [manager]. She's great. She's lovely. I can talk to her about anything" and "The manager is lovely. I can always approach her, and she is ready to help."
- Regular audits and checks were completed to identify whether any improvements were needed to the quality of care people received.

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

- The manager regularly engaged with people using the service, family members and staff.
- Regular staff and resident meetings were held to provide the opportunity to share important information and obtain their views. One staff member said, "We have meetings. We get to share our views and I feel like we are listened to."
- Staff worked with a range of external health and social care professionals to provide people with the right care and support and achieve good outcomes.

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 understood their legal responsibility to be open and honest when things went wrong.