

HC-One Limited

Pendleton Court Care Home

Inspection report

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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 care, general nursing, or dementia nursing. At the time of the inspection there were 50 people living at Pendleton Court.

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

Staffing levels varied on different floors of the home. This led to some vulnerable people being left unsupervised on occasions. We have made a recommendation about deployment of staff throughout the home. Staff were recruited safely and all required documentation was in place.

Safeguarding issues were reported and escalated as required. Staff were aware of how to recognize and report any issues. Medicines were managed safely and staff had completed appropriate training.

Individual risks were assessed and monitored. Health and safety measures were in place to help ensure the safety of people using the service. We were assured infection control and prevention measures were appropriate and effective.

Care plans were person-centred and inclusivity was promoted within the home. Complaints were responded to appropriately and quality monitoring was regularly undertaken to help ensure standards remained good. The service engaged well with people who used the service, relatives and staff. People were encouraged to share their views within residents' meetings. Relatives were kept informed of any incidents or news and staff attended meetings and one to one supervision sessions.

Learning was taken from the results of audits to help inform continual improvement to service provision. The home worked well with partner agencies and other professionals.

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

Rating at last inspection

The last rating for this service was Good (published 21 June 2019).

Why we inspected

We received concerns in relation to poor hygiene, poor staffing levels and poor care. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

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 remained good. This is based on the findings at this inspection.

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

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 Pendleton Court Care Home 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.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

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 Care 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 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

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. 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 four people who used the service and three relatives about their experience of the care provided. We spoke with eleven members of staff including the two area directors, the registered manager, the deputy manager, a registered nurse, a senior care worker, four care workers and the chef.

We reviewed a range of records. This included six people's care records and multiple medication records. We looked at three 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 contacted three professionals who regularly visit the service and contacted a further three relatives to gain their views.

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.

Staffing and recruitment

- Staffing levels varied on different floors within the home. We observed some occasions when vulnerable people were left unattended in a communal room, or their own rooms, due to staff being busy assisting other people with personal care.
- We asked people how quickly staff attended to them when the buzzed for assistance. One person told us, "I only have to press my buzzer and they come at once. Occasionally they take a little longer, but mostly they are good." Another person commented they had waited for a long period of time to be attended to.
- Although we did not see evidence of any harm due to the deployment of staff, we felt this issue needed to be looked at. The registered manager told us they were looking at installing a system to audit the call bells so that they could address any delays.

We recommend the provider reviews and addresses deployment of staff to ensure there are sufficient staff on each unit to meet people's needs effectively.

- Staff were recruited safely and staff files included all required documentation to help ensure safe recruitment.

Systems and processes to safeguard people from the risk of abuse

- The service had systems in place to ensure safeguarding issues were reported and escalated as required.
- Staff we spoke with had completed safeguarding training and demonstrated a good knowledge of how to report a safeguarding concern.
- There were currently some on-going safeguarding concerns. These were being dealt with through the safeguarding process and the management team were cooperating fully with the investigations.
- A health and social care professional told us, "...the team have been very keen to reflect on practice and ensure that lessons are learned in order to improve future care delivery."

Assessing risk, safety monitoring and management

- The service assessed individual risks on admission and continued to monitor and review risk assessments throughout people's residence.
- Health and safety risk assessments and checks were completed regularly.
- All required health and safety certificates were in place and up to date.

Using medicines safely

- Medicines systems helped ensure medicines were managed safely.
- Electronic medicines administration records were completed accurately.

- Staff had completed relevant training and competence checks were undertaken regularly to ensure their skills remained up to date.
- Staff were aware of how to deal with a potential medicines error to help ensure this was addressed immediately.
- We asked people if they received their medicines safely. One person said, "Staff are very helpful. The senior gives me my medicines and watches me as I take the tablets."

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 admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- 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.
- 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.

Learning lessons when things go wrong

- The service tried to ensure lessons were learned when things went wrong. For example, a faulty piece of equipment had been repaired and a new system of checks implemented to help ensure faults would be picked up more quickly in the future.
- Accidents, incidents and falls were logged and analysed for any themes or patterns to help ensure improvement to care provision.

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.

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

- The provider demonstrated an understanding of the duty of candour. People had not always been happy with the response to complaints, but the management team were working hard to ensure responses were timely, open and honest.
- Notifications required by CQC, were submitted in a timely way.
- Quality monitoring was regularly undertaken and the results analysed to ensure the management had an understanding of the issues and actions required.
- Some issues of quality, such as the choice and presentation of food, had been addressed and the standards raised. One person told us, "The food is better, there has been more choice lately. You can have alternatives."
- There were a few issues with documentation within care files. We discussed this with the registered manager, who agreed to address this in a timely way.

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

- A positive culture was promoted by the staff and management at the home. Care plans were person-centred and included information about people's protected characteristics, religious and cultural requirements.
- The staff ensured they promoted inclusivity, with activities such as celebrating the local Pride festivities.
- The new registered manager had made a positive impact. A relative said, "Staff are really trying to be more nurturing, due to the new registered manager's influence. They are really looking at individual needs and making care plans much more person-centred."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service engaged well with people who used the service, relatives and staff.
- Peoples equality characteristics were considered. For example, people had a gender care and support plan, which included information about how they wished to be addressed, whether they were happy to share their sexual identity and who they wished to be recognized as their next of kin.
- Life story boards in each person's room ensured staff were aware of people's needs, preferences and wishes.

- People were encouraged to share their views at residents' meetings, where discussions included aspects of their care and support.
- Relatives were kept informed via telephone, newsletters and e mails. One relative said "When [relative] was admitted to hospital we were given updates all through the day. This was very reassuring for the family."
- Staff reported good support from the management team via meetings and supervision sessions. One staff member said, "I feel listened to. If I go to [registered manager] she will sort things out."

Continuous learning and improving care

- The provider was keen to ensure learning and improvement were implemented following audits and quality checks.
- The service was currently following a service improvement plan to ensure standards continued to be raised.
- Reflective practice was used by the management and staff to ensure they learned lessons following incidents. A health and social care professional told us, "[Registered manager] has identified herself some of the themes that have been perhaps at the root of the issues, such as incomplete recordings. [Registered manager] has always been proactive and looks for actions that she can take to resolve [situations]."

Working in partnership with others

- The home worked well with partner agencies and other professionals.
- We received positive feedback from all health and social care professionals contacted. One professional said, "The staff are generally responsive and engaging."