

# Mr Bradley Scott Jones & Mr Russell Scott Jones

# Amadeus

## Inspection report

Hampden Grove  
Patricroft, Eccles  
Manchester  
Greater Manchester  
M30 0QU

Tel: 01617878638

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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

Amadeus is a residential care home providing personal care to up to maximum 39 people in one adapted building on 2 levels. There are 29 bedrooms with a lounge, dining room and shared bathrooms downstairs, and 9 bedrooms, a lounge and a dining area upstairs. The service provides support to older and younger adults, some of whom may be living with dementia. At the time of our inspection there were 33 people using the service.

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

Systems in place helped safeguard people from the risk of abuse. Assessments of risk and safety and supporting measures in place helped minimise risks. Staff managed people's medicines safely. Staff followed infection prevention and control guidance to minimise risks related to the spread of infection.

Staffing levels were sufficient to meet people's needs and managers recruited staff safely. Staff followed an induction programme, and training was on-going throughout employment.

Staff thoroughly assessed people's needs prior to a service starting. Care plans included information about support required in areas such as nutrition, mobility and personal care to help inform care provision. Staff made appropriate referrals to other agencies and professionals when required.

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 told us they were well treated, and their equality and diversity respected. People felt staff respected their privacy and dignity and took into account their views when agreeing on the support required. Staff identified people's communication needs and addressed these with appropriate actions.

Managers responded to complaints appropriately and used these to inform improvement to care provision. The provider was open and honest, in dealing with concerns raised. The management team were available for people to contact and undertook regular quality checks, to help ensure continued good standards of care.

The provider and manager followed governance systems which provided effective oversight and monitoring of the service. These governance systems and processes ensured the service provided to people was safe.

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 last inspection and update

The last rating for this service was requires improvement (published 11 November 2020).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

#### Why we inspected

We carried out an announced inspection of this service on 2, 15, 16 and 18 September 2020. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve good governance of the service.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings 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 COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Amadeus 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** ●

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.

# Amadeus

## 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

The inspection was carried out by 2 inspectors 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.

#### Service and service type

Amadeus 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. Amadeus 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 provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was not a registered manager in post. A new manager had been in post for two months and had submitted an application to register. We are currently assessing this application.

#### 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 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. We used all this information to plan our inspection.

#### During the inspection

We spoke with 15 people using the service and 4 relatives about their experiences of care. We received feedback from 3 health and social care professionals and spoke with a visiting nurse. We spoke with the manager, the provider and 5 care staff. We observed people being supported in various areas of the home and during the lunchtime meal. We looked at 3 staff files in relation to recruitment and supervision and 3 people's care files and associated records. We looked at a variety of records relating to the management of the service, including staff training, policies and procedures and governance records.

# 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. 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

- The provider had appropriate systems in place to safeguard people from abuse.
- The manager ensured staff were aware of the different types of abuse. Staff had been trained in their responsibilities for safeguarding adults and knew what action to take if they witnessed or suspected abuse.
- People and their relatives spoke positively about the care staff provided. One person said, "It's tip top here." A second person told us, "There's plenty of staff and they seem to know what they're doing." A relative commented, "I do feel all the residents are safe; if I ever have any concerns, I call the managers and they sort it straight away."

Assessing risk, safety monitoring and management

- Staff assessed risks to people's health, safety and wellbeing.
- People had risk assessments in place which included any factors that might affect the person, with actions for staff to take. Risks to people's safety were identified and managed well. A relative told us, "Staff are amazing; really approachable and helpful. Staff phone me all the time and even facetime me so that I can see [person name]. Staff are really caring, and I can't fault any of them."
- Staff understood where people required support to reduce the risk of avoidable harm.
- The service had a system for recording and monitoring accidents and incidents. A relative said, "I feel [person name] is safe; I visit him regularly and he is well looked after."

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. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- Staff were recruited safely and had the necessary safety checks in place before starting work, including a

criminal record check to confirm they were suitable to work with people. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. Staff completed a period of induction when they first started in employment.

- The provider ensured there were enough staff, with the right training and skills, to meet people's needs. Records of staff training were kept up to date.
- The deployment of staff was well organised by the manager, ensuring staff had enough time to meet people's needs safely and without rushing. A visiting health care professional told us, "This is one of the care homes that I enjoy coming into. [Manager name] is amazing; I've really noticed a difference in how things are done since she came."

#### Using medicines safely

- Staff managed people's medicines safely; they completed appropriate training and had their competence assessed to ensure they administered medicines safely. An up to date medicines policy and procedure was in place. Creams administration was recorded, including their location and how to safely administer them. A visiting health care professional told us, "We did some training on skin integrity and barrier creams recently, refreshing staff knowledge."
- Staff completed medication support plans and risk assessments for each person. An NHS professional commented via email, 'I have seen major improvements which included a total revamp of the medication room. The manager has worked closely with us to make improvements around medication and took on board all our advice and recommendations and does ask for advice and support 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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.
- The provider was following government guidance for safe visiting and at the time of the inspection visiting was not restricted.

#### Learning lessons when things go wrong

- The provider had a system in place to have an overview of any accidents, incidents or near misses. Staff knew how to report accidents and incidents.
- The provider and managers at the location analysed data to help identify useful themes and trends to minimise risks and reoccurrences.



# 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 requires improvement. 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.

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

At our last inspection quality assurance systems were not robust and learning was not always identified. This was a breach of regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Action had been taken following the last inspection to improve records relating to areas such as safeguarding, auditing, medicines and accidents and incidents. More detail was now captured, including any recurring themes and lessons learned. Care plans and risk assessments had been updated.
- The provider had a series of audits in place to monitor, support, and highlight areas for improvement. Any improvements were actioned promptly to improve outcomes for people receiving support.
- Managers and staff understood the requirements of their roles and staff received regular supervision. A local authority professional commented, 'I find the manager to be a great asset. She is also happy to share knowledge, experience and ideas with other managers when appropriate.'
- The provider and manager had worked with the local pharmacy team to help develop a better system for auditing medicines. Advice from the 'falls team' had also been gained and agreement reached on how best to monitor and analyse any falls.

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

- The manager led by example and demonstrated an open and transparent approach, and promoted a person centred, inclusive and empowering culture.
- The manager ensured staff understood people's support needs and could deliver quality outcomes. Regular staff supported people and positive, supportive relationships had developed as a result.
- The provider had processes in place for receiving feedback and suggestions on how to improve the quality of support.
- Relatives said managers were good at communicating with them and kept in regular contact. One relative told us, "Staff ring me 2 or 3 times a week and I think the service is really good." A second relative said,

"[Provider name] worked very hard during COVID-19 in very difficult times, but never once complained."

- Staff were able to raise and discuss any issues or concerns during personal supervisions and regular staff meetings; staff feedback confirmed this.

Working in partnership with others

- There was evidence of joined-up work between the provider and other professionals to meet the needs of people using the service.
- The provider worked well with other organisations to ensure people's needs were met. This included liaison with statutory health and social care bodies. Feedback we received from several health and social care professionals confirmed this; one comment stated, 'The manager was very keen to promote [name of training] and is committed to us going in and supporting her staff with training.' A second professional told us, "Amadeus are very good at supporting people to access [health care service] and always provide the information I need when I ask for it. There is always a warm welcome from staff whenever we visit, and staff are really nice."

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 and manager understood their responsibilities around duty of candour. This was underpinned by the open and honest culture and by appropriate policies and procedures.
- People felt comfortable raising concerns with the manager and were confident they would be listened to.
- Notifications were sent to relevant authorities in a timely manner.