

Cranford Care Homes Limited

Montgomery 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

Montgomery Care Home provides accommodation and personal care for up to 25 people; some of whom live with dementia. At the time of our inspection 20 people were using the service.

People's experience of using this service

Risks to people were monitored and well managed to minimise the risk of avoidable harm. Staff were provided with guidance about how to manage risks associated with people's care and they monitored people's safety in line with their individual risk management plans.

There were enough suitably skilled and experienced staff to provide people with safe care and support. The suitability and fitness of staff employed was assessed through a range of pre-employment checks before an offer of employment was made.

Safe infection prevention and control (IPC) measures were followed to minimise the risk of infection. The hygiene and cleanliness of the environment was well maintained.

Accidents and incidents were reviewed to establish how they occurred and how to prevent further occurrences, and any lessons learnt were shared with staff to promote their learning.

People told us they felt safe and well cared for by staff. Family members were confident their relative was kept safe.

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.

A new manager had recently been appointed and was supported by 2 new deputy managers. People and others shared positive feedback about improvements made to the service since the appointment of the new management team. Managers understood their roles and responsibilities and promoted a positive and person-centred culture which led to good outcomes for people.

Checks on the quality and safety of the service were carried out consistently and used to drive improvements where this was needed. People, family members and staff felt fully involved in the running of the service and the care provided.

Staff worked well together as a team, and there was good partnership working with others to meet people's needs. Staff morale was good, and staff felt valued.

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 January 2019).

At our last inspection we recommended that the provider review and monitor the effectiveness of their weekly quality assurance checks. At this inspection we found the provider had acted on this recommendation and had made improvements.

Why we inspected

This was a planned 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 Montgomery Care Home on our website at 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.

Montgomery 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.

Inspection team

This inspection was carried out by 1 inspector.

Service and service type

Montgomery 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.

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 no registered manager in post. A new manager had recently been appointed and had applied to the Care Quality Commission to become the registered manager.

Notice of inspection

The 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. 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 of this information to plan our inspection.

During the inspection

We spoke with 8 people who used the service and 2 family members about their experience of the care and support provided. We spoke with the manager, 2 deputy managers, 3 care staff, the chef, laundry assistant, 2 maintenance staff and a visiting healthcare professional.

We reviewed a range of records. This included 3 people's care records and medication records. We reviewed recruitment records for 3 staff and looked at a variety of other records relating to the management of the service, including audits, policies, and procedures.

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.

Assessing risk, safety monitoring and management

- Risks to people were assessed and their safety was monitored and managed.
- Risk management plans were developed based on outcomes of people's risk assessments. The plans guided staff on how to reduce and manage the risk of harm to people and others and they were kept under review. People's safety was monitored in line with their risk management plans.
- The premises, utilities and equipment were routinely checked to make sure they were safe to use. Records and certificates of compliance were maintained confirming checks and outcomes.
- Staff were provided with training in topics of health and safety, and they were kept up to date with any changes which impacted on people's safety.

Learning lessons when things go wrong

- Lessons were learnt following incidents.
- Incidents that affected the health, safety and welfare of people were reported internally and to relevant external authorities/bodies.
- Incidents were reviewed and investigated, and action was taken to prevent further occurrences.
- Information about incidents was shared with staff and others to promote learning.

Systems and processes to safeguard people from the risk of abuse

- There were effective systems and processes to protect people from the risk of abuse.
- Staff received safeguarding adults training as part of their induction and regular updates. They knew how to recognise and report allegations of abuse.
- Immediate action was taken to keep people safe in response to allegations of abuse and they were reported to the relevant agency.
- People had no concerns about their safety and treatment. Their comments included, "Very safe and secure here," "To be honest I've never felt so safe" and "I'm treated very well by them all [staff]." Family members were confident their relative was kept safe.

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

- People received care and support from the right amount of suitably skilled and experienced staff who were safely recruited.
- Staffing levels and skill mix were arranged around people's needs and their safety. Staffing rotas were planned in advance to make sure each shift was adequately covered. There were arrangements in place to ensure safe staffing levels were maintained in the event of unforeseen staff absences.
- People told us there were always enough staff around to help them and that they didn't have to wait long for assistance. One person told us, "There's plenty [staff] and they see to me quickly. A family member told us "There's always enough staff about."
- Safe recruitment processes were followed to ensure the suitability and fitness of staff employed. Recruitment records evidenced the required pre-employment checks including satisfactory references and an enhanced check with the Disclosure and Barring Service (DBS).

Using medicines safely

- Medicines were used safely.
- Staff responsible for the management and administration of medication were suitably trained and competent and they had access to current policies and procedures about managing medicines.
- People had a personalised medication administration record (MAR) listing their prescribed medicines and instructions for use and they were signed at the correct times when medicines were administered.
- There were protocols in place instructing staff on the use of medicines to be given 'when required' (PRN). These were in the process of being developed as it was recognised, they could be more person centred.

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 service was recently awarded a Gold Certificate for Excellence with infection prevention and control after achieving a score of 97% during an audit carried out by The NHS Infection Prevention Control Team.

Visiting in care homes

- Visits to the service were carried out in line with current government 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 good. The rating for this key question has remained 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

- Managers and staff understood their roles and responsibilities, they kept up to date with their learning and regulatory requirements.
- The manager was appointed recently and had applied to CQC to become the registered manager of the service. Feedback from people and others confirmed there had been a number of improvements to the service since the appointment of the manager and 2 new deputy managers. Comments included. "Things get done quickly now," "It's a much better place to work, calmer and more organised" and "I've seen so many improvements since the change in management."
- There were effective processes in place to assess, monitor and improve the quality and safety of the service. Checks and audits were now consistently completed, and prompt action was taken to make any improvements that were identified. There was good oversight of the service and management support from the providers representative.
- The providers policies and procedures were kept under review to ensure they were in line with the law and regulations.

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

- The culture of the service was positive, open, inclusive, and empowering. Outcomes for people were positive.
- There was a calm, relaxed and friendly atmosphere at the service and we observed meaningful and positive interactions between people and staff. Family members told us the atmosphere had improved a lot since the appointment of the current management team. A family member told us, "The feeling is so much better, everyone seems a lot happier."
- Managers promoted an open-door policy and welcomed everyone's feedback, views, and opinions. People, family members and staff told us they felt at ease speaking with managers and were confident they'd listen. Their comments included, "Nothing is too much trouble, they are so lovely," "Very approachable and friendly" and "I feel my opinions matter. I feel valued."

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

- There was a positive approach to engaging, involving, and working in partnership with others.
- Regular meetings were held for people family members and staff to discuss the service, share updates,

and obtain feedback. Minutes of meetings were made available to those unable to attend to keep them up to date with matters discussed and any actions agreed.

- The manager had recently introduced a 'Resident of The Day' plan. On this day the person along with others who they wished to attend were given the opportunity to review in detail their care plan and feedback on the service provided.
- There were effective lines of communication. A family member told us, "It's improved a lot, couldn't be better, they constantly keep me updated." A member of staff told us, "We have daily flash meetings now which are great for keeping up to date with things."
- Staff worked with other health and social care professionals, such as social workers, district nurses and community mental health teams. People benefited from links developed with church groups and the manager was exploring other links with the community including local schools.

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 responsibilities under the duty of candour. They had been open and honest with people and others when something went wrong.
- The required notifications were sent to CQC in a timely way following an event or incident that affected the health, safety, and welfare of people.