

Atlas Care Homes Limited

Brownlee Court

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

Brownlee Court is a residential and nursing care home for up to 116 young adults and older adults with physical and mental health conditions. It is a purpose-built three storey building located in a residential area. At the time of the inspection, 47 people were using the service.

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

People told us they felt safe living at the service. Staff were described as 'exemplary, going the extra mile.' Risks were understood and managed. There was enough staff on duty, however the deployment of agency staff needed to be reviewed. Medicines were safely managed. The home was clean throughout; improved consistency with using PPE was needed.

The provider had identified where improvements needed to be made and had taken steps to address this. The leadership team had been strengthened and review of quality assurance measures was underway. The staff team were positive about each other and felt listened to and supported by the management team.

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 23 February 2021).

Why we inspected

We received concerns in relation to people's safety, staffing levels, leadership and quality assurance. The inspection was also prompted in part to two incidents which had taken place prior to the inspection. A decision was made for us to inspect and examine those risks.

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. This included checking the provider was meeting COVID-19 vaccination requirements.

As a result, we undertook a focused inspection to review the key questions of safe and well-led only. 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 remains good.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Brownlee Court on our website at www.cqc.org.uk.

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.

Brownlee 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 included checking the provider was meeting COVID-19 vaccination requirements. 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

Two inspectors and an Expert by Experience carried out this inspection. 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

Brownlee 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. Brownlee Court is a care home with nursing care. 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 inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from Middlesbrough local authority and professionals who work with the service, such as an NHS IPC team.

We also contacted Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with nine people using the service and eight relatives. We also spoke with 16 staff. This included the nominated individual (The nominated individual is responsible for supervising the management of the service on behalf of the provider); a director, a clinical quality manager, the registered manager, a deputy manager, an administrator, two senior care workers, four care workers and four agency care workers. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed three care records and a further six medicine administration records. We reviewed two staff records in relation to recruitment and induction and the training matrix for all staff. We also reviewed records related to the day to day running of the service including policies and procedures.

After the inspection

We continued to review evidence received after the inspection visit.

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

- Regular staff knew people's needs well. Agency staff did not always know people or the risks they faced. Records to oversee and manage risk needed further improvement. The provider had identified these improvements were needed and work was underway to address this.
- People said they received good care. One person said staff helped them when they needed it. They said staff, "Do it kindly." Another person said, "I've had the best of care here. It's really been like a holiday in a 4-star hotel." Relatives said, "Carers are very good with [person]. They are patient and very gentle," and, "I was impressed during a recent impromptu visit. Everything was running well."
- The safety of the building had been maintained. Regular checks took place to manage risks at the service.

We recommend the provider reviews how information about people's needs is shared with agency staff.

Staffing and recruitment

- There were enough staff on duty to support people. However, the deployment of agency staff needed to be reviewed to alleviate pressures on regular staff. People, relatives and staff said there were too many agency staff in the service.
- The high use of agency staff put regular staff under increased pressures. The provider was aware of this and had been proactive in addressing gaps in recruitment to sustain the future of the service. A full complement of staff had been employed and were awaiting start dates.
- Safe recruitment practices had been followed. There were some gaps in staff induction records relating to observation and supervision of new staff.

Preventing and controlling infection

- The use of face masks was inconsistent with staff. Visitors were able to enter the service without face masks. The provider was addressing these concerns.
- PPE was available throughout the service. Staff had received training in donning and doffing. Good cleaning regimes were in place. High risk touch areas were regularly cleaned each day.
- Good procedures had been followed when infection outbreaks occurred.
- People received visits in-line with Government guidance. Staff supported people to keep in touch with their loved ones.

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency. We checked to make sure the service was meeting this requirement.

The Government has announced its intention to change the legal requirement for vaccination in care homes, but the service was meeting the current requirement to ensure non-exempt staff and visiting professionals were vaccinated against COVID-19.

Using medicines safely

- Medicines were safely stored. Records to support safe administration of medicines were in place. People received their medicines when they needed them.
- Staff had received training to dispense medicines safely. Checks of their practices had been completed.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Staff understood the procedures they needed to follow to raise a safeguarding alert. Safeguarding alerts were raised when incidents took place. Investigations had been completed and demonstrated where lessons had been learned. Regular review of accidents and incidents took place.
- People told us they felt safe living at the service. One relative said, "The home is 100%" safe." Another said, "[It is the] best place [person] could be".

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.

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

- Staff were supported to carry out their roles. They received up to date information about changes taking place at the service. They felt able to speak up and were confident they would be listened to.
- People told us they received the best care. They said staff were attentive to their needs and their care never felt rushed. Relative's said they were included in their loved one's care. One relative said, "They [staff] look for different ways of helping people." Another said, "So far we are impressed [with the service]."
- Risk was understood and regularly reviewed. When events took place at the service, learning was shared with all staff to minimise the risk of reoccurrence.

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

- Notifications had been submitted when required. The service had worked under significant pressures during the pandemic and all staff had worked flexibly to keep the service safe. Staff had demonstrated dedication, compassion and kindness.
- Quality assurance measures were regularly completed. A quality manager had been recruited and was reviewing the procedures in place at the service to make sure they were more robust.
- The provider was addressing where improvements were needed, this included leaders being proactive in reviewing risks, such as with mask use and the deployment of staff.

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

- People and relatives said they were asked for feedback about the care provided. They said they had been kept informed about changes to people's care and to changes taking place at the service.
- The provider had listened to feedback from professionals about the service. New staff had been recruited to support the quality of the service. The nominated individual and director were regularly involved with the service to support improvement.