

Hillbro Nursing Home Limited

# Hillbro Nursing Home

## Inspection report

Holden Lane  
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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Outstanding ☆

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

About the service:

Hillbro is a 42 bedded service providing nursing or personal care to older people, people living with dementia and people living with mental health issues. At the time of our visit there were 40 people using the service.

People's experience of using this service:

Improvements to medicines management, consent to care and treatment and quality audits have been made since our last inspection in October 2017.

Staff were exceptionally caring. Everyone we spoke with was very complimentary about the service and said they would recommend the home. There was a strongly embedded culture within the service of treating people with dignity, respect, compassion and love.

Activities were on offer to keep people occupied both on a group and individual basis. Trips out were also organised in line with people's preferences.

Medicines were being administered safely and people's dietary and healthcare needs were met.

Staff were recruited safely and there were enough of them to keep people safe and to meet their care needs. Staff were receiving appropriate training which was good and relevant to their role. Staff were supported by the registered manager and were receiving formal supervision where they could discuss their on-going development needs.

Care plans were up to date and detailed the care and support people wanted and needed. Risk assessments were in place and showed what action had been taken to mitigate any risks which had been identified. Appropriate referrals were being made to the safeguarding team when this had been necessary.

There was a complaints procedure available which enabled people to raise any concerns or complaints about the care or support they received.

The registered manager provided staff with leadership and was described as being very approachable. Audits and checks were carried out and used to drive continuous improvements to the service people received.

People's feedback was used to make changes to the service, for example, to the menu's and activities.

More information in Detailed Findings below:

Rating at last inspection:

Requires improvement (report published 10 January 2018).

Why we inspected:

This was a planned inspection based on the rating at the last inspection. We found improvements had been made since our last inspection and the service has met the characteristics of good in four areas and outstanding in caring.

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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 effective?

Good ●

The service was effective

Details are in our Effective findings below.

### Is the service caring?

Outstanding ☆

The service was exceptionally caring

Details are in our Caring findings below.

### Is the service responsive?

Good ●

The service was responsive

Details are in our Responsive findings below.

### Is the service well-led?

Good ●

The service was well-led

Details are in our Well-Led findings below.

# Hillbro Nursing 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 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

One adult social care inspector and one 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:

Hillbro is a service providing nursing or personal care to older people, people living with dementia and people living with mental health issues. People in care homes receive accommodation and nursing or personal 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:

The inspection was unannounced.

#### What we did:

We reviewed information we had received about the service since the last inspection in October 2017. This included details about incidents the provider must notify us about. We assessed the information we require providers to send us at least once annually 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.

People using the service at Hillbro were not all able to fully share with us their experiences of using the service. Therefore, we spent time observing staff with people in communal areas. We spoke with three

people who were using the service, five relatives, four care workers, one nurse, one housekeeper, one chef, the registered manager and the provider.

We reviewed a range of records. These included three people's care records and medication records. We also looked at two staff files around staff recruitment and the training records of all staff. We reviewed records relating to the management of the home and a variety of audits implemented by the provider.

# Is the service safe?

## Our findings

Safe – this means people were protected from abuse and avoidable harm

People were safe and protected from avoidable harm. Legal requirements were met.

### Using medicines safely

- At our last inspection on 16 October 2017 we found medicines were not always managed safely.
- At this inspection we found improvements had been made. The provider had invested in a computerised medicines management system. This system was extremely effective in ensuring medicines were administered correctly and managed safely.

### Assessing risk, safety monitoring and management

- Risks to people were identified by individual risk assessments and appropriate risk management plans were incorporated in to care plans. They were detailed and provided care staff with information which ensured they delivered care in the safest way possible.
- Staff were familiar with and followed the risk management plans.

### Systems and processes

- The environment and equipment were safe and well maintained.
- Staff held practice fire drills to check any risks to people from an emergency evacuation. Personalised plans were in place to guide staff and emergency services about the support people required in these circumstances.

### Safeguarding systems and processes:

- People were protected from any form of abuse or poor treatment. People told us, "I am safe staff look after me." "When I go to bed at night staff check on me this makes me feel secure."
- The registered manager and staff understood their responsibilities to safeguard people from abuse. Concerns and allegations were acted on to make sure people were protected from harm.

### Staffing levels

- Staffing levels were calculated according to people's needs. There were enough staff to support people safely and to ensure people's needs could be met, including staff support for participating in activities and outings. One person told us, "There is always enough staff around I don't have to wait for them to help me." A relative said, "I come most days and there is always staff around there is enough staff."
- Staff were recruited safely and all the appropriate checks were carried out to protect people from the employment of unsuitable staff.
- People were supported by a consistent team of staff.

### Preventing and controlling infection

- Staff completed training in infection control. Gloves and aprons were available and waste was disposed of correctly.

- The home was clean, tidy and odour free. A relative said, "No odours, the home is always clean and tidy, [names] room is spotless. The bathrooms and toilets are clean and well kept."

#### Learning lessons when things go wrong

- Incidents and accidents were reviewed to identify any learning which may have helped to prevent a reoccurrence.



# Is the service effective?

## Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

People's outcomes were consistently good, and people's feedback confirmed this.

Ensuring consent to care and treatment in line with law and guidance

- At our last inspection on 16 October 2017 we found the service was not always working within the principles of the Mental Capacity Act 2005 (MCA). On this inspection we found improvements had been made.
- The MCA provides a legal framework for making decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take 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 MCA. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).
- The registered manager ensured when specific conditions had been attached to DoLS authorisations these had been met. For example, the regular review of specific medicines.
- The registered manager ensured when someone lacked capacity to make a specific decision the best interest principles were followed. For example, one person was having their medicines hidden in food or drink. Their relative, GP, pharmacist and registered manager had been involved in the decision making process to ensure this was in the person's best interest.
- At the last inspection on 16 October 2017 we found when people lacked capacity to give informed consent the correct procedures were not always followed. On this inspection we found improvements had been made.
- Where relatives had the appropriate legal authority they had been involved in the decision making process. Where this authority had not been in place the best interest decision making process had been used.
- Staff spoke with people before any care and support was delivered to get their consent.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed and people could visit for a meal if they wished before deciding if they wanted to live at Hillbro.
- People's care plans were exceptionally person centred and described people's needs and preferred routines.
- Staff knew the people they supported very well.

Staff skills, knowledge and experience

- Staff were trained to be able to provide effective care.
- Relatives we spoke with were confident in the abilities of the staff. Their comments included, "They know how to respond to [name] and how they like to be handled. They are trained in the right way." "They are

absolutely are well trained."

- Staff spoke highly of the training, support and supervision they received.
- Staff told us additional training was provided so they could meet the needs of people using the service.

Supporting people to eat and drink enough with choice in a balanced diet

- People's care files contained information about their food likes, dislikes and any foods which should be avoided.
- People were offered a choice of meals and all of the food was homemade. People told us, "Very good, plenty of choice, we get warm coffee and plenty of snacks." "It's lovely I have enjoyed my food today."
- The chef had detailed information about people's different dietary requirements. For example, who needed a gluten free or diabetic diet.

Staff providing consistent, effective, timely care within and across organisations

- If someone needed to go to hospital a system was in place to ensure all of the relevant information would be sent with them.

Adapting service, design, decoration to meet people's needs

- Refurbishment and redecoration was ongoing to ensure people were provided with high quality accommodation.
- Good signage was in place to help people find their way around the home. People had 'Memory Boxes' outside of their bedrooms which contained items relevant to their life and interests.
- Specialist equipment was available when needed to deliver better care and support.

Supporting people to live healthier lives, access healthcare services and support

- Staff involved people and where appropriate their relatives to ensure people received effective health care support. People told us, "I see the doctor when I need to and I tell staff when I am not well they help me." "I would talk to a nurse if I was unwell and they would get the doctor if I need one."
- Records showed people had been seen by a range of healthcare professionals including GP's and opticians.

## Is the service caring?

### Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

People were truly respected and valued as individuals; and involved as partners in their care.

Ensuring people are well treated and supported

- Staff in all roles were highly motivated and offered care and support which was exceptionally caring, compassionate and kind. Staff were extremely positive about working at Hillbro. Their comments included, "The care here is second to none. I have found my nursing drive again since coming here." "I love it here. There is a nice atmosphere and it will be my forever place to work." Staff were extremely proud of the care and support they were providing which made sure people who used the service were getting the very best care possible.
- Staff were exceptionally thoughtful which ensured people received person centred care. Without exception everyone we spoke with praised the staff and spoke enthusiastically about how caring they were. Comments from relatives included, "It's a friendly atmosphere and the care staff give to residents is exceptional." "There isn't one thing they [staff] do that is not brilliant."
- Staff spoke with fondness and genuine concern for the wellbeing and the happiness of people they supported. This was also extended to relatives and friends. For example, a surprise party was held for a relatives 90th Birthday.
- Staff treated people with the utmost patience and kindness. For example, two carers were assisting one person to transfer from a wheel chair to a lounge chair using a hoist. They gave an explanation in an extremely kind and polite way reassuring the person. The carers chatted to them in friendly way and prepared them to be lifted. "We are just going to take you forward to sit you in the chair we will take it nice and easy." When the lift was completed staff asked the person if they were comfortable then moved the equipment to a safe place.

Supporting people to express their views and be involved in making decisions about their care

- Staff had formed strong and meaningful relationships with people who used the service and used these to support them in making decisions about their care and treatment. For example, one person was refusing a surgical procedure which impacted on their safety and independence. One of the nurses worked with them and supported them to attend the pre-assessment and stayed with them during the surgical procedure. This person's quality of life improved as a result of the support they received.
- When people had expressed their views about their preferences these were respected. Staff could tell us about, and records confirmed that people's views about how they preferred to be supported had been acted on to promote positive outcomes.
- An external training assessor had made the following observations, "There have been some occasions where staff have had to deal with service users who were upset. The staff supported service users to a private place, where they discussed the service users feelings; staff were very empathetic and listened effectively to ensure the service users feelings were addressed and they identified if additional support was needed to ensure the service users well-being."

## Respecting and promoting people's privacy, dignity and independence

- We saw staff treated people the utmost respect. Staff knew people extremely well, their individual likes, dislikes, life history and interests. At relevant festivals such as Christmas and on birthdays people were given gifts which had been individually selected by staff members who knew them well. For example, on the day of our visit one person was celebrating their birthday. The gifts which had been chosen by staff, and paid for by the provider reflected their personal interests and taste.
- Staff supported people in an extremely caring way to promote their independence. For example, one person had been admitted for end of life care. Through support and encouragement from staff they started to get up and join in activities and spent time in the communal areas, becoming more alert and active within the home.
- People looked extremely well cared for, they were dressed in nicely laundered clothing, hair had been brushed or combed and men had been shaved. One person said, "My washing is nicely done. They wash and iron it and put it away in my room. I always have plenty of clean clothes." A relative told us, "My [Name] always put great store by their appearance. They were always very well presented. I feel the home has taken this on-board and although they are not aware now, they are always well dressed, co-ordinated and have their hair done regularly. This is important to myself and my family. We feel they are well cared for."
- Visitors were made to feel welcome and commented on the very friendly and welcoming atmosphere.

# Is the service responsive?

## Our findings

Responsive – this means that services met people's needs

People's needs were met through good organisation and delivery.

How people's needs are met

Personalised care

- People's likes, dislikes and what was important to the person were recorded in person centred care plans. Staff were knowledgeable about people's preferences and could explain how they supported people in line with this information.
- People's communication needs were known and understood by staff. People's care plans included details about their communication needs.
- Care records were reviewed monthly or if people's needs changed.
- Staff organised activities, entertainment and outings to keep people occupied. People and relatives told us the following, "They have an excellent activities organiser, they go out a lot and this morning they have baked." "There is always something going on. There is plenty to do." "The carers take me shopping in the village." "[Name of activities organiser] is lovely with the residents. They arrange them in small groups to go out. [Name] got a typewriter for my relative to use." "[Name] has been to the pantomime and to a garden centre over Christmas. They [staff] take [Name] out for fish and chips and there are people who come in to entertain him. Excellent activities"

Improving care quality in response to complaints or concerns

- A complaints procedure was in place. People who used the service and relatives told us they would feel able to raise any concerns with the registered manager or provider. Their comments included, "I would talk to the nurse; they would listen and do something." "I would tell the manager."
- The provider and registered manager had put systems in place to make sure any concerns or complaints were brought to their attention. This was because they were keen to rectify any issues and improve the quality of the service.
- The registered manager had taken as much action as possible when a complaint had been received to resolve the issue raised.

End of life care and support

- People were supported to make decisions about their preferences for end of life care. Care records showed discussions had taken place with the people and their relative and their wishes were clearly recorded.
- The registered manager understood people's needs, was aware of good practice and guidance in end of life care, and respected people's religious beliefs and preferences. One of the nurses told us, "The end of life care here is excellent." A care worker said, "People are treated like our own family. We think about the person and it's nice to be able to look after them and just be there."
- Relatives had sent numerous compliments about the end of life care which had been provided. One

example was, "Thank you so much for making [Names] last years so special. You made [Names] last few days so special."

# Is the service well-led?

## Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

### Leadership and management

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- At our last inspection on 16 October 2017 we found some of the quality audits were not effective in picking up and addressing issues.
- At this inspection we found improvements had been made to ensure people received a consistently good service.
- The home was well run. The provider and the registered manager were passionate and committed to providing high quality, person-centred care.
- People who used the service received high quality person centred care.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- There was an open and transparent culture in the home and staff told us the registered manager and provider were approachable and supportive. Their comments included, "They are both accessible and listen." "[Name] is a good manager, they are observant and acts upon incidents or concerns."
- The service was caring and focused on ensuring people received person-centred care. It was evident staff knew people well and put these values into practice.
- The registered manager and provider knew people using the service and their relatives very well. We saw them to be kind, caring and very knowledgeable about people's lives and personalities. Relatives told us, "[Name of registered manager] is excellent and very personal centred. They will stop what they are doing and listen. When I told them it was very cold first thing in a morning they sorted it out immediately." "Very good standard of management, they muck in and know people well."

Engaging and involving people using the service, the public and staff

- People who used the service were involved in day to day decision about what they wanted to eat and what social activities they wanted to take part in.
- Meetings were held to discuss what people wanted from the service and these were responded to.
- People, relatives and staff had completed a survey of their views and the feedback had been used to continuously improve the service.
- Staff meetings were held and staff were also consulted during handovers between shifts.
- The registered manager made themselves easily available to people using the service, relatives and staff.
- Continuous learning and improving care

- The registered manager understood their legal requirements. They were open to change, keen to listen to other professionals and seek advice when necessary.
- The registered manager demonstrated an open and positive approach to learning and development. Improvements had been made following our previous inspection to ensure regulatory requirements were met.
- Information from the quality assurance systems, care plan reviews and incidents were used to inform changes and improvements to the quality of care people received.

#### Working in partnership with others

- The registered manager had made good links with the local community and key organisations to benefit people living in the home and to help with the development of the service.
- The registered manager attended meetings held by Bradford Council and the Clinical Commissioning Group (CCG). They were also part of the Bradford safeguarding course delivery team. This enabled them to keep up with best practice.