

Alliance Care (Trendlewood) Limited

# Brockwell Court Care Home

## Inspection report

9 Cobden Street  
Consett  
County Durham  
DH8 6AH

Tel: 01207501851  
Website: [www.fshc.co.uk](http://www.fshc.co.uk)

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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

Brockwell Court is a care home which provides nursing and residential care for up to 75 people. The service provides support to older people living with dementia, mental health conditions and physical disabilities. At the time of our inspection 74 people using the service.

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

People were extremely satisfied with the service and felt staff always went above and beyond in delivering the care. They described the little extras staff just did as a part of their job. Staff were passionate about providing good care outcomes and took ownership for their practice.

The management team ensured there was always enough staff to support people. The provider had redesigned the dependency tool and staff found this gave a more accurate reflection of how many staff were needed to safely support people. People told us the staff were always readily available, extremely supportive and caring. Recruitment practices met legal requirements and the registered manager used a variety of effective strategies to encourage people to apply to work at the service.

Medicines management was effective and closely monitored. Staff who administered medicines had the appropriate training.

Risk assessments were clear and readily identified how to mitigate them. Staff were familiar with these documents and the actions they needed to take. Visiting healthcare professionals reported how knowledgeable, competent and skilled the nurses were and found they had a good working relationship with staff.

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. Staff had received training around the Mental Capacity Act 2005 and associated code of practice and felt confident applying this in their practice. Staff took steps to safeguard people and promote their human rights.

The management team had created a robust governance system, which rapidly identified any issues, which were then quickly addressed. The registered manager critically reviewed the service and proactively looked at how improvements could be made. Staff told us that the registered manager was approachable and listened to their views. People felt the registered manager was running a good service.

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

The last rating for this service was requires improvement (published 8 June 2021).

At the time we found the service was in breach of regulation regarding medicine management. 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

This inspection was prompted by a review of the information we held about this service.

This report only covers our findings in relation to the key questions safe and well-led. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Brockwell Court 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.

# Brockwell 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 Act.

#### Inspection team

An inspector carried out the inspection.

#### Service and service type

Brockwell Court a 'care home'. People in care homes receive accommodation, nursing and personal care as a single package under one contractual agreement dependent on their registration with us. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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 a registered manager in post.

#### Notice of inspection

The 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 the local commissioners 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 11 people who used the service and 2 relatives. We spoke with the registered manager, a regional manager, two nurses, and 8 staff members.

We reviewed a range of records, which included 6 people's care records, medicine records, staff files and a variety of records relating to the management of the service, including 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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

At the last inspection systems were either not in place or robust enough to demonstrate safety was effectively managed. Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- People's medicines were appropriately managed. Medicines were safely received, stored, administered and destroyed when required. Clear protocols were in place for the use of 'as required' medicines.

### Staffing and recruitment

- The provider made sure there were enough staff to meet people's needs.
- Staff recruitment and induction training processes were effective. The provider had a system for managing and overseeing the recruitment process. We noted some of the templates such as appendix would benefit from enhancement. For instance, making it clear on the staff file that a current photograph and identity check including right to work were in place.

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Staff understood people's needs and how to manage any presenting risks. Risk assessments were in place, which outlined all presenting issues. We discussed how to enhance and develop some aspects of these such as producing risk assessment short-term issues. The registered manager alongside the provider were in the process of enhancing care records.
- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse.
- People said they felt safe. We observed staff interact with people in a kind and compassionate manner. One person said, "The staff are lovely, so kind and they really go out of their to make sure I'm alright."
- Relatives were kept informed of any changes and found the care delivered met people's needs.
- The service was committed to driving improvement and learning. The registered manager responded appropriately when accidents and incidents occurred. Records were analysed for patterns or trends and incidents were used as a learning opportunity.

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 supported living settings, this is usually through MCA application procedures to the Court of Protection.

- We found the service was working within the principles of the MCA.

#### 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.

#### Visiting in care homes

- The provider's visiting policies and procedures adhered to current 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 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 are clear about their roles, and understand quality performance, risks and regulatory requirements; 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; Continuous learning and improving care

- The provider and registered manager maintained clear oversight of the service. They critically reviewed the service to determine how further improvements could be made. Action plans were used to identify and monitor where changes were required and how these could improve the service.
- The registered manager proactively considered how improvements could be made. They had supported staff to develop their practices around overseeing practices at the service and staff were now involved in completing regular audits, which produced robust and honest reflections of the service.
- The provider had also reviewed their governance systems and strengthened both the regional management and service audits to ensure these were in-depth and drew out pertinent information.
- Reports had been sent to alert the CQC and local authorities when incidents occurred. The regional manager closely reviewed all incidents. They ensured all relevant parties were involved in this process and outcomes were discussed in an open and transparent manner.
- Staff were passionate about providing good care outcomes and took ownership for their practice. They understood their roles, responsibilities and their accountability.

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; Working in partnership with others

- The registered manager promoted a positive, person-centred culture. They, and staff, put people's needs and wishes at the heart of everything they did. One person said, "I love it here, everyone is spot on. They have made my life so much better and don't know what I would have done without them"
- People told us the registered manager was approachable and acted swiftly to address any issues. People reported the registered manager had made significant improvements to the service. The staff discussed how it was easier to raise matters with the registered manager, how their views were now taken on board and the morale in the home had improved.
- The service involved people and their families in discussions about individuals' care and support needs.
- The service had good links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing.