

Medincharm Limited

Bourne House

Inspection report

12 Taunton Road
Ashton Under Lyne
Lancashire
OL7 9DR

Tel: 01613307911

Date of inspection visit:
04 October 2021

Date of publication:
09 November 2021

Ratings

Overall rating for this service	Inspected but not rated
---------------------------------	-------------------------

Is the service safe?	Inspected but not rated
Is the service effective?	Inspected but not rated

Summary of findings

Overall summary

About the service

Bourne House is a residential care home providing personal care to 25 people aged 65 and over at the time of the inspection. The service can support up to 33 people.

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

Recruitment records were not always sufficiently robust to demonstrate staff were safely employed and the relevant paperwork was not always available in some recruitment records.

There were enough staff to meet the needs of people. We noted that the presence of additional staff would improve the quality and timeliness of the care being delivered and the provider was in the process of recruiting additional staff.

The home was clean and tidy and there were enough domestic staff and cleaning equipment to promote good infection prevention and control. PPE was available and we spoke to the provider about improving systems for checks and ensuring staff had the relevant practical skills.

People were supported to eat and drink, and staff and the cook knew about people's specific dietary needs. Choice was given and there was enough stocks of food for the people living at the home.

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 requires improvement (published 15 February 2021) and there was a continued breach of regulation 17 (good governance). Following that inspection, the provider was asked to complete an action plan to show what they would do and by when to improve. This was not completed and returned to CQC as requested.

This was a targeted inspection following whistleblowing concerns received by CQC. The breach of regulation and the well led key question were not examined during this inspection.

Why we inspected

The inspection was prompted in part due to concerns received about recruitment, staffing levels, and how people were supported to eat and drink. 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.

Enforcement

We have identified a continued breach in relation to how the provider maintains oversight to ensure safe recruitment processes are being followed.

Please see the action we have told the provider to take at the end of this report.

Follow up

We will meet with the provider following this report being published to discuss how they will make changes to ensure they improve their rating to at least good. We will work with the local authority to monitor progress. We will return to visit as per our re-inspection programme. If we receive any concerning information 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?

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service effective?

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Bourne House

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the provider had met the requirements on specific concerns we had about recruitment, staffing and how people were supported to eat and drink.

As part of this inspection we looked at the infection prevention and control 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

This inspection was undertaken by one inspector.

Service and service type

Bourne House 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.

The service did not have a manager registered with the Care Quality Commission. The last registered manager of Bourne House had been deregistered with CQC in April 2021. The registered manager 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 the inspection

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. We reviewed the information we held about the service including notifications the provider had sent to us. We contacted local stakeholders to obtain their views about the service. We contacted Healthwatch for any feedback they had received. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care

services. We used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service about their experience of the care provided. We spoke with ten members of staff including the provider, care workers, night care workers and domiciliary staff. We observed how people were being supported and cared for to help us understand the experience of people who could not talk with us. We reviewed a range of records including daily records, rotas and dependency tools. We looked at three staff files in relation to recruitment. We reviewed the services staffing levels and walked around the building to ensure it was clean and a safe place for people to live.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check specific concerns we had about staffing and recruitment. We will assess all of the key question at the next comprehensive inspection of the service.

Staffing and recruitment

- There were enough staff to meet the needs of people during the day of inspection. Staff were busy and task focused.
- Staff told us they felt there was enough staff to meet the needs of people but noted that with additional staff they could provide better quality of care including spending more time completing personal care and activities.
- The provider advised they had lost a number of staff recently but were recruiting to fill these posts. We will review this at our next inspection.
- Recruitment records were not sufficiently robust to assure us staff had been recruited safely. We saw some staff had been recruited safely in line with good practice but for in other cases information to demonstrate safe recruitment, such as interview records and references were not available in the file. The provider was unable to provide evidence of these following inspection .

We found no evidence that people had been harmed however, systems to demonstrate safe recruitment were not being effectively managed by the provider. This placed people at risk of harm. This was a repeat breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Preventing and controlling infection

- The home was clean and tidy and there were sufficient stocks of cleaning equipment available on the day of inspection. The domestic staff told us they had the resources they needed to ensure the environment was clean, and had enough time to complete the tasks needed.
- There was enough PPE (personal protective equipment) such as aprons, masks and gloves for staff to use. We noted staff did not always use PPE appropriately. We discussed this with the provider and sought assurance staff competencies were checked.
- The provider was accessing the testing and vaccination programme for people using the service and staff. Visits from people outside of the home, including health care professionals and families, were being managed in line with the current guidance.
- The provider did not have their own formal system of checks to ensure good infection prevention and control although they were on site at the service regularly through the week. We discussed their responsibilities to ensure suitable systems of governance and quality assurance were in place with the provider.

We have also signposted the provider to resources to develop their approach.

Is the service effective?

Our findings

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

At the last inspection this key question was rated as requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to check specific concern we had about how people were being supported with eating and drinking. We will assess all of the key question at the next comprehensive inspection of the service.

Supporting people to eat and drink enough to maintain a balanced diet

- We observed staff supported people who needed assistance to eat and drink with patience and kindness. However, due to some of the challenges with staffing there were times when people who required additional assistance had to wait a little longer before receiving the assistance they needed.
- We observed there was plenty of stock of food available within the kitchen. We were aware that there had been times in the past when kitchen staff had not always had the stocks of food they needed, but that things had improved recently.
- People had clear documentation about their dietary needs. The staff in the kitchen were aware of people who needed a modified or fortified diet and we observed people were provided with meals appropriate to their needs.
- We observed people were provided with a choice of meals and appeared to be enjoying them. Some staff felt that more choice could be made available including a more varied range of snacks. The cook told us they had plans to discuss menus with the new home manager once they had settled into the role.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA RA Regulations 2014 Good governance 1, 2 (a) (b) The provider did not have sufficient oversight to ensure the consistent good quality of the service.