

Alcyone Healthcare North East Ltd

# Baedling Manor

## Inspection report

Front Street West  
Bedlington  
Northumberland  
NE22 5TT

Date of inspection visit:  
01 February 2019  
08 February 2019

Date of publication:  
15 March 2019

### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

# Summary of findings

## Overall summary

About the service: Baedling Manor is a care home which is registered to provide personal care and accommodation for up to 50 people, some of whom are living with dementia. There were 45 people living at the home at the time of the inspection.

People's experience of using this service: We found people were receiving safe care at the time of the inspection. Action had been taken to address the concerns that had been raised.

We found audits and checks continued to be carried out but they had not picked up on all the issues we identified during the inspection. We have made a recommendation about closely monitoring the effectiveness of governance systems, particularly with the increase in numbers of people using the service.

Rating at last inspection: Good (report published 17 July 2018)

Why we inspected: We carried out an unannounced comprehensive inspection of this service on 22 May 2018. More recently, we received concerns in relation to the management of medicines, pressure ulcers, staffing and infection control. As a result, we undertook a focused inspection to look into those concerns. This report only covers our findings in relation to these topics. We looked at the key questions 'Is this service safe?' and 'Is this service well-led?'

We did not inspect the key questions 'Is this service effective, caring, or responsive' as our ongoing monitoring did not raise any information about risks or concerns in these areas.

Follow up: We will continue to monitor the service to ensure that people receive safe, compassionate and high quality care. Further inspections will be planned for future dates.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://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?

**Requires Improvement** ●

The service was not always well-led

Details are in our Well-Led findings below.

# Baedling Manor

## 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

**Inspection team:** The inspection was carried out by an inspector and a medicines inspector.

**Service and service type:** Baedling Manor is a care home. 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. Baedling Manor does not provide nursing care.

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 first day of the inspection was unannounced. This meant the provider did not know we would be visiting. The second day was announced.

**What we did:** Our inspection was informed by information we already held about the service. We spoke with the local authority safeguarding and contracts teams and used the information they provided when planning the inspection. We spoke with the nominated individual, the registered manager, five people, two relatives, three care staff and a domestic.

We reviewed four care plans, staffing records, and a variety of records relating to the quality and safety of the service.

# Is the service safe?

## Our findings

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

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

Using medicines safely.

- There had been concerns raised with the management of medicines particularly in relation to time critical medicines to treat Parkinson's disease. We found these medicines had not been always been correctly managed but improvements had been made and at the time of the inspection they were being managed safely.
- The provider had sought further specialist advice and training for staff from Parkinson's UK. Additional prompts had been added to the electronic care plan system which alerted staff through an audible alarm for one person's medicines to try and prevent re-occurrence.
- Topical medicines records were incomplete as there had been a change to electronic records which lacked detail and body maps. This was rectified and paper records were in use by the second day of the inspection. Some instructions for the administration of as required medicines lacked detail and were also amended. Other aspects of medicines management were satisfactory.

Staffing and recruitment.

- We had received information of concern about staffing levels. Suitable numbers of staff were on duty during the inspection. Staff worked a rolling rota and there were sufficient staff on duty except during short notice unexpected absence which was covered wherever possible. There were no staff working excessively long hours and those that had chosen to do overtime had regular days off between shifts. Safe recruitment practices continued to be in place.

Assessing risk, safety monitoring and management.

- Individual risks to people were assessed and plans put in place to mitigate these. They had been regularly reviewed. We checked a recent emergency respite care plan and other care plans relating to risks. The respite plan showed good information upon which to base care plans from the initial assessment. This information was very person centred.
- Checks on the safety of the premises and equipment were in place.
- We found no concerns with the management of pressure ulcers at our last inspection or during this inspection. Concerns had been raised about an apparently high number of people with skin damage. An analysis had been carried out by the provider covering the period in question which found that many people had been admitted to the service with skin damage, and some recorded injuries were not as a result of pressure damage as first thought. They continued to monitor this carefully and staff had received training in the prevention of pressure ulcers, with more planned.

Preventing and controlling infection.

- The home was clean and staff used gloves and aprons appropriately. There had been an outbreak of influenza and domestic staff could tell us the correct procedures to follow to prevent the spread of infection.

- Representatives from Public Health England who manage outbreaks of infection in care services, told us they had difficulty communicating with the registered manager during the outbreak. We told the director and registered manager about this and they said they would address concerns about communication.

Systems and processes to safeguard people from the risk of abuse.

- Safeguarding procedures were in place. Staff knew how to report concerns.

Learning lessons when things go wrong.

- A record of accidents and incidents was kept and was analysed by the registered manager to look for patterns or trends, to try and prevent reoccurrence.
- There was evidence of learning from concerns that had been raised, and the registered manager and director acknowledged when things had not gone well and were committed to putting things right.

# 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

Service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality and safe care.

Managers and staff being clear about their roles, and understanding of quality performance, risks and regulatory requirements.

- The director supported the registered manager. They continued to carry out a variety of audits and checks on the quality and safety of the service. These checks had been carried out regularly and a rolling action plan of improvements was in place. This was updated on a regular basis. Checks had not always identified the areas we found during our inspection, however, these were immediately rectified.

We recommend the effectiveness of governance systems is kept under close review.

- There were some concerns raised about communication at the service particularly with regards to the new telephone system which meant callers could not always get through to a staff member. This had been designed to make things easier for people but the provider acknowledged there were some issues to be addressed and had begun looking at solutions.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility.

- Since our last inspection the numbers of people using the service had almost doubled. The director advised us they had already begun considering whether they now needed to appoint a deputy manager. They assured us they would review roles and responsibilities and strengthen the management team if necessary.

- We had been notified of events and incidents the provider is legally obliged to inform us of. Engaging and involving people using the service, the public and staff, fully considering their equality characteristics.

- Resident and relative meetings continued to take place. At our last inspection we found the views of people and relatives had been obtained through surveys. We did not look at this in depth again at this inspection. Staff told us they felt well supported and could approach the registered manager if they had concerns.

Working in partnership with others.

The service remained an active part of the community. Members of the public were able to use the beauty salon and café on site, which they accessed through a separate entrance.