

St Philips Care Limited

Burntwood Hall Care Centre

Inspection report

Moor Lane
Brierley Common
Barnsley
South Yorkshire
S72 9HB

Tel: 01226780222

Website: www.stphilipscare.com

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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?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service:

Burntwood Hall Care Centre is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Burntwood Hall is located in Barnsley. There is a separate unit on the first floor for people who are living with dementia.

People's experience of using this service:

People and their relatives spoke positively about all the staff. A relative told us, "Best thing about this place is the standard of care."

There were systems in place to recognise and respond to any allegations of abuse. Staff had received training and understood what it meant to protect people from abuse. They told us they were confident any concerns they raised would be taken seriously by management.

Medicines were stored safely and securely. There were effective systems in place to ensure people received their medicines as prescribed.

Safe recruitment procedures made sure staff were of suitable character and background. There were enough staff employed to meet people's care and support needs in a timely way. However, some people and their relatives told us staff could appear rushed on occasion.

Staff were provided with an effective induction and relevant training to make sure they had the right skills and knowledge for their role. Staff were supported in their jobs through regular supervisions and an annual appraisal.

People were consulted and listened to about their care and support needs. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible.

People told us they enjoyed the food served at Burntwood Hall. People were supported to eat and drink to maintain a balanced diet. People were supported to maintain good health and have access to health and social care services as required.

There was a range of activities available to people. All staff had time to spend socialising with people during the morning and at lunch time.

People, their relatives and staff told us the managers were supportive and approachable.

People, their relatives and staff were asked for their opinion of the quality of the service via regular meetings and annual surveys.

The service had up to date policies and procedures which reflected current legislation and good practice guidance. There were effective systems in place to monitor and improve the quality of the service provided.

More information is in the full report.

Rating at last inspection:

At the last inspection the service was rated Good (report published on 3 September 2016).

Why we inspected:

This was a planned inspection based on the rating awarded at the last inspection.

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 remained safe

Details are in our Safe findings below.

Is the service effective?

Good ●

The service remained effective

Details are in our Effective findings below.

Is the service caring?

Good ●

The service remained caring

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service remained responsive

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service remained well-led

Details are in our Well-Led findings below.

Burntwood Hall Care Centre

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:

This inspection took place on 28 February 2019 and was unannounced. The inspection was carried out by two adult social care inspectors 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. This Expert by Experience was a registered nurse with experience of caring for vulnerable young people and older adults.

Service and service type:

Burntwood Hall is a care home. The home is registered to provide accommodation and personal care for up to 42 older people. Fifteen of the beds are provided in a separate unit on the first floor for people who are living with dementia. 30 people were living at Burntwood Hall at the time of 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. The registered manager was not available to speak with on the day of this inspection.

What we did:

Before this inspection, we asked the provider to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We used this information to help with the planning for this inspection and to support our judgements.

Before this inspection we reviewed the information we held about the service, which included correspondence we had received and any notifications submitted to us by the service. Statutory notifications are information the registered provider is legally required to send us about significant events

that happen within the service. For example, where a person who uses the service has a serious injury.

Before this inspection we contacted staff at Healthwatch, Barnsley and they had no concerns recorded. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We also contacted members of Barnsley commissioning service and they did not have any concerns.

During the inspection we spoke with seven people who lived at the home and five of their visitors. We met with the deputy manager, regional manager and administrator. We spoke with nine members of staff. We spent time looking at written records, which included four people's care records, four staff personnel files and other records relating to the management of the service. We also carried out a Short Observational Framework for Inspection (SOFI) to observe people's experience of daily life in the service.

Is the service safe?

Our findings

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

A rating of Good means: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- Staff we spoke with confirmed they had received training in safeguarding adults from abuse. Staff were confident any concerns they raised would be taken seriously by management and acted upon appropriately.
- The provider had safeguarding and whistleblowing policies and procedures. This meant staff were aware of how to report any unsafe practice.
- The provider had systems in place to ensure any safeguarding concerns were investigated and appropriate action was taken by management to reduce the risk of repeat events.
- The provider was responsible for managing small amounts of money for people living at Burntwood Hall. We saw the administrator kept an accurate financial record for each person.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- There were systems in place to help staff keep people safe.
- We saw a paper record was completed at the time of any accidents and incidents and then uploaded onto the provider's electronic reporting system. The cause and effect of each accident or incident was investigated and recorded, and where appropriate action plans were put in place to reduce the risk of them happening again.
- We saw people's care records contained risk assessments. The assessments contained information for staff on how to reduce any identified risks.

Staffing and recruitment

- People, relatives and staff told us there were enough staff employed to meet people's care and support needs. Some people did tell us staff could appear rushed on occasion. People's comments included, "Occasionally short staffed on a weekend."
- The deputy manager told us there were enough staff employed and the numbers were adjusted to reflect any changes in occupancy or dependency levels. For example, at the time of this inspection the lift was not working and staff numbers had been increased to provide additional support.
- Recruitment practices were safe. Staff files contained references to confirm their suitability in previous relevant employment, proof of identity, including a photograph and a Disclosure and Barring Service (DBS) check. A DBS check provides information about any criminal convictions a person may have.

Using medicines safely

- Medicines were stored securely and within safe temperature ranges.
- Senior care staff took responsibility for dispensing medicines. These staff had received training in

medicines management and we saw their competency in this area was checked.

- Medicines audits were undertaken regularly by the registered manager and deputy manager.
- Each person had a medication administration record (MAR). This should be signed and dated every time a person is supported to take their medicines or record a reason why any medicine is declined. We checked ten MAR charts and each had been fully completed.
- We saw the senior care worker stayed with the person until their medicines had been taken. Where appropriate they discreetly explained what each medicine was for and offered the person a drink.
- Some people required medicines as and when required (PRN). We found the information for when one person might need their PRN medicine was not as clear as it could be. We spoke to the senior care worker about this and the information was immediately updated.
- A relative told us, "Staff monitor [name's] pain, keep it under control."

Preventing and controlling infection

- There were systems in place to reduce the risk of the spread of infections. ● The provider had produced infection control guidelines for staff to follow as part of the infection control policy.
- Personal protective equipment (PPE), such as plastic gloves and aprons were readily available to staff and worn appropriately throughout the inspection.
- People told us, "[Staff] always wear gloves and aprons when helping you to the toilet", "Everyone [staff] most respectful, wear gloves and aprons when they help me bathe" and "I do think it's clean [at Burntwood Hall]. Spotless."
- We noticed a faint malodour on a corridor on the first floor. We spoke with the deputy manager and regional manager about this issue and they were taking action to address it. This included the recent purchase of specialist cleaning solutions.

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.

A rating of Good means: People's outcomes were consistently good, and people's feedback confirmed this.

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

- 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 Act 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 so that they can receive care and treatment when this is in their best interests and legally authorised under the MCA. The authorisation procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

- We found the service was working within the principles of the MCA. We saw records of best interest meetings taking place when a person did not have capacity to consent to potentially restrictive equipment, such as bed rails.

- The deputy manager understood their responsibilities under the MCA and kept a record of all DoLS applications. Where these been authorised, the provider was complying with any conditions applied to the authorisation.

- Care staff we spoke with understood the principles of the MCA and we saw staff ask for consent and explain what they planned to do before proceeding with supporting a person.

Staff support: induction, training, skills and experience

- People and their relatives told us staff were well trained. A relative said, "Staff are well trained, they know how to use the lifting equipment appropriately."

- Staff told us they had an induction to their job and we saw copies of induction records on staff files. The induction included two days of training and shadowing a more experienced member of staff for a minimum of two 12-hour shifts.

- All staff were required to repeat mandatory training every year and we saw records of this taking place on staff files. The provider also kept an electronic record of staff compliance in this area.

- The provider's staff supervision policy stated each member of staff should have a minimum of four supervisions per year. The staff files we looked at confirmed they were receiving regular supervisions.

- The deputy manager told us staff should also receive a yearly appraisal. An appraisal is an annual meeting a staff member has with their manager to review their performance and identify their work objectives for the next twelve months. We saw these had not always taken place every year, meaning some were overdue. The deputy manager was aware of this and she had plans in place to ensure appraisals were completed with all staff. We saw copies of recent letters on staff files inviting them to their appraisal.

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

- People told us they enjoyed the food served at Burntwood Hall. Comments included, "All the food is home cooked" and "Food's okay, a bit of choice." Visitors told us, "Food is very good and the dining room looks lovely" and "Food always smells lovely and there's plenty to eat. My friend looks so much better since coming here."
- We observed the lunch service in both dining rooms. It was a relaxed and pleasant experience.
- Adapted drinking cups and plates were available if required. A choice of drinks were served before and during lunch, staff frequently refreshed glasses and encouraged people to drink.
- People were offered a choice and could select what they wanted from the serving trolley. Staff also plated up the available options to show to people sat at the tables to help them choose.
- The catering staff knew people well and were aware who had specific dietary needs for health or cultural reasons. We saw these needs were catered for. We saw staff were attentive to how much people ate and drank and recorded this accurately where required.
- A member of staff sat at each table to eat lunch with people after every person had been served. Where people needed support to eat this was given discreetly.
- The deputy manager told us staff eating their lunch with people was introduced recently and feedback from people and staff was positive. The deputy manager told us people who had previously required a lot of support and encouragement to eat responded well to staff sitting with them and had started to eat more as a result.

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

- Some people residing at Burntwood Hall were living with dementia. People's rooms had their names on them and there was signage of communal areas, such as toilets and dining rooms.
- On walls there was a range of dementia friendly pictures and displays to aid reminiscence.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People told us they were supported to see health and social care professionals. Comments from people included, "Staff get a doctor out asap [straight away] if there's any health problems" and "[Staff] quick to get a GP out to visit."
- We saw people's care records were updated following visits from external professionals.
- Any changes to a person's care and treatment needs were also shared with staff during their handover between shifts.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

A rating of Good means: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People told us they were well treated. One person told us, "Staff always very helpful". A relative told us, "Best thing about this place is the standard of care."
- People told us visiting relatives and friends were always made welcome. ● We saw positive, caring interactions between people and staff throughout the day of the inspection. Staff got down to eye level to communicate effectively with people. Staff supported people to transfer with patience and kindness.
- The deputy manager told us about 'Bee [inspired]Time'. She explained this is where all staff sit down with people and maybe play a game, have a chat and a drink every morning. This was introduced in November last year on both units. The purpose is to provide meaningful support, focussing on the person and what they can do, not their diagnosis and what they can't do.
- Staff we spoke with also told us about 'Bee Time' and how they thought it was a positive development in new ways to support people. A member of staff said, "'Bee Time' is really good, we can spend time with people. Staff get to know people really well"
- Staff told us they enjoyed working at Burntwood Hall and this was evident in their interaction with people and their visitors. A member of staff said, "I would be happy for my family to live here because the whole team is so caring."
- The provider complied with the Equality Act 2010. This meant people were not treated unfairly because of any characteristics that are protected under the legislation, such as age and gender. Our observations of care, review of records and discussion with the deputy manager and regional manager showed us the service was respectful of people's rights.

Supporting people to express their views and be involved in making decisions about their care; Respecting and promoting people's privacy, dignity and independence

- People told us they were encouraged to be independent. One person told us, "[Staff] help me dress if I want. I try to do everything for myself, prefer to be independent."
- We saw people were treated with dignity and their privacy was respected. Staff knocked on doors before entering people's bedroom doors. Staff spoke respectfully about the people they supported.
- We did not see or hear staff discussing any personal information openly or compromising people's privacy. Staff we spoke with understood the need to respect people's confidentiality and we saw care records were locked away when not in use.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

A rating of Good means: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control;
End of life care and support

- The care records we looked at were person centred and contained information about the person's social history, likes and dislikes. We saw assessments were completed with the person and/or their family prior to moving to Burntwood Hall to ensure their care and support needs could be met.
- Care records were split into sections covering all aspects of daily living, such as eating and drinking. We saw each section was evaluated monthly. Care records were reviewed annually, or sooner if a person's needs changed.
- Care records included a section on people's needs and preferences for the end of their life.
- There were some meaningful activities and social opportunities for people. However, the activities boards were blank, there were no forthcoming activities listed. The deputy manager told us the activity coordinator had recently taken up another post within the service and she was in the process of recruiting a replacement.
- We saw a large selection of jigsaw puzzles and books were available to people.
- We asked people if they were supported to undertake any activities or access their local community. They told us, "They have a lovely summer gala in the grounds, always invite families and friends" and "My Pastor visits from church whenever they have time." People also told us they enjoyed petting a dog that was regularly brought to Burntwood Hall for them to spend time with.
- Visiting relatives and friends told us, "They [staff] get people doing exercises, joining in singing, that kind of thing" and "There used to be a woman who did hand massage, manicures and some activities, but she left."
- People were able to access different outside seating areas within the grounds. We saw some people having their morning drink whilst sitting on the veranda outside the main lounge.

Improving care quality in response to complaints or concerns

- We asked people if they had ever made a complaint, and if so, how was it handled. They told us, "No idea how to make a complaint, never made one" and "Never needed to make a complaint." A relative told us, "I would go straight to the manager, but never needed to complain."
- The provider had a complaints policy and procedure in place. This was displayed in the reception area.
- We saw the deputy manager had a system in place to keep a record of complaints, their response and the outcome.
- The deputy manager told us they dealt with minor concerns at the time they were raised and did not record these, such as queries regarding misplaced laundry. We suggested the deputy manager may want to consider recording these minor issues as well.

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.

A rating of Good means: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Visiting relatives and friends told us, "Management here is brill [brilliant]. One big happy family here" and "The place is well managed, everything is in place to look after my friend."
- Staff were clear on their roles and responsibilities.
- Staff spoke highly about the managers and told us they felt supported to undertake their jobs to the best of their ability. Comments from staff included, "The manager is involved all the time and will help where she can. She is really nice" and "I have worked here [high number] years, its lovely. [Name of registered manager] does a lot for the home, she supports us all."
- The provider had a comprehensive set of policies and procedure relating to all aspects of service delivery. We saw these were reviewed and updated to ensure they reflected current legislation and good practice guidance.
- Maintenance checks of the premises were regularly undertaken with satisfactory outcomes. Risks to people's safety in the event of a fire had been identified and managed.
- The deputy manager understood their role in terms of regulatory requirements. They and the registered manager were aware of their obligations for submitting notifications in line with the Health and Social Care Act 2008.
- The provider continued to ensure the ratings from their last inspection were clearly displayed in the home.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider had systems in place to regularly ask people and staff for their views on the service so they could continually improve.
- The deputy manager told us staff meetings were held every three months, or sooner if needed. Residents and relatives' meetings were also held every three months. We saw minutes from these meetings which showed people's views and needs were considered.
- The deputy manager told us satisfaction questionnaires were posted to people, their relatives, staff, and visiting health and social care professionals every 12 months. More recently these questionnaires were also made available online.
- Results were analysed by head office staff and summaries sent to each service to display. The results for 2016 and 2017 were displayed in the reception area. Overall they were positive with people and staff strongly agreeing or agreeing they were satisfied with management/staff, care/job satisfaction and home environment.

Continuous learning and improving care

- The service had effective quality assurance audits in place.
- We saw any issues identified were recorded and acted upon. Any outstanding or ongoing issues were pulled through to be picked up at the next audit. For example, the audit processes had identified the malodour we found and an action plan was in place.
- The regional manager also completed a quarterly audit report to ensure they kept oversight of each service.

Working in partnership with others

- The deputy manager told us they worked in partnership with Barnsley local authority.
- Local community groups, such as the Scouts and Brownies regularly visited people living at Burntwood Hall and provided entertainment and activities.
- Staff had developed and sustained good working relationships with visiting health and social care professionals.