

Barchester Healthcare Homes Limited

# Prestbury Beaumont DCA

## Inspection report

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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

Prestbury Beaumont DCA is a domiciliary care agency (DCA). It provides personal care to people living in their own bungalows and apartments. At the time of the inspection only two people received support with their personal care from the service.

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

People using the service received safe and effective care. Safeguarding systems, policies and procedures ensured people were safe and protected from abuse. Risks to health safety and welfare were identified and managed safely with the involvement of the person.

People told us they were supported and treated with dignity and respect. Their needs were met, and they were involved in the development of care and support plans that reflected their needs, personal preferences, likes and dislikes.

All the people using the service made positive comments about the standard of care and the service they received. One person said: "This is best the care in Macclesfield, a friend of mine has told me about other (services) and this is the best by far. Staff are caring my health care needs met, I'm safe and everything I need is to hand". Another person said: "I would say this is an excellent (service) and consider myself fortunate."

Care and ancillary staff were well trained and employed in enough numbers to meet people's needs and safe recruitment procedures were followed.

Systems were in place for reporting accidents and incidents and learning from them.

The management team and the care staff had formed trusting and positive relationships with people who used the service.

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.

Community based health care professionals spoke highly of the staff and the management team, reporting that they worked in partnership with them to ensure that people's health care needs were met.

People were given opportunities to openly express their views and opinions and felt listened to. Concerns and complaints were responded to effectively and managers and staff learned from experience.

New staff received induction training before they could provide care and support. They benefited from ongoing training including nationally recognised qualifications in health and social care. Morale amongst

the staff team was good. Staff told us that they appreciated support, guidance and direction of the management team.

The provider and management team demonstrated a commitment to continuous learning, improving the service and the delivery of person-centred, high quality care by engaging with everyone using the service and stakeholders.

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 good (published 11 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we 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.

<b>Is the service safe?</b> The service remains good.	<b>Good</b> ●
<b>Is the service effective?</b> The service remains good.	<b>Good</b> ●
<b>Is the service caring?</b> The service remains good.	<b>Good</b> ●
<b>Is the service responsive?</b> The service remains good.	<b>Good</b> ●
<b>Is the service well-led?</b> The service remains good.	<b>Good</b> ●

# Prestbury Beaumont DCA

## 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 Care Act 2014.

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

Prestbury Beaumont DCA is a domiciliary care agency (DCA). It provides personal care to people living in their own bungalows and apartments. The service is managed from Prestbury Beaumont Care Home, which is on the same site. The DCA service is available for people living in the bungalows and apartments on site owned by the people themselves. Many of the services provided to the people living in these were from staff and resources within the home. For example meals could be prepared and served in the home and people could join in with any social activities organised. This inspection focussed on the domiciliary care provided by Prestbury Beaumont DCA. At the time of the inspection the service offered support to several people, however only two people received personal care and support which involved an activity the provider was registered for with the Care Quality Commission.

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

This 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 authority and professionals who work with the service. 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. This information helps support our inspections. We used all 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 six members of staff including the registered manager, care workers, administration staff and the regional manager.

We reviewed a range of records. This included two people's care records, and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.

After the inspection.

We continued to seek clarification from the provider to validate evidence found. We spoke with two professionals who regularly visited the service to gather their views on the quality of care provided.

# 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. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe. One person said "Safe, that goes without saying" and another person said: "Staff are caring my health care needs met, I'm safe and everything I need to hand".
- Staff were familiar with the provider's safeguarding policies and procedures. They could describe what constituted abuse and what action to take if they saw any incidents of concern.
- The manager reported any safeguarding concerns to the local authority and CQC as required.
- A representative of the local safeguarding authority provided information which showed us that the registered manager and staff worked in partnership with other professionals to ensure people were safe and protected from abuse and avoidable harm.

Assessing risk, safety monitoring and management

- Effective systems were in place to identify, manage and mitigate risk to help keep people safe.
- Because services were provided on the same site as Prestbury Beaumont care home, care staff always had access to further advice and guidance from senior staff.

Using medicines safely

- People received their medicines safely and as prescribed from appropriately trained staff, who underwent regular checks to assess their competency.
- People were happy with the support they received from staff with their medicines.

Staffing and recruitment

- There were enough suitably, skilled and experienced staff to safely meet people's needs.
- People received care and support in accordance with their assessed need and have access to support 24 hours a day 7 days a week, should the need arise.
- The provider had effective policies and procedures for the safe recruitment of staff. Before being offered a job, applicants underwent a series of pre-employment checks to check their suitability for the role.

Preventing and controlling infection

- Staff received training in infection control and used personal protective equipment (PPE) when needed to help minimise the spread of infection.
- The provider carried out regular checks and audits to ensure that effective infection control measures were safely followed.

Learning lessons when things go wrong

- All accidents and incidents were clearly recorded along with the action taken.
- These were analysed by the manager and senior staff to look for trends. Records showed action was taken when things had gone wrong to ensure people were safe.



# 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 good. At this inspection this key question has remained the same. This meant 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

- Assessments of people's care needs, and personal preferences had been carried out with the person or their representative and were reviewed and revised periodically or when the person's needs changed.
- We found that one person's assessment had been inadvertently archived. Staff retrieved this at the time of the inspection and carried out a full review to ensure it was accurate and up to date.
- People were involved in discussions about their care and their outcomes were good.
- People had signed and agreed their care and support plans. One person said: "They (referring to care and support plans) are sufficient to meet my needs, I'm happy with them". Another person recalled discussing their care and support plans with the manager and said: "Yes they reflect my needs well".

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

- People received the right amount of support to access a balanced and nutritious diet in accordance with their assessed needs.
- One person told us that one of the benefits of living in the Prestbury Beaumont community was that they were able to access "high quality food served in a very pleasant dining room".

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 to receive care and treatment with appropriate legal authority. People who normally live in their own homes can only be deprived of their liberty through a Court of Protection order.

- None of the people supported by the service were subject to a Court of Protection order. However, systems were in place to ensure people who lacked the capacity to make specific decisions, were supported in the least restrictive ways possible.
- Staff had received training on MCA and understood its principles. They recognised the importance of seeking a person's consent prior to undertaking care or support.

Staff support: induction, training, skills and experience

- Staff received an induction when starting with the service which was based around the Care Certificate and included shadowing experienced staff to ensure they were competent before they could work unsupervised.
- All staff spoken with presented as skilled and knowledgeable. Training records showed that staff received training in a variety of appropriate and specialist topics to help guide them in their role
- Staff told us that they were well supported and appreciated the support and direction of the management team. Records showed that staff received regular group and individual supervision.
- All people spoken with praised the staff. One person said: "The staff always treat me with respect and are well trained. Yes they are very good".

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

- People received support to access health care professionals when they needed it. One person said: "I have lot of health issues and staff understand, they are very good". Another person said: "Access to medics very good. I have had flu vaccine this year".
- Information regarding people's changing health needs was shared between staff during shift handovers, and people's care was adjusted as required.
- Community based health care professionals spoken with as part of this inspection told us that managers and staff worked in partnership with them to ensure people's health care needs were met.

# 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Respecting and promoting people's privacy, dignity and independence. Ensuring people are well treated and supported; respecting equality and diversity.

- Staff continued to be consistently caring. They treated people with kindness, respect, promoting choice, seeking consent and offered emotional support when needed.
- People's needs were assessed and identified prior to receiving a service. Protected characteristics (such as age, gender, disability, cultural and religious support needs) were identified and met and staff had developed good relationships with people.
- People praised the standard of care provided describing the staff and the care as "Excellent". One person said: "This is the best care in Macclesfield, a friend of mine has told me about other (services) and this is the best by far. Staff are caring my health care needs are met, I'm safe and everything I need to hand". Another person said: I would say this is an excellent (service) and consider myself fortunate."
- People's personal information was kept confidentially and securely.

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

- People, along with family members, were encouraged to share their views about the care provided in care plan reviews, and meetings with the manager and staff.
- People were provided with information about services they could access if they needed independent advice and support.

# Is the service responsive?

## Our findings

### Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Care plans contained information on the best way to connect and communicate with each person
- None of the people receiving a service at the time of our inspection had any particularly complex communication needs. However, we found the service was able to provide information in alternative ways if needed, such as braille and easy-read.

### Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- We found that care plans were personalised and reflected the needs of the individual as well as their history and preferences.
- People told us that they were involved in developing, reviewing and revising their care plans as their needs and circumstances changed.
- Staff knew people's likes, dislikes and preferences and used this knowledge to care and support people in the way they preferred. One person said: " They always provide care in the way I want them to. To a large extent they know my needs and personal preferences"

### Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The people using the service often spent some of their day within the care home that was on the same site. This meant that they were able to benefit from the support of care home staff and the additional resources available within the care home even though they lived in their own home.
- For example, the care home employed two activities co-ordinators and people using the services of Prestbury Beaumont DCA who lived in their own homes were able to join in with any activities organised in the care home.
- End of life care and support
- Staff had received training in end of life care and afforded people opportunity to discuss and plan their end of life wishes with support of others such as family members and the person's doctor where appropriate.
- ●The appropriate documentation, authorised by their doctor, was in place where people had expressed a wish to not be resuscitated .

### Improving care quality in response to complaints or concerns

- There was a complaints policy in place and people knew how to raise any concerns they had.
- Complaints were recorded, investigated and responded to appropriately.

# 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Continuous learning and improving care; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager had a clear understanding of their role, responsibilities and regulatory requirements. They had notified CQC about incidents and events which occurred at the service
- There were systems in place for checking on the quality and safety of the service and for making improvements. However, these did not include routine audits of assessments and care planning documents. None of the people had been put at risk or come to any harm due to this lack of oversight and action was taken during the inspection to ensure that all such records were audited regularly.
- The registered manager understood their responsibilities to act in an open and transparent way when things went wrong. Incidents and accidents were analysed, and learning shared with the staff team, to help ensure people received safe and effective care.
- The registered manager and staff completed training and kept up to date with the law and current good practice guidance to update their knowledge and learning.
- Staff performance, learning and development was monitored through observations of their practice and competency assessments.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager was person-centred in their approach and actively promoted a culture of person-centred care by engaging with staff, everyone using the service, their family members and loved ones.
- People spoke highly of the management team, commending them on their knowledge skills and dedication to duty.
- Morale amongst the staff team was high. Staff told us that they appreciated the support, guidance and direction of the management team. Their comments included, "The manager is excellent, their door is always open and overall this is an excellent care home and good place to work" and "The manager is excellent, supportive, dedicated and always available".

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics Working in partnership with others

- The service continued to involve people and family members in discussions about the quality of care provided.
- Staff told us that they felt involved in decisions made about the service; and were confident sharing their ideas and views and felt they were listened to.

- Managers and staff worked in partnership with other agencies to ensure good care. A community based health care professional spoke highly of the management team commending them and describing the quality of care as "Excellent."

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

- The provider met the regulatory requirements to be open and transparent with people using the service when things went wrong.
- The ratings from the last inspection were clearly displayed at the service and on the providers website: [www.barchester.com](http://www.barchester.com)