

Bellview (UK) Ltd

Silverbirch Home

Inspection report

14 - 16 Beauchamp Avenue
Handsworth Wood
Birmingham
West Midlands
B20 1DR

Tel: 01212412376

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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

Silverbirch provides accommodation for a maximum of nine people requiring nursing or personal care. There were nine people living at the home when we visited.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen." Registering the Right Support CQC policy

There was a registered manager in post when we inspected the home. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People were comfortable and at ease around care staff that understood how to keep people safe. Staff had received updated training and understood people's individual circumstances. Staff understood who to report concerns to as well as the risks to people's health. Staff understood people's health conditions and how they required supervision and support. The risks to people's health were reviewed regularly and updated based on the known risk to people's health. Staff working at the home undertook background checks. Staffing needed to support people safely was reviewed and updated based on people's changing needs. People's access to medicines was reviewed and checked to ensure people received their medicines in line with guidance for that person.

Staff were supported through access to training and supervision and received feedback on their performance. Staff supporting people understood the importance of obtaining their consent. People are supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible; the policies and systems in the service support this practice. Staff supported people to maintain a healthy diet. People were also supported to attend appointments with healthcare professionals in order to aid their health and wellbeing.

People knew and liked the staff supporting them. Staff understood people's individual care needs and preferences. Staff involved people in their care by explaining choices and supporting people to make decisions about their care. People were supported by staff who demonstrated an understanding of supporting people with dignity and respect.

People were supported to pursue hobbies and interests that were important to them. Staff understood how to support people. People's care was reviewed and updated in response to their changing care needs. People understood they could speak with staff and the registered manager if they were unhappy about their care. Complaints were recorded and responded to in line with the registered provider's policy.

People knew and liked the registered manager. Staff spoke positively about working at the home and understood their role within the team. Staff felt able to seek help and guidance as well as contribute ideas to care planning. Regular reviews of people's care ensured people's care planning was timely and up to date. The registered manager reviewed and updated people's care regularly and sought advice and guidance to improve the care people received.

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.

People felt safe and at ease around care staff that understood how to protect people from harm. Staff understood people's health conditions and ensured they received support with their medicines. Background checks were undertaken before staff were appointed to the home. Staff understood how to prevent the spread of infection.

Is the service effective?

Good ●

The service was effective

People were supported by staff that had received training and guidance in caring for people. People were supported to make choice to support a healthy lifestyle. People were supported to attend appointments with healthcare professionals and were staff understood the importance of consent and how to support people within the remit of the law.

Is the service caring?

Good ●

The service was caring.

People liked the staff that cared for them and staff understood how to support people with respect for their human rights.

People were involved in their care planning and made day to day decisions. People were treated with dignity and respect.

Is the service responsive?

Good ●

The service was responsive.

People were involved in planning their care and people's care was reviewed and updated in response to changing needs. A complaints process was in place to investigate and respond to complaints.

Is the service well-led?

Good ●

The service was well led

People felt able to access the Registered Manager. Staff felt able to seek advice and guidance from the registered manager. The registered manager had a system in place for monitoring, reviewing and updating people's care and worked with other stakeholders to develop people's care.

Silverbirch Home

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 28 December 2017 and was unannounced.

There was one inspector in the inspection team.

The provider completed and returned a Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We also contacted the Local Authority for feedback on the home.

We reviewed three people's care plans, daily records and medical administration charts. We also reviewed checks the registered manager undertook as well as meetings with healthcare professionals, staff and family members. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We also checked two staff files to confirm background checks were included in recruitment processes for staff working at the home.

Is the service safe?

Our findings

We last inspected the service in July 2016 we rated this section as Requires Improvement. As this inspection we found the service had improved and people's risk assessments were now reviewed and updated regularly to ensure people were safe. People told us they felt safe. People told us they were friends with staff and people looked at ease and comfortable around staff.

Staff we spoke with understood how to keep people safe. Staff told us they had received training and could explain to us what it meant to safeguard. Staff understood how to share concerns with the registered manager and with other organisations such as the Care Quality Commission if they needed to.

People's individual risks to their health were known and understood by staff. Staff explained they understood people's risks by having worked with them and from reading their care plans. Three care plans were reviewed listed the risks to people's health.

The deputy manager explained that they did not recruit people as permanent staff unless they had worked at the home before. They shared that most staff had worked at the home via an agency and this had allowed people and the management to get to know staff. Staff also explained this allowed them to get to know people and understand whether they wanted to work at the home. Staff we spoke with all stated they had undertaken checks of the background before working as permanent staff at the home. The provider had undertaken background checks on staff before staff could work at the home.

The deputy manager showed us how people's medicines were regularly reviewed. We saw that there were protocols in place for using some medicines that were to be used as and when they were needed. Where appropriate, a manager's approval was needed to ensure it was safe for the person to have the medicines.

The management team explained how people were kept safe when some people exhibited behaviour that others may find upsetting or unwanted. We saw that when behaviours were identified, increased supervisions were put in place so that people were kept safe. Two staff we spoke with also shared with us how they used distraction techniques to settle the person when they displayed incidents of anxiety. We also saw staff use these techniques during the inspection.

Accidents and incidents were recorded by staff for the management team to review. We reviewed how learning from incidents was shared with staff and changes made in the people's care plans. We saw that changes made to keep people safe had been put in place and staff we spoke with told us they had been updated about the learning from any incidents that occurred.

We saw staff use gloves aprons and hand gels in order to reduce the spread of infection. Regular checks were undertaken of the home in order to reduce the risk of the spread of infection. We also saw staff regularly wash their hands and help to keep the home clean and tidy. □

Is the service effective?

Our findings

We last inspected the service in July 2016 we rated this section as Good. As this inspection we found the service remained Good.

Staff we spoke with told us they received training and support and that they could access further training if they needed. Staff were keen to share with us the training they had attended. Staff could all explain to us the importance of obtaining a person's consent. Staff confirmed they had attended Mental Capacity Act training.

Some of the people living at the home lived with Autism. Staff told us about the training they had received and how they supported people. For example, they told us about what triggers for anxieties in some people and how they worked to reduce the incidents of these. We reviewed three people's care plans and saw how medical advice had sought in order to best manage people's care.

Staff told us they had completed training in the Mental Capacity Act 2005 (MCA). The 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. We checked whether the service was working within the principles of the MCA. We saw that people were supported by staff to make decisions. Where appropriate family members or an independent advocate was involved to support decision making in the person's Best Interest.

We saw people made decisions about their meals and drinks. We inspected shortly after Christmas, and people told us about the Christmas meal and what they had enjoyed most. People told us they enjoyed the food they ate at the home.

People living at the home had a plan to address their health concerns. Regular multi-agency meetings were held to discuss and review people's care. We saw from people's care plans that people had accessed a number of support services such as GPs and hospital consultants. Staff we spoke with spoke knowledgeably about people's care. Staff understood people's health and how they needed support from professionals in order to keep them healthy.

Is the service caring?

Our findings

We last inspected the service in July 2016 we rated this section as Good. As this inspection we found the service remained Good.

People told us they liked the care staff supporting them. We saw people greet staff warmly and people chat with people and ask them about things that were important to them. People knew all the staff supporting them and knew which days staff would be at work. We saw one person felt reassured because they knew the person was going to be in work the following day also.

Staff could tell us about the people they supported and how they cared for them. We saw one person become anxious because they were unsure which activity they could participate in. We saw staff reassure they person and sit and work through an activity with them. This reassured the person and the person became calm. Staff could also tell us about people's individual care needs and how they supported people so that it reduced their anxiety. Three care plans we reviewed detailed how peoples care plans were developed and how where this was appropriate their families were involved.

People told us they could ask for help if they needed it. We saw people were supported to maintain their independence. We saw people were supported to help with tasks they enjoyed doing to maintain their independence. One person told us they liked to keep their bedroom tidy and helped to keep the activities in an organised manner.

Staff we spoke with told us they had received training on supporting people with dignity and respect. We saw staff had an understanding of people's cultural backgrounds and religious beliefs and respected these. Staff explained to us how they supported people sensitively with some of their personal care needs order in that the person was supported appropriately.

Is the service responsive?

Our findings

We last inspected the service in July 2016 we rated this section as Good. As this inspection we found the service remained Good.

People we spoke with told us they enjoyed taking part in activities. We saw people participating in activities such as crafts and puzzles. One person told us they liked going shopping in the local shopping centre and that they did this regularly. Another person told us they went out for meals sometimes and that they enjoyed doing this.

We reviewed people's care plans and saw that people's care had been reviewed in line with their changing needs. The registered manager regularly attended meetings with health specialists to discuss people's most up to date care needs. We saw in three people's care plan how their care was amended following the specialist advice. For example, medications were changed or people's level of support was amended.

People we spoke with told us about they were supported to maintain relationships with their families. We reviewed three people's care plans and saw how visits to people's families were arranged and supported by staff in order to help maintain visits to their family. Staff we spoke with understood people's family networks and who it was important the person kept in contact with.

People were encouraged to share their thoughts about the home and their care. People we spoke with told us they felt comfortable speaking to staff or the management team to share their concerns. During the inspection we saw one person speak with the registered manager about how they hadn't liked the food served at a recent event. We saw the registered manager speak with the person and assure them their opinion was valued and work with the person to identify an alternative that was acceptable to the person. We reviewed the complaints process at the home and saw they there was a system in place for dealing with and responding to complaints. Any learning from complaints were shared with staff for learning.

Is the service well-led?

Our findings

We last inspected the service in July 2016 we rated this section as Requires Improvement because we could not be assured by the quality assurance systems within the home. As this inspection we found the service had improved, and we therefore rated this question as Good.

People we spoke with knew and liked the registered manager. Two people told us they liked the registered manager. We saw people chat with the registered manager and ask after their family. The registered manager chatted with people and asked them about things that were important to them.

The management team spoke knowledgeably about people's care needs and about how they had helped develop their care needs as people's needs changed. They described how they worked with family members as appropriate to amend people's care to meet their needs and incorporate any religious or cultural values they may have.

Staff we spoke with spoke warmly about working at the home. Staff told us they enjoyed working at the home. Some of the staff had worked at the home for a number of years and told us they had worked there because they had enjoyed it. One staff member told us they enjoyed a good working relationship with the registered manager who they found approachable and easy to talk with. Staff reported that they could approach the registered manager and seek clarification on people's care if needed.

The management team shared with how they assured themselves that people received the appropriate level of care and support. The management team undertook regular checks of the service. We saw the management team had developed systems to assure themselves of the care being delivered at the home. We saw checks were carried out on the medicines people received, any accidents and incidents that took place as well as care plans. The registered manager also shared with us how they had updated care plans following multi-disciplinary meetings to discuss people's care.

The registered manager explained they had worked with stakeholders to develop people's care. They also told us they gained learning from the registered provider's other homes and shared information with staff. They told us about how they updated their knowledge so they could share their learning with staff. The registered manager told us about local training opportunities they had attended. The registered manager explained they had worked to develop the deputy manager's knowledge so that the deputy manager could eventually take over the running of the home.