Easy Living Care Limited

Barnhaven Residential Care Home

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
Barnhaven Residential Home provides accommodation for 17 people, including people living with dementia. There were 16 people living at the service at the time of the inspection.

People's experience of using this service and what we found
People had limited opportunities to follow interests and to take part in activities that were socially and culturally relevant to them. We have made a recommendation for the provider to seek advice and guidance on developing meaningful activities and occupation for people.

People were cared for by staff in a way that kept them safe and protected them from avoidable harm. Enough staff were available to respond to people's needs and requests in a timely way. Recruitment procedures ensured people were protected from unsuitable staff. People's medicines were safely managed, and they received their medicines as prescribed. Accidents and Incidents were investigated, and measures were taken to prevent re-occurrences. The premises were clean throughout, and staff followed infection control principles.

The service continued to be effective. People were supported by staff who were skilled, well trained and knowledgeable. People had access to health professionals when needed.
Their dietary needs were considered, and people enjoyed the food and the choices they were offered. The service had been adapted to consider people's needs.

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.

People received personalised care which reflected their needs and preferences. Staff were kind and caring. They supported people in a discreet and dignified way which maintained people's privacy. People were encouraged to make choices and remain independent.

The provider and registered manager monitored the quality and safety of the service and identified areas which could be improved. Quality assurance processes were well-established within the service and the registered manager and staff team promoted a positive and open culture.

Rating at last inspection - The last rating for this service was good (published 13 July 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 reinspection programme. If we receive any concerning information we may inspect sooner. This was a planned inspection based on the previous rating.

For more details, please see the full report which is on the CQC website at 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 effective?

Good

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good

The service was well-led.

Details are in our well-Led findings below.

Barnhaven Residential Care Home

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
This inspection took place on 28 and 31 January 2020 and was unannounced. One adult social care inspector completed the inspection.

Service and service type
Barnhaven 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 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 is registered with the CQC at another location. They divide their week between both services, spending about 20 hours a week at each.

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. This information helps support our inspections. We looked at notifications received from the service. A notification is the means by which providers tell us important information that affects the running of the service and the care people receive. We used all of this information to plan our inspection.

During the inspection-
We spoke with five people who used the service and two relatives about their experience of the care provided. We spoke with eight members of staff including the provider, registered manager, deputy manager, care workers and ancillary staff. 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 reviewed a range of records. This included three people's care records and multiple 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, including policies and procedures were reviewed.

After the inspection –
We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We contacted two professionals for feedback but did not receive a response.

Good

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 at Barnhaven. Comments included, "I am safe here. I know there is always someone on hand to help me" and "We couldn't be anything else but safe with all the staff here". Relatives were equally confident the service provided was safe. One said, "It is excellent here". Professionals confirmed they had not witnessed any poor practice during their visits to the service.
- Staff had received training to help them recognise safeguarding issues and all knew how to report any concerns, both internally and externally.
- The registered manager and provider were aware of their responsibility to report any safeguarding concerns. They ensured the Care Quality Commission (CQC) were informed of any concerns and they worked with the local authority safeguarding team when necessary.

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

- People were protected from avoidable harm, as risks posed were assessed and monitored. These included risks relating to falls, pressure damage, nutrition and recurring infections. Clear actions were in place for staff to follow to reduce risks. A visiting professional confirmed they did not see significant skin damage at the service and staff were alert to any risks.
- The provider had systems in place to check the safety of the premises. Fire safety measures were in place, including personal evacuation plans to make sure people could be safely evacuated in the case of an emergency. The provider was ensuring that recommendations from the fire risk assessment report were being actioned.
- Potential environmental health and safety hazards had been addressed. For example, the risk of burns or scalds from radiators or hot water. The service had achieved a rating of five, following an inspection by Environmental health offers. This showed safe standards were maintained in relation to food hygiene.
- The registered manager had a system for recording incidents and accidents, and these were reviewed regularly to improve practice. This helped ensure trends were identified and improvements made. Learning from incidents were shared with staff through regular team meetings and during staff supervision.

Staffing and recruitment

- There were enough staff on duty to meet people's needs and preferences. People said they did not have to wait when they needed assistance. Comments included. "When I ring the bell, it is usually answered quickly. I never wait for long". Professionals said staff were always available to assist them during their visits.
- The care and support delivered was unrushed. Staff took time to listen to people and to explain what was happening.
- The provider and registered manager reviewed staffing levels regularly and used the call bell response

times and feedback from people and staff to inform staffing levels.
● The provider continued to operate a robust recruitment process, which protected people from unsuitable staff.

Using medicines safely
● People's medicines were safely managed. People said they received their medicines as prescribed. One person said, "We get all our medication. They are strict with our tablets here".
● Staff responsible for medicines had been trained and their competency assessed, to ensure practice was safe.
● Medicines were stored securely and at the right temperature. There were clear processes in place to ensure medicines were ordered and disposed of safely.

Preventing and controlling infection
● People were kept safe from the risk of healthcare associated infections. The service was clean and odour free throughout. People, their relatives and professionals said it was always like this.
● Staff had received infection control training and used protection equipment to reduce the risk of infection.

Good

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

●The registered manager or deputy met with people to assess their needs prior to any admission to the service. This ensured people needs and expectations could be met. One person said, "This place met my expectations when I came. It suits me here. It is small, and they have more time for us."

● Good practice guidance was considered when assessing and delivering people's care. For example, when people had specific health conditions, such as nutritional or skin damage risks.

● People's needs continued to be assessed and monitored regularly and care plans were reviewed to reflect any changes.

Staff support: induction, training, skills and experience

● People spoke highly of the staff team. Comments from people included, "The staff are very nice to me" and "They do all they can to help us. I can't grumble about anything. The girls are very kind". Relatives and professionals were also positive about the staff team; describing them as caring, friendly, well trained and professionals.

● Staff received induction training and support when they started working at the service. On-going training was provided regularly to help staff support people effectively and safely.

● The staff team felt well supported by the registered manager and provider. They confirmed all core training was completed and that any additional training to help them with their role was provided. Staff received regular supervision to discuss their role and hear feedback about their performance.

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

● People continued to be supported to maintain a balanced diet which met their needs and preferences. They told us, "Very good food here. Always something to choose that I like" and "They feed us very well. The new cook is an excellent cake maker".

● The menu offered a wide and varied diet to people. There were two choices for the daily main meal; however, we saw that people were offered other alternatives. One person did not want either choice, so the chef made them a curry, which the person described as "delicious!"

● The chef was aware of people's individual needs and preferences and they catered for people who needed specific diets for health reasons.

● Mealtimes were a pleasant and unrushed, with staff on hand to support people discreetly where needed.

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

● The service worked well with health and social care professionals to provide timely care to people. Staff

were vigilant about any changes to people's health and ensured they received timely support from health professionals.
● Two health professionals described a good working relationship with the service. They confirmed referrals to them were appropriate and timely and that their recommendations were acted upon. One said, "Staff are pleasant and knowledgeable. They are helpful to us". They added, "They are always willing to provide equipment we recommend."
● Staff were keen to improve their skills to promote good health for people. Additional training was planned for staff to help them recognise and monitor any early sings of physical deterioration in people they cared for.

Adapting service, design, decoration to meet people's needs
● People lived in suitable and homely environment. There were several communal areas for people to use as well as their private bedrooms. Bedrooms had been personalised by people with their pictures, photos and some furniture.
● The provider had invested in two new assisted wet rooms since the last inspection, which had been completed to a high standard.
● There were some visual aids and signage in place to support people to find their way around the home independently.

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 when this is in their best interests and legally authorised under the MCA.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.
● The provider followed the requirements of the MCA. Individual mental capacity assessments had been completed to determine a person's ability to make specific decisions about their care and treatment.
● When a person was considered to lack capacity to make a specific decision, best interest decisions had been made with relatives and health and social care professionals.
● Staff supported people to make decisions and choices and sought their permission and consent before providing any support. People were consulted about their daily choices and routines; they were free to spend their day as they chose.
● Appropriate applications for DoLS had been made to the local authority where necessary. This was because people required continuous staff support and supervision to ensure their safety.

Good

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.

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

- People continued to receive a service that was caring and that ensured they were well treated. Several people said Barnhaven was a "happy home". One described it as a "little family". People praised the staff for their approach. Comments included, "The staff are very nice to me; running around getting us what we want"; "I like them all (staff). They have never up-set me" and "The staff are very good to me".
- Relatives and professionals echoed these comments. A relative said, "(Person) is very well looked after"; a professional said, "All the service users are quite happy here. They have never raised concerns with us".
- There were warm interactions between people and staff and staff were attentive to people's needs and moods. One person explained their condition caused them pain, they said, "Staff are gentle with me. They never rush. They are patient and kind." A community nurse explained how one person was reluctant to have a monitoring test but with staff's patience and support they agreed. Another professional descried how a person's mental health and mood had improved since moving to the service, which meant they were making progress with the rehabilitation. They added, "They are getting lots of attention here".

Respecting and promoting people's privacy, dignity and independence

- People said staff were always mindful of their privacy and dignity. Personal care was provided in private. People were dressed in their own style and attention was paid to personal care, which promoted people's self-esteem. One person explained how they enjoyed a manicure. They said, "We love a bit of glamour".
- The staff team supported people to maintain their independence and ensured they were assisted with any exercises suggested by other professionals. For example, one person was being seen by a physiotherapist to improve their mobility, who said, "The staff are really helpful".
- People had the necessary equipment to support their independence. Staff made sure people used their walking aids to promote their safety. Some people used adapted crockery at mealtimes so that they could enjoy their meals with minimum support.

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

- People were supported to make decisions and were able to express their views. Regular 'resident's meetings' were held to enable people to raise any suggestions or concerns and to hear about plans for the service. During the inspection a 'resident's meeting' was held and people were told about the new activities person that was joining the team. There was discussion about activities and menus.
- A key worker system was in place; each member of staff was responsible for ensuring people's needs were regularly reviewed with them; providing people with an opportunity to discuss how their care was delivered.

Good

Is the service responsive?

Our findings

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

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 needs were met through good organisation and delivery.

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

- People were largely unengaged during the inspection, as although there was an activities programme, the activities person had recently left the service. A new activities co-ordinator was due to start working part time following the inspection.
- We observed no activities or opportunities for people to receive stimulation or to engage in meaningful occupation during the first day of the inspection. The activity records showed people were engaged with social activities on average six to eight times a month. The activities programme was limited, consisting mainly of art and crafts; quizzes and bingo. External entertainers and singers were booked on a regular basis and occasional outings to the local town were organised.
- On the second day of the inspection, staff spontaneously got people involved in a balloon game. People who had been disengaged became bright and alert and the game resulted in lots of laugher and competition.

We recommend the provider seek advice and guidance on developing meaningful activities, particularly for those people living with dementia.

- People were able to maintain relationships that were important to them. They said their friends and relatives could visit them as they wished and there were no restrictions on when they could see their visitors. Visitors confirmed this and said they were given a warm welcome. One relative told us, "There's always a nice welcome. They are very open here. The care is excellent".

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

- People continued to receive personalised care from staff that knew them well. Care plans were personalised and discussed with people and their relatives, where appropriate. Information about people's individual care and support needs was recorded along with guidance for staff to follow to meet these.
- People said routines were flexible and that they could chose when to get up or go to bed; and how they spent their day. Some people preferred to stay in their room, and this was respected.
- Staff worked together well to deliver timely and effective care to people. They received handovers between each shift, which helped inform staff of any changes in people's needs.

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.
● People's communication needs had been identified, recorded and highlighted so that staff had access to relevant information about how people should be supported with these. For example, care records identified if a person had a sensory loss and what staff should do to improve communication.
● Staff supported people to access specialist services to assist in their communication needs such as opticians and audiologists.
● Where required, information in other formats, such as large print, would be provided.

Improving care quality in response to complaints or concerns
● The provider had a procedure for receiving and responding to complaints about the service. No complaints had been received by the service since the last inspection.
● People said they would feel confident talking to staff or the registered manager if they had a concern or wished to raise a complaint.
● The service had received several thank you cards and letters, expressing appreciation of the care and support provided. Comments included, "Thank you for all your kindness and devotion to looking after (person)…"; "Thank you so very much for everything you did and the fantastic care you gave to (person)" and "For your care thank you. I will never forget you all…"

End of life care and support
● The service provided end of life care and support to people if this was needed. No one was receiving end of life care at the time of the inspection. Systems were in place for people's wishes to be recorded and acted upon.
● Treatment Escalation Plans (TEP) were in place, which recorded important decisions about how individuals wanted to be treated if their health deteriorated. This meant people's preferences were known in advance, so they were not subjected to unwanted interventions or admission to hospital at the end of their life, unless this was their choice.
● Several relatives had written to the service following the death of a loved one, which demonstrated the level of compassion and care provided. One wrote, "Dear amazing staff at Barnhaven. We cannot begin to thank you for everything that you have done. Your warmth and friendship shines through in your interactions with residents. (Person) felt safe and cared for. The level of care you gave (person) and the family in the weeks before her passing was unbelievable…"

Good

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.

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

- There was a positive person-centred culture in the service and each person was treated as an individual. The registered manager and staff interacted with people in a positive manner and were focused on doing their best for the people they supported.
- People and their relatives spoke highly about the service; comments included, "It is really the best place around here. Always a lovely friendly atmosphere" and "It is really good here. I would recommend it to my friends". One person described the best thing about the service as, "The rapport with the carers and myself; it is so happy and free going".
- People were involved in decisions about their care and support. Where appropriate, families and healthcare professionals also had input.
- Staff felt valued and listened to and they received the training and support they needed in order to do their jobs well. Comments included, "It is a good place to work. Everyone gets on. We communicate very well" and "It a lovely home. It is homely and small, so we all know each other".

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

- The provider and registered manager provided strong supportive leadership and were respected and appreciated by the staff team. Comments included, "There is a relaxed and happy atmosphere here. The management are so supportive" and "We have confidence in the management team. Staff morale is really good".
- Staff were clear about their roles and responsibilities. We found the service was well-organised, with clear lines of responsibility and accountability.
- There were systems in place to monitor the service. The registered manager and provider had a good oversight of the daily running of the service.
- Regular quality and safety checks were completed within the service. These included audits in relation to medicines, health and safety and other key areas. Where concerns with quality or safety had been identified, action had been taken and improvements had been made.
- The provider and registered manager had a service improvement in place, to continually drive developments and improvements. Since the last inspection, significant investment had been made in installing two wet rooms; contact had been made with external training providers to continue to develop a comprehensive staff training programme.

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; Continuous learning and improving care

● The provider and registered manager were aware of their responsibilities regarding duty of candour. They promoted and encouraged candour through openness. Any issues raised were investigated and reported to the relevant agencies with outcomes recorded. The Care Quality Commission had been notified of events where necessary.

● Good relationships had been developed between the management team, staff and people using the service and their family members. People said they were able to speak with the registered manager at any time. One person said, "(The registered manager) is very nice, she always has time for a chat when we see her".

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

● People were given the opportunity to be involved in and influence the running of the service. Regular meetings were held with the people to discuss what they would like and any concerns they may have.

● Annual satisfaction surveys were also used to gather feedback from people using the service; relatives; professionals and staff. Feedback from the most recently completed surveys (Summer 2019) was extremely positive, showing people had confidence that the service was safe; effective; caring; responsive and well-led. Where suggestions for improvements had been made, an action plan had been developed to deliver improvements.

Working in partnership with others

● The staff worked with other services to ensure people received the care they required. Where specialist services were involved in providing support for people, the advice they had given had been included in care plans.

● External health professionals described communication as being very good and staff and the registered manager as being open and responsive. One said, "This is one of the best services we visit". Another said, "I have a good impression of this place. Always a nice atmosphere. Staff are calm and knowledgeable".