

Care UK Community Partnerships Ltd

Brook Court

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

Summary of findings

Overall summary

About the service

Brook Court is a residential care home providing personal and nursing care to up to 67 younger and older people who may also live with dementia, physical or mental health needs, and learning disabilities. Accommodation is across three separate floors. One floor specialises in providing care to people living with dementia. At the time of the inspection there were 63 people living at the home.

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

People received exceptional care which improved their wellbeing from staff who considered and used their knowledge of what mattered to people, to provide individualised care. People knew their lives were important as staff understood how to appreciate their histories and celebrated their unique life experiences. Strong bonds had developed between people and the staff supporting them and relatives told us staff's kindness also extended to them.

Staff showed commitment to supporting people and spoke with a high degree of warmth about the people they cared for. People were empowered to make their own decisions about the care they wanted, and their relatives were consulted, where people wished for this. Where people needed extra support to make decisions, this was provided by staff who knew people and their preferences well. People were treated with respect and staff were proactive in supporting people's right to independence and privacy.

People were provided with personalised care and had a wide range of opportunities to do things they enjoyed, based on their preferences. Links with the local community provided people with activities and events, and opportunities to develop meaningful relationships with others. People's communication needs were identified, and assistance was provided to enable people to express themselves in their preferred way. Care plans provided information and guidance for staff on people's care and support needs, and how they liked assistance to be carried out. Systems were in place to take learning from any concerns or complaints and people and relatives were confident staff would address these. Staff were supported to provide good care at the end of people's lives.

Risks to people had been assessed before they moved to Brook Court and staff understood how to keep people safe. There were enough staff available to meet people's needs. Medicines were managed safely by staff who had received appropriate training. The home was clean and well maintained.

Staff had been provided with training and developed skills which linked to the needs of the people they cared for. People enjoyed their mealtime experiences, which reflected their choices, and people were provided the assistance they required so they would have enough to eat and drink to remain well. People saw other health and social care professional promptly when needed. 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 and relatives told us the home was managed well and the staff team were motivated to provide good care. The provider, registered manager and senior team carried out quality checks to assure themselves that care was being carried out safely and in line with best practice guidelines, and to ensure people enjoyed living at the home.

Rating at last inspection

The last rating for this service was Good, (published 9 June 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor intelligence we receive about the service until we return to visit as per our inspection programme. If any concerning information is received, we may inspect sooner.

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?

Outstanding ☆

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.

Brook Court

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 was undertaken by one inspector and an assistant inspector.

Service and service type

Brook Court 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.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

The first day of the inspection was unannounced. We announced our intention to return to complete the inspection on the second day.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. We used all of this information to plan our inspection. The provider was asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. Owing to changes in how we requested this to be returned, this was received after the planning for this inspection had taken place.

During the inspection

We spent time with people to see how they were cared for. 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 spoke with eight people who lived at the home and four relatives about their experience of the care provided. We spoke with 16 staff members including the registered manager, the deputy manager, four nursing staff, five care staff, two activities staff members, one catering staff member, a customer relationship manager and a member of the domestic staff. In addition, we spoke with a visiting health and social care professional who regularly visited the home.

We reviewed a range of records. This included six people's care records and multiple medication records. We saw records relating to the management of the home. These included minutes of meetings with staff and checks undertaken by the registered manager senior staff and provider on the safety and quality of care, such as audits and surveys relating to the quality of care. We also saw concerns and any accidents and incidents which may occur, and systems used to manage complaints. In addition, we reviewed the compliments which had been received by staff, records of interesting things people liked to do and copies of the Brook Court newsletter.

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 continued to be kept safe by the staff who cared for them. Relatives said their family members were kept safe from harm.
- Staff demonstrated a good understanding of different types of abuse and what approach they would take in the event of any concerns.
- The registered manager understood what action was required to protect people from abuse, should this occur.

Assessing risk, safety monitoring and management

- People said staff knew their individual risks and supported them to reduce the likelihood of harm or injury.
- Staff gave us examples of actions they took to promote people's safety. This included ensuring people had the equipment they needed to remain as safe as possible and monitoring people's health.
- Staff worked with other health and social care professionals to ensure the best way to manage people's safety was established. This included reviewing people's medicines, to ensure possible links between medicines and falls were addressed. Staff also acted on advice from speech and language specialists, to reduce the likelihood of people choking.
- The provider's risk assessments gave staff the information they needed to deliver people's care safely.
- Staff regularly communicated about people's safety needs and checked they had the support they wanted to stay as safe as possible.

Staffing and recruitment

- People told us there were sufficient staff to care for them, at the times they wanted. One person said, "I feel safe and happy here. The staff are so energetic and helpful, and there are enough of them."
- The provider was committed to ensuring people did not experience delays in their care and supported this approach. Senior staff explained they recognised people's needs fluctuated widely from day to day. Staff gave us examples of when staffing had been increased, in response to people's changing mobility support needs.
- The registered manager checked the suitability of staff before they commenced their employment.

Using medicines safely

- People told us they could rely on staff supporting them to have the medicines they needed to remain well. If people needed additional medicines staff supported them to have these safely.
- The provider was following safe protocols for the receipt and administration and disposal of medicines.
- The registered manager regularly checked people received their medicines as prescribed.

Preventing and controlling infection

- Staff had been supported to understand the importance of maintaining good standards of cleanliness throughout the home. The helped to ensure people, visitor and staff were protected from the risk of infections.
- Staff had access to the range of equipment they needed to promote good hygiene within the home, such as gloves, and to reduce the likelihood of the spread of infections.
- Housekeeping staff told us they had the resources they needed to promote good infection control and to ensure the cleanliness at the home met people's needs.

Learning lessons when things go wrong

- Systems were in place to take any learning from incidents and accidents, such as people experiencing falls. The registered manager reviewed these to see if any patterns were emerging, or any preventative measures could be taken to support people further.

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

- People's needs were assessed before they moved into the home to ensure these could be met. People and their relatives told us their views had been considered.
- Staff gave us examples of additional training they received to make sure they were equipped with the right skills and knowledge before people came to live at Brook Court.
- People's assessments considered their physical needs, emotional histories and their care plans were based on best practice guidelines for staff to follow, for example, in relation to oral care.

Staff support: induction, training, skills and experience

- Staff received regular appraisals and supervisions and were supported to maintain their professional registrations.
- People and their relatives told us staff knew how to provide care.
- Staff told us the senior team were committed to providing them with opportunities to develop their skills and knowledge. One domestic staff member told us, "I feel the training here is very good, and I get to do it all, including the dementia [training]. This has helped me to understand people and be confident."
- New staff were supported to understand how to care for people through an induction programme. One staff member said initially working alongside more experienced staff had quickly helped them to provide good care to people.
- Systems were in place to ensure that staff training was regularly refreshed to ensure staff knowledge was current.

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

- People enjoyed the wide range of meals available, which reflected their choicest. One person said, "There is so much food, if you leave anything [staff] ask you if you fancy something different. If you do fancy anything different, the kitchen [staff] make it for you."
- People were encouraged to drink enough, and people enjoyed access to a café serving a range of drinks in a sociable setting.
- Staff provided people with the individual support they needed to have enough to eat and drink to remain well.

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

- People said they could rely on staff to promptly arrange for them to see other health and social care

professionals, such as dieticians and speech and language specialists.

- People had access to a GP and advanced nurse practitioner who visited the home regularly. A visiting health and social care professional told us if staff had any concerns for people's health they sought their guidance in a timely way and followed the advice given.
- People were supported to go to health appointments outside the home, such as hospital appointments.
- A practitioner of alternative therapies visited the home regularly to provide support for people living with increased anxiety. This helped to ensure people would enjoy the best well-being possible.

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

- People spent their time privately, or in more social or quieter areas, such as lounges, gardens or the café, as they preferred.
- The home was well maintained and adaptations to the home had been carried out in keeping with the overall environment. There was a specific garden area available which had focused on the needs of people living with dementia.
- People were supported to find their way round the home through clear signage, with the use of pictures, in addition to the written word.

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.

- Staff had received training and understood how the MCA effected how they cared for people. Staff gave us examples of how they routinely sought people's agreement to care, and how they supported people who initially declined, so their rights and choices were respected.
- We found the MCA and associated Deprivation of Liberty Safeguards were applied in the least restrictive way and authorisation correctly obtained.

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 now improved to Outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- People had developed meaningful and caring relationships with staff who they described as very considerate and interested in their lives.
- These relationships had made a real difference to people's lives. One staff member had spent their own time researching how they could support a person to re-connect with their past and enjoy a day tailored to celebrating their professional achievements. The person had thoroughly enjoyed the day and had photographs to treasure the memory. The person's relative said how much the person had enjoyed this and said, "It was marvellous and a very caring thing to do." The staff member said, "I love the residents, the staff and the interaction between them, and it makes it a joy to come into work. [Person's name] had an awesome day."
- People were asked what mattered to them and staff were exceptional at making sure each person experienced high levels of contentment. This was especially evident in the examples we saw of staff supporting all people to keep in touch with their relatives. One person explained staff had understood how important it was for their wellbeing to be supported to have meaningful and immediate contact with their family members. The person explained how all staff teams had worked together and gone beyond their expectations to ensure their wishes were fulfilled. The person told us all staff were highly motivated to work together to provide exceptional care, and because of this they said, "It feels very much my home. It's most certainly a good place to [live], and I would recommend it." This level of commitment was provided to all people living at Brook Court. Staff helped other people to successfully use information technology to keep in touch with relatives who lived a long way from the home. Staff also promoted the use of shared information technology, so all people could continue to have meaningful and regular contact with their relatives. The provider has purchased software which enables a relative to log in remotely to their website and access the details of their family member's activities. This provides relatives who may not be able to visit regularly with reassurance about what their family members are doing. One relative said how much they valued being kept up to date with their family member's life and explained how this sparked conversations when they visited and brought back recent pleasant memories of life at Brook Court for their family member.
- People's happiness and serenity were staff's first priority and every staff member understood people as individuals. People were embraced and comforted by any staff member when they wanted reassurance, help or a kind word. This included office support staff offering to take people to the café for a cup of coffee. We saw staff used their knowledge of how people liked to be reassured, were able to say the right words to comfort people and to offer a reassuring hug.
- Support staff were good at improving people's outlook, for example reminding people about things they had to look forward to during the day. Staff knowledge of people meant they knew when people benefitted

from further assurance and offered to write this down for people. This approach helped people, and they quickly became much more settled.

- People experienced greatly improved physical and mental health outcomes as the management team had an in-depth knowledge of specialist support available and were committed to ensuring staff were guided to provide the right care for everyone living at Brook Court. No one was overlooked. We saw examples of how this dedicated, informed and caring approach had enabled people to enjoy their current life and regain elements of independence, including for people living with extremely complex care needs
- Relatives gave us examples of subtle and sensitive care provided by staff. One relative told us they regularly visited their family member at the same time each day and told us staff had picked up on them not arriving at their usual time. Staff had taken the trouble to contact them, as they knew this might be a concern for their family member, and to make sure they were alright. The relative said, "It's lovely that caring approach is there."
- Staff used their comprehensive understanding of people and focused on them as individuals when caring for them. Staff clearly recognised people's differing values and needs. We saw examples showing how staff worked exceptionally well with people to fully understand their needs and to ensure people were supported appropriately, so their well-being was enhanced. The whole staff team were committed to providing a welcoming and inclusive environment where diverse lifestyles were celebrated, and people were empowered to be themselves. People and their relatives felt valued and integrated into life at Brook Court because of this approach.
- Staff treasured the relationships people had built with them. A staff member told us about one person they were caring for and said, "The best thing is getting to know the individual person. It gives you a warm, fuzzy feeling, knowing [person's name] has smiled today."

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

- People decided what care they wanted and told us their views were listened to. People told us they were encouraged to let staff know what care and support they would like at regular residents' meetings, and during one-to-one discussions with staff. People had decided they would like a seaside themed garden. Relatives had also been involved in supporting this, with one relative making bespoke furniture and items to reflect the seaside theme. We saw photographs showing how much people enjoyed spending time in the themed garden, which helped people to connect with their past and make new memories with their relatives.
- There were many examples showing how people's decisions about their care were listened to. One person had decided they wanted to take a trip on the Severn Valley railway with their family, as they had so many happy memories associated with this. The person needed extra care from staff to do this and chose which staff member they would like to accompany them. The person's relative told us their family member cherished their trip. The relative said, "[Staff member's name] gave their day off up to come with us. The staff here are so good. They have become dear friends and I feel fully supported by them."
- Staff understood the positive impact involving people in planning their own care. One staff member explained some people had decided to update their memory boxes, because they had been supported to create new special memories while living at the Brook Court.

Respecting and promoting people's privacy, dignity and independence

- People told us there was an embedded approach by staff which ensured they were treated in a sensitive and respectful way and their rights to dignity and independence were promoted.
- Staff enhanced people's well-being by applying the guidance and values demonstrated by senior staff, which focused on empowering people by involving them in choices around their independence and celebrating what they could do on their own. The registered manager said they were proud staff consistently applied the values which promoted this and told us, "I want [people] to have the best life, for them to have

what they want, not what we think they want."

- Staff gave us examples of additional work they had proactively done with other organisations, so the dignity of people living with complex care needs would be enhanced. This included sensitively finding out the reason for changes in people's continence needs, and working with other organisations, to ensure people's needs were met and their dignity promoted.

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 supported to enjoy a wide range of activities and told us they had made friends with other people living at Brook Court and told us the home was a sociable place to live.
- People chatted together enthusiastically about the activities which were provided, which included singing in their own choir, which was performed at the town hall, movie screenings, craft sessions, musical entertainment, poetry readings and talent contests. One person told us how much they had enjoyed their day and said, "There is always something going on. I have made Christmas cards today."
- Staff recognised people enjoyed different activities and also provided one-to-one support for people who preferred to spend time more quietly in their rooms. Staff also supported people living with dementia to enjoy using information technology activities, which met their sensory needs and through dementia friendly concerts.
- Staff gave us examples of work they had done with other organisations, such as local schools and youth groups, which people enjoyed participating in.
- People had access to a range of interesting things to do such as jigsaws, number puzzles and newspapers to read.
- People told us their family and friends were encouraged to visit at any time. Several people told us how much they enjoyed spending time with Honey, the Brook Court dog, and how comforting and pleasurable it was to have a pet at the home.
- People chose for their relatives to keep in touch with their day to day lives and to find out how they were doing, through secure information technology systems. This was particularly useful for relatives who lived some distance from the home and helped to maintain family links.

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

- People's care plans reflected their care preferences, risks and personal histories and gave staff the information they needed to support people as people wished. One person said this helped to ensure they had the care they needed and did not feel isolated.
- One relative told us because they had been encouraged to be involved in planning and reviewing their family member's planned care, "[Family member's name] is looked after properly."
- Staff gave us examples showing how they checked people's care preferences over time, so they could be assured people were getting the care they wanted.
- Staff told us their views were considered as people's care needs changed and plans for their care plans and risk assessments updated to reflect their knowledge of 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 communication needs had been assessed and plans put in place to support people, so their needs would be met. For example, people were supported to use talking newspapers and information technology to promote effective communication.
- A range of information was available in alternative formats such as pictorial signage and large print to support people.
- People's communication needs were regularly reviewed as their needs changed.

Improving care quality in response to complaints or concerns

- People and relatives knew how to raise any concerns or complaints and were confident these would be listened to.
- Systems were in place to manage to any complaints or concerns and to take learning from these.

End of life care and support

- Staff used their knowledge of people's spiritual and care needs when providing end of life care. The registered manager was reviewing the appropriateness of introducing a separate end of life care plan, so they could be further assured people's preferences were known. This would include in the event of people's sudden death.
- People's relatives had complimented staff for the quality of care provided to their family members at the end of their lives.
- Staff were supported to provide good care to people at the end of their lives and gave us examples showing how people and their relatives were sensitively assisted at this key stage of care. Staff were supported to attend funerals to mark their respect for the people they cared for, in line with relative's wishes.

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

- People were complimentary about the way the home was led, and how staff were motivated to concentrate on people's individual care requirements through working together to support each other. One person explained how there a willingness from all levels of staff had been to make the changes they wanted to their room.
- Relatives told us the home was managed well, and senior staff consistently made time to speak to them about their family member's individual care. One relative told us because of this, "The care is very good. They look after [family member's name] very well."
- Staff were supported to provide good care and told us Brook Court was a good place to work because staff were encouraged to meet people's needs. One staff member told us, "[Registered manager's name] wants people to have a home from home and to be happy." Another staff member said, "[Registered manager's name] is amazing. It could be hard to keep up, but [registered manager's name] does this in way that we can achieve things for [people]."

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

- People and their relatives told us they saw the registered manager and senior staff regularly and had opportunities to be involved in decisions about the way the home was run. This included consultation through surveys, residents' and relatives' meetings and one to one discussion with staff.
 - Staff told us they were encouraged to make suggestions for improving the care provided to people further, and their views were listened to.
- Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 registered manager understood what information needed to be notified to CQC and their responsibilities to be open in the event of something going wrong with people's care.
 - The provider supported the registered manager to ensure people received a good quality of care and risks were managed appropriately. The registered manager and senior staff checked the safety and cleanliness of the home and ensured people's medicines were administered as prescribed, to reduce risks to their safety.
 - Staff knew how they were expected to care for people through regular one-to-one and group meetings with senior staff. The registered manager and senior staff also checked how staff supported people, so they could be assured people received good care and provided guidance to staff as required.

Continuous learning and improving care; Working in partnership with others

- The registered manager, senior staff and provider checked the quality and safety of the care provided and people's experience of living at Brook Court..
- The registered manager planned to further develop their checks to ensure clinical care provided was consistently recorded.
- The provider undertook visits to the home and regularly monitored information about the safety and quality of the care provided. Where any actions were identified, these were addressed.
- The provider supported staff to access best practice standards, including in relation to dementia care, so people's needs would be met.
- The registered manager and staff gave us examples of work they did with other health and social care professionals and the local community. For example, staff had worked with a local school to raise awareness of the needs of people living with dementia. This had increased young people's confidence and provided opportunities for people living at Brook Court to enjoy spending time with young people.
- Staff were encouraged to make suggestions for improving people's care at regular meetings and told us senior staff and the registered manager welcomed their views on improving the care provided to people.