

Barchester Healthcare Homes Limited

Badgeworth Court Care Centre

Inspection report

Badgeworth
Cheltenham
Gloucestershire
GL51 4UL

Tel: 01452715015
Website: www.barchester.com

Date of inspection visit:
02 May 2019
07 May 2019

Date of publication:
25 June 2019

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:

Badgeworth Court is a residential care home which provides personal and nursing care to 60 older people and people living with dementia. At the time of the inspection 45 people were receiving care. Badgeworth Court is located in Badgeworth, near to the town of Cheltenham. The home is set across three units, Norwood, De Clare and Selwyn Payne. The home is set in well presented gardens which people could access. There was a range of communal areas that people and their relatives could use.

People's experience of using this service:

- People and their relatives felt the service had dramatically improved since the registered manager came into post in 2018. They felt the registered manager and deputy manager were incredibly approachable, open and transparent. People and their relatives were hoping for continued stability in the day to day management of the home.
- People and their relatives felt Badgeworth Court was a safe and homely place. Staff understood the risks to people and the support they required to ensure their health and wellbeing.
- People had access to a range of activities and events which they enjoyed, including music and movement. The registered manager was highly motivated in making and developing links local community groups which could support and enhance people's contacts in the wider community.
- The registered manager and provider had clear plans to increase the stimulation and support people living with dementia received. The provider had provided additional support to the service to achieve this goal.
- People's dignity and rights were protected. People were supported by caring and compassionate staff.
- Care and nursing staff spoke positively about the service and felt they were supported and had access to all the training and professional development they required.
- The provider and registered manager had a clear plan and vision for Badgeworth Court. Staff were aware of this vision and were focused on providing high quality, person centred care.
- People's needs were met by sufficient numbers of staff were available to ensure people's safety and wellbeing.
- Staff had a good understanding of people's needs. People's healthcare and wellbeing needs were being met. People were supported with their dietary needs, with some people having access to their own personal menus. The home had a head chef who was aware of people's dietary needs.
- Staff understood their responsibility to report concerns and poor practices. The registered manager followed the duty of candour and ensured people and their relatives, as well as appropriate agencies were informed of any concerns.

The registered manager and provider had robust systems to monitor and improve the quality of service they provided at Badgeworth Court. The registered manager took every available opportunity to learn from incidents, accidents and complaints.

Rating at last inspection:

Requires Improvement (The last report was published 03 May 2018). We found four breaches of the Health and Social Care Act in relation to the requirements of person-centred care, safe care and treatment, good governance and fit & proper persons employed. Following our last inspection, we met with the provider to discuss the improvements they planned to make to Badgeworth Court. The provider sent us regular updates on their action plans.

Why we inspected:

This was a planned inspection based on the previous rating. At this inspection we found that the service had improved. We rated the service as "Good". We also followed up on progress against agreed action plans to address the breaches in regulation we found at our previous inspection in March 2018. Previous CQC ratings and the time since the last inspection were also taken into consideration.

Follow up:

We will continue to monitor this service and plan to inspect in line with our inspection schedule for those services rated as Good.

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.

Badgeworth Court Care Centre

Detailed findings

Background to this inspection

The inspection:

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked 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.

Inspection team:

The inspection team consisted of one inspector and an Expert by Experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. In this case, caring for someone who lived with dementia.

Service and service type:

Badgeworth Court provides accommodation for people who need personal or nursing care. The service also provides dementia care.

Notice of inspection:

This inspection took place on the 2 and 7 May 2019 and was unannounced.

What we did:

We used information the provider sent us in the Provider Information Return (PIR). 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 looked at information we held about the service including notifications they had made to us about important events.

We visited Badgeworth Court and spoke with six people and 10 people's relatives. We also spoke with 13 members of staff. This included five members of care staff, two nurses, an activity co-ordinator, a domestic, a maintenance worker, the home's chef, the deputy manager, registered manager and two representatives of the provider. We received feedback from a local authority commissioner and two healthcare professionals who visited the service.

We reviewed seven people's care records, policies and procedures, records relating to the management of the service including audits and quality assurance reports, records of accidents, incidents and complaints, staff training and supervision records and systems the provider maintained in relation to recruitment.

Is the service safe?

Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

We followed up on the concerns found during our previous inspection on 8, 9 and 12 March 2018 when we inspected this key question. At our March 2018 inspection we found that people did not always receive safe care and treatment. Additionally the provider had not always ensured themselves that staff were of good character before they started to work. Following our last inspection we met with the provider to discuss the improvements they planned to make to Badgeworth Court. The provider sent us regular updates on their action plans.

At this inspection we found improvements had been made by the service to meet the regulations. People received safe care and treatment and the provider had ensured robust recruitment systems were in place and followed.

Systems and processes to safeguard people from the risk of abuse; learning lessons when things go wrong.

- People felt safe living at Badgeworth Court. Comments included: "Yes, I feel safe. It's the atmosphere that is so calm and I feel secure" and "I feel safe. I can just sit calmly and there are no problems." People's relatives told us they had piece of mind that their loved ones were safe. One relative told us, "She is safe because they take care of her well. She is clean, there's no sign of any sort of abuse or bruises, she's content."
- Staff knew what action to take if they suspected abuse, poor practice or neglect. For example, one person had made an allegation of poor care and treatment, staff reported this concern to the registered manager who took immediate action to ensure people were safe.
- The registered manager reported and shared appropriate information with the provider and relevant agencies to safeguard people. The registered manager ensured people and their relatives were informed of any concerns and took every opportunity to learn from any concerns.
- Incidents and accidents were reported, recorded and investigated to find out why things had gone wrong and ensure appropriate action was taken to keep people safe. Any learnings identified through investigations was shared with staff and used to prevent similar incidents occurring in future. Detailed audits carried out by the registered manager had identified trends in when accidents had occurred. For example, they had identified accidents had increased during handover times. Feedback was provided to all staff and staff were informed they needed to be more proactive in responding to call bells during handover. Staff told us they now had a new system with a member of staff taking ownership of responding to bells at these times.
- The registered manager ensured lessons had been learnt from an influenza outbreak in the service. They worked alongside the Public Health England and followed recognised best practice. Following the outbreak, they discussed lessons that could be learnt with staff, which included discussing the actions they took and the importance of hand washing and disinfecting. Posters in relation to hand washing were placed around the service to promote awareness.

Assessing risk, safety monitoring and management.

- People's risks were identified and assessed by nurses. Nurses completed risk assessments in relation to people's health and wellbeing and actions needed to be taken to reduce these risks. One person was at risk of developing pressure ulcers. Staff had clear guidance on how often the person required to be supported with repositioning to protect their skin integrity. Additionally, the person was cared for on pressure relieving equipment and was supported with the application of topical cream to maintain their skin integrity. Staff recorded when they had assisted the person with repositioning. Nurses monitored these records to ensure people were supported to reposition as per their care plan.
- Risks assessments had been completed in relation to people's mobility needs, falls and medicines management. Each person had a detailed mobility risk assessment which included guidelines provided by healthcare professionals. One person had clear guidance regarding specialist seating equipment, including their seating tolerance. Care and nursing staff ensured the equipment was used appropriately.
- One person had been assessed at being at increased risk of falls. Nurses had identified they were prescribed medicines which increased their risk of falls. The service had implemented a falls diary to identify any trends, the service implemented a sensor mat which alerted staff when the person got up from their bedroom. The person's falls diary indicated these changes had reduced the number of falls.
- Staff had received training on infection control, which gave them the knowledge and skills to provide care in a hygienic and safe way, reducing the risk of contamination and spread of infection.
- People could be assured the building and equipment used to assist people with their mobility was safe and routinely service and maintained. The registered manager and provider had systems in place to ensure any health and safety and maintenance issues were addressed.
- Staff were provided with current information relevant to their work. For example, staff had recently been given information regarding sepsis and the symptoms they needed to be aware of when assisting people.

Staffing and recruitment.

- There were enough staff, at any given time, to meet people's needs. The registered manager spoke proudly that the service had not used agency staff since August 2018. The service used bank (staff employed by the provider to work occasionally) when dealing with unforeseen absences.
- The registered manager had a clear plan of the number of staff required to be deployed within each unit of the home to ensure received the care and support they required. Staff received access to their rota's six to eight weeks in advance to enable them to plan their personal arrangements.
- People and their relatives told us there was enough staff to meet their needs and their requests for assistance were responded to promptly. Comments included: "I think there are enough, I don't seem to be suffering from a lack of them at the moment"; "There are enough staff most of the time. If there is a shortage, I've noticed that off duty staff will come in and help out." and "Sometimes they come very quickly, and they are very good at night. They do their best."
- Staff told us that there were enough staff to meet people's needs. Comments included: "We always have enough staff"; "We have enough staff and team work here is really great" and "We always ensure there are enough staff, if there are absences we ensure they're covered."
- Staff recruitment systems and records showed pre-employment checks were completed to help protect people from those who may not be suitable to work with them. All staff worked a three month probationary period and disciplinary action was taken, when needed, to ensure expected standards were met.

People's medicines were safely and effectively managed to ensure they were available when people required them.

- Staff received training to be able to administer people's prescribed medicines people with their medicines. The registered manager and provider assessed the competency of nursing and care staff regarding medicines to ensure they had the relevant skills.
- People spoke positively about the support they received with their prescribed medicines. Comments

included: "They are very good with the medicines, I have a list of what I take" and "I've taken the same medication for 30 years so I know what it is." One relative told us, "From what I see, the medicines are managed safely. There was one small issue about the amount of liquid that should be given with the pills and I raised it and I know that that is now being sorted out by the manager. It's been referred to a medication specialist."

- People were supported to take their medicines in a calm and patient manner. People were given time to take their medicines. Nurses ensured people received their medicines when required or if possible at a time suitable to their preferences.
- Specific protocols were in place for medicines which were prescribed as to be administered 'when required'. This provided staff with information to know when and how to provide people's pain relief and medicines for distress and anxiety.

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.

Good: People's outcomes were consistently good, and feedback confirmed this.

We followed up on the concerns found during our previous inspection on 8, 9 and 12 March 2018 when we inspected this key question at our March 2018 inspection we found people were at risk of not receiving effective care and treatment as records regarding their healthcare needs had not been recorded. Following our last inspection, we met with the provider to discuss the improvements they planned to make to Badgeworth Court. The provider sent us regular updates on their action plans.

At this inspection we found improvements had been made by the service to meet the regulation. People received safe care and treatment which was effective and followed recognised best practice.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law:

- People's needs were fully assessed with ongoing involvement of their close relatives and where necessary based on their assessed needs from healthcare professionals.
- People had access to information to help them understand their care and treatment and promote a good quality of life with positive outcomes for people.
- Universally recognised assessment tools were used to assess people's needs, including their mobility needs and the use of specific equipment. This ensured staff delivered evidence based-practice and followed recognised and approved national guidance.
- People's independence was promoted through the use of technology. This included assistive technology which alerted staff when people who were at risk of falls were walking.

Staff support: induction, training, skills and experience.

- People and their relatives spoke positively about the care and nursing staff that supported them or their relatives and felt they had the skills to meet their needs. Comments included: "They know what they are doing but if they don't, they go and get someone else"; "I think it's evident because there is much more training now than there used to be" and "They picked up that Citalopram can cause kidney problems which I thought was very good – I certainly didn't know about that."
- Staff spoke positively about the registered manager and provider. They felt they had the training and support they required to meet people's needs. Staff comments included: "Absolutely, I have everything I need"; "There is lots of training, they are always encouraging us" and "I feel I have all the training and skills I require."
- Staff had opportunities for professional development, including completing qualifications in health and social care. One member of staff told us, "I was encouraged and supported to do a dementia training level 3 diploma. I've trained staff regarding how you deal with people living with dementia. (Registered manager) is always supportive"
- The registered manager and provider had a detailed overview of staff training needs and when staff

required additional training. Since the registered manager had been in post staff had been supported to carry out training to enable them to meet people's needs. The registered manager had engaged with healthcare professionals and a local care home support team to provide training to their staff team.

- Staff spoke positively of the support they had at induction, including shadowing experienced care staff. One member of staff told us, "There is always someone to support. I was given lots of time to shadow staff and get to know the residents. I've always felt comfortable."
- Staff had access to supervision and support, including regularly one to one meetings with their line manager. One member of staff spoke positively about the support they received from a care co-ordinator and the manager in relation to their employment contract. Staff told us the care co-ordinators were supportive and approachable to discuss any concerns or needs. Staff also had access to a confidential employee counselling and support to discuss their own wellbeing concerns or needs.
- Any concerns around staff performance identified through concerns or observations were followed up in supervision meetings to enable the registered manager and staff member to make a plan of action.

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

- People spoke positively about the food they received. Comments included: "The food is good – I don't think you could better it. There is plenty of variety and it's home cooked"; "It's excellent and there is plenty of it. There's a choice and you can choose to eat in the dining room or anywhere you want" and "The food is very good. There's plenty of it and lots of variety."
- The support people needed with their dietary needs was recorded in their care plans, including any specific dietary arrangements, including textured diets. The home's chef and staff were aware of people who required a textured diet, including pureed, fork mashable or thickened fluids. Where Speech and Language Therapist (SALT) guidance had been sought this was clearly recorded in people's care plans. We observed people were supported in accordance with this guidance.
- People's dietary risks were known. For example, one person had been assessed as being at risk of choking as they would store food in their mouth. Care and nursing staff had clear guidance to follow to ensure the risk to the person was reduced. One relative told us, "My relative needs help with eating, she has a pureed diet. It's always nicely presented."
- Where people were at risk of malnutrition this was discussed during nutrition meetings held by monthly with the registered manager, chef and unit leaders. These meetings discussed people who had been assessed at risk and required additional support including snacks and fortified food. These meetings were used to assess the effectiveness of the support people received to ensure their health and wellbeing was maintained.
- People's dietary preferences were recognised and met. The chef told us of two people living at Badgeworth Court who had their own special menus which they could choose from daily. They told us, "We have a menu of 24 dishes they can choose every day." Due to this the chef had received recognition of the support they provided and was crowned as vegetarian chef of the year during V for Life's 2018 awards for Excellence in Vegetarian and Vegan Care catering.

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

- Care and nursing staff worked alongside GP's and other healthcare professionals to meet people's needs and respond to any changes in their needs. Staff made referrals to healthcare professionals if they felt someone required specialist input. One healthcare professional told us, "I think the service is really good."
- Where advice had been sought this informed people's care plans to enable staff to follow this guidance to meet people's needs. For example, one person was assisted with their nutritional needs through a Percutaneous Endoscopic Gastrostomy Tube, (a means of assisting people with their nutritional when oral intake is not always possible or recommended). The service had support from the Enteral feeding team, which detailed the regime they needed to follow as well as caring for the person and the PEG to prevent

infections and preventable harm.

- The service sought advice when reviewing people's mobility equipment. They worked alongside occupational therapists and followed recognised best practice guidance to ensure people were assisted to mobilise safely and remain independent.

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.

- We checked whether the service was working within the principles of the MCA. Care and nursing staff we spoke with understood that people must be supported to make independent decisions where it was possible for them to do so. One member of staff told us, "We give people a choice. If it's meals, then show them the plates."
- People and their relatives told us their choices or their relatives' choices were respected. Comments included: "Staff always explain what they are doing – they have to these days, don't they? They don't really ask permission if they are just doing an everyday thing for me, but if it was something new, they would ask me if I was alright about it. They always ask before they cream my legs. I can more or less do what I choose" and "The staff are very kind and always talk to her when they are helping her."
- Where people were living with dementia, staff supported them to make an informed choice, by providing clear options. One member of staff told us how they supported one person to make simple decisions, such as what they would like to eat, drink or wear. They said "Some people struggle with a choice. So, I give them two options. If it's clothes I show them, with support they make the choice."
- 30 people were being deprived of their liberty under the Deprivation of Liberty Safeguards (DoLS). People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the DoLS. We checked and assured ourselves the service was following the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- People's legal representatives (those who held Lasting Power of Attorney for Finances and/or for Health and Welfare) were known to the organisation and they were included in decisions made about the person's care. One relative told us, "My relative can't make decisions but I am actively involved on their behalf."

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

- The provider and registered manager had a plan of refurbishment for Badgeworth Court. The registered manager had taken steps to improve the environment for people living with dementia. This included painting corridors different colours.
- People had the freedom to move around their home, or units (depending on their individual capacity). Where appropriate, people living on the ground floor could orientate themselves around the home and access facilities including a range of communal lounges and dining rooms. Some people also accessed the gardens independently.
- Each person's room contained en-suite facilities, meaning their care and support could be provided in their comfort of their own room.

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

Good: 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; Respecting and promoting people's privacy, dignity and independence.

- People and their relatives spoke positively about how kind caring and compassionate the care staff were. Comments included: "Yes, they are kind. We have a lot of laughs together", "Her personal care needs are supported. Her dignity is maintained – as much as it can be when you have to hoist someone" and "I have no complaints about the way they are with me."
- We observed staff supporting people to be engaged in activities which were tailored to their needs. Staff took opportunities to engage with people and ensure they were comfortable. One member of staff was assisting people prior to an activity. They took the time to talk to people and engage with them, even if this was just a simple greeting.
- People responded to staff positively. We observed that people were comfortable with staff and enjoyed spending time with them. One person chose to spend their time in their own room, when staff visited this person or walked past their room they engaged with the person and the person responded positively. The person was clearly comfortable in their company. One relative told us, "The staff do a very good job. They encourage and provide options, but they never force. When we take [relative] out they never have a problem coming back." Another relative told us, "She is so happy here. She will tell me how lovely the carers are."
- People were encouraged to do as much as they were able to. For example, we observed an activity with three residents which involved using a sensory kit to encourage them to talk about the memories triggered by different smells. The person running the activity was skilful in incorporating the kit into natural conversation and ensured that people were all participating.
- People's needs were known by staff who were positive about caring for them. One person's relative spoke highly of one member of staff and how they assisted their relative. They said, "They are fantastic, they know [relative] and what works. [relative] clearly trusts them and enjoys their company." The member of staff told us, "[Person] needs full support. He communicates back to me and responds. It's never a problem."
- Where people were anxious staff had a clear guidance on how to assist them. Staff spoke positively about working to the same guidance. One member of staff told us, "All staff follow a positive approach. This means it's consistent. Residents feel your attitude when you work with them, so we always need to be positive."
- People and their relatives told us people's dignity was always respected by care and nursing staff. One relative told us, "There have never been any problems, they treat her with respect and dignity."
- Staff told us how they respected people's dignity and the importance of making sure people were comfortable. We observed that staff ensured people's personal spaces were always respected. For example, knocking on their bedroom doors before entering (even if they knew the person was not in the room) and by talking and engaging with people before assisting them, whether with their meals or their mobility.
- Staff understood how to assist people and promote their involvement with all care activities. Staff explained that they treated everyone as an individual and understood how much each person could be

involved or do for themselves. One member of staff said, "We always encourage them to do as much as they can, it's important." One person said, "They treat me excellently. If you ask something, they always go and find out if they don't know the answer. They don't always agree with me, but they always listen. They are definitely approachable."

- Staff spoke positively of the people they cared for and understood their needs, preferences and life experiences. Staff told us how they took time to engage with people and promote their personal wellbeing. The registered manager and activity staff had recently implemented memory boxes for each person in their own room. Each person had a memory box which contained pictures or items personalised to people. For example, one person had pictures and maps from their travels. Another person had ballet shoes which had kindly been donated by a member of staff. These boxes were decorated in accordance with people's likes. People and their relatives had been involved in making these boxes and spoke positively about them. One member of staff told us, "It's early days and we're using them to engage with people. It helps us learn about them and helps them reminisce."

- The service respected people's diversity. Staff were open to supporting people of all faiths and belief systems, and there was no indication people protected under the characteristics of the Equality Act would be discriminated against. The Equality Act is legislation that protects people from discrimination, for example on the grounds of disability, sexual orientation, race or gender.

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

- People's communication needs were known, recorded and understood by care and nursing staff. Staff could describe the support people needed to enable staff to understand their wishes and support their decision making. Where people were living with dementia and could not communicate their views or concerns, staff would observe their facial expressions and body language to gauge their views, needs or if someone was in pain or discomfort.

- People were at the centre of their care and where possible were supported to make decisions, as well as being involved in reviewing their own package of care. One person told us, "I feel the staff know me well. They ask for my views."

Is the service responsive?

Our findings

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

Good: People's needs were met through good organisation and delivery.

We followed up on the concerns found during our previous inspection on 8, 9 and 12 March 2018 when we inspected this key at our March 2018 inspection we found people did not receive person centred care and did not always have access to meaningful, fulfilling and stimulating activities. Following our last inspection, we met with the provider to discuss the improvements they planned to make to Badgeworth Court. The provider sent us regular updates on their action plans.

At this inspection we found improvements had been made by the service to meet the regulation. People had access to varied activities and engagements which met their wellbeing needs.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- People and their relatives spoke positively about the care they or their relatives received and felt it was personalised to their needs. Comments included: "I am happy with the care, it's about me"; "My father and mother lived in the home, but my father has since died. The home has supported my mother well since then. She has been able to stay in the same double room even when I suppose she should have moved upstairs but they said that this is her home and it would be too disruptive for her to move. She's been put at the centre of their approach" and "What I like is they are willing to try everything. The staff are very good and tolerant. I see this as a team game and we all work together to support [relative] ."
- Each person's care plans contained information about their life, including their relationships, occupations and hobbies and their preferences. People and their relatives were involved in creating their care plans and reviewing them. One relative told us, "Yes, I've been actively involved. It's reviewed every six months – in fact there was one recently." Another relative said, "I don't remember being involved in the original plan, but I provided a life history and I've have been asked to read and check a review."
- Staff had skills and experience to identify when people's health was deteriorating, and their support needs were changing. Staff discussed how they supported people and made referrals to people's GP with their permission. One member of staff told us how they supported people who could not communicate their pain or needs fully, "Body language is really important. You can tell when people are in pain through their actions, if their withdrawn, if they're grimacing. We know people well, so we can tell when something isn't right." A healthcare professional told us, "The referrals are appropriate and well needed. Staff follow advice, it's not a problem."
- Prior to our inspection, the home had been accredited through Barchester's 10-60-06 programme (a programme designed to enhance both dementia care environment and to improve interactions between staff, people living with dementia, relatives and healthcare professionals). The home had achieved the highest accreditation score within the organisation for the last three years. This achievement had been recognised and shared with staff. The registered manager, senior regional director and staff all spoke positively about this process and were incredibly proud of the home. One member of staff who was heavily involved in supporting and training staff told us, "We are very proud, and our achievement has been

recognised. The residents benefit from this."

- People had access to a varied active and fulfilling life within Badgeworth Court. People told us they enjoyed spending their day as they wished, including accessing activities which interested them. Comments included: "I have my breakfast in my room and then I suppose I laze about which I enjoy. I often do puzzles that I have here. I go down to the dining room for lunch, but I don't join in the activities much, I'd rather be in my room. I enjoy watching all the birds and animals in the gardens, it's much better than anything on the TV. I like it when they have proper classical music sessions"; "I could take part in activities but mostly I don't as I prefer my own company"; "My relative takes part in the movie nights which she enjoys. She likes music and is involved in that sort of activity. They are very good at making sure she's not excluded" and "My relative loves going out and enjoys the visits to the garden centre, the cathedral and so on. I've told them she likes going out so that's what they do. Even if it's just a walk in the gardens, it's what she enjoys, and they do it."
- People enjoyed accessing the home's gardens, spending time with their relatives as well as enjoying activities such as sensory activities, exercises and a musical session. The registered manager and activity staff engaged heavily with the local community and focused on providing a varied activity diary. The activity diary was given to people weekly.
- People's feedback was sought and acted on regarding the activities they enjoyed. Some gentleman living at Badgeworth court raised the idea of a Gentleman's club. This had been acted on and had been a positive success which people enjoyed. The registered manager informed us that communal areas at the front of the home had also been previously underused. They discussed this with people and their relatives and sought their views. A bar had been inserted into one lounge and people and their relatives were encouraged to use the facilities including for family gatherings.
- The registered manager had sought support from the provider in relation to activities as they had identified this as an area of continued improvement. A divisional activities manager had been allocated to the service and had a clear plan in place around community engagement. The divisional activities manager stressed how important links and engagement with the community are for the home and they are being continually expanded. Efforts have been made to bring in volunteers from the community and the community is also encouraged to come in and use the home for meetings. The aim was to promote people's wellbeing and inclusion by placing Badgeworth Court in the centre of the community.
- All staff were encouraged to contribute ideas for activities as part of a "whole home" approach to activities. People and their relatives told us the range and quality of activities provided to people had improved. People also appreciated the small activities staff provided, even if it was just supporting them with a walk.

Improving care quality in response to complaints or concerns.

- There was a complaints policy in place which advised people what to do regarding concerns and complaints and if they were not satisfied with any outcome. People and their relatives told us they knew how to raise a concern. Comments included: "I'd feel confident about speaking up. I have a good rapport with the staff"; "If I had a complaint I'd speak to the manager. Concerns had not always been dealt with well in the past, but things are now much better. If there was any cause for concern, my sister would be confident about dealing with it" and "Yes, I feel confident about raising anything. There was a small problem with the laundry and that was sorted quickly."
- The registered manager kept a record of all compliments and complaints. They treated any concern as a complaint and to drive improvements within the home. For example, they had received a concern about access to the home during a flu outbreak. While they had identified as a team they had done the right thing, they had identified lessons which could be learnt around communication around outbreaks. They had also identified the need for education for people and their relatives around infection control.

End of life care and support

- People were supported at the end of their life by care and nursing staff. There were arrangements in place to ensure necessary medicines and additional healthcare support was readily available.

- People's end of life wishes had been explored with people and their representatives. These included preferences in their end of life care and support and identifying any specific religious or cultural needs.
- One person's relative spoke positively about the care one of their relatives had received at the end of their life and praised the support their other relative now received. They told us, "They provided great end of life care and support. I couldn't fault them. They've been caring and made us feel comfortable."

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

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

We followed up on the concerns found during our previous inspection on 8, 9 and 12 March 2018 when we inspected this key at our March 2018 inspection we found the provider did not always operate effective systems to monitor, assess and improve the quality of care people received. Following our last inspection, we met with the provider to discuss the improvements they planned to make to Badgeworth Court. The provider sent us regular updates on their action plans.

At this inspection we found improvements had been made by the service to meet the regulation. A new registered manager was in post who alongside representatives of the provider had implemented robust governance systems.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility.

- The Registered manager and provider had a clear vision for the service they wished to provide. This vision was communicated to staff. One member of staff told us, "We all want to provide high quality, person centred care." Another staff member said, "We want people to live fulfilling lives."
- Relatives spoke positively about the ethos and caring culture of care staff. Comments included: "There's been a return to the ethos when my relative first came in here. It's back to something you can trust. The business is now being run as it should be" and "There is a clear ethos, a homely environment with the residents at the centre."
- People and their relatives spoke positively about the registered manager and felt the home had improved in the last year. Comments included "The way you can speak to anyone about anything. There's nothing to change. I'd give it 10/10"; "[Registered manager] works incredibly hard, it gives me confidence and I see it goes throughout the team" and "The home is much better. Since [registered manager] it has been settled, they've provided stability, she's here at weekends, and you can go to her with any problem. I can see the staff are more skilled and feel supported. I feel reassured and confident in the home meeting [relatives] needs."
- Staff spoke positively about improvements at Badgeworth Court and the support they received and felt they worked in a supportive and transparent organisation. Comments included: "The transformation in this home has been absolutely great. So positive, [registered manager] has been so supportive"; "[registered manager] is a very good manager, she encourages us and is very hardworking and supportive of us" and "[Registered manager] is really good, very supportive. I can always go to them."
- The registered manager, deputy manager and provider understood their duty of candour responsibilities to be open and honest with people and their family when something had gone wrong. One person's relative praised the registered manager on their responsiveness and transparency when dealing with an allegation

of abuse. They told us, "There was total transparency. The way [Registered manager] dealt with it was so totally open. I was informed straight away, I didn't worry as I knew the allegation was fictitious. The police were involved and came in, we spoke with them. Within 24 hours the concern was dealt with and closed. I can't fault them."

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

- The registered manager and provider had comprehensive systems to monitor and improve the quality of care people received, as well as assessing people's care to ensure it was effective. The registered manager carried out monthly quality and clinical governance meetings, which discussed people's care, any incidents or accidents and concerning trends. This ensured that all staff have relevant information and lessons could be learnt and communicated throughout the home. Any actions were identified and addressed during these meetings, as well as informing the leadership and management plan for Badgeworth Court.
- The registered manager and deputy manager carried out a range of audits in relation to the management of people's prescribed medicines, the dining experience, people's care plans, health and safety and accidents and incidents. These audits were carried out at routine set by the provider and evidenced continued improvements since the registered manager had been appointed in 2018. When shortfalls had been identified these informed an action plan which was allocated to set staff to complete. For example, one audit identified some medicines were being stored incorrectly in a controlled drugs cabinet. This was rectified immediately, and the action recorded.
- The provider operated a quality development plan for the service. This had been shared with the Care Quality Commission since our last inspection. This plan considered any shortfalls or concerns identified through the provider's quality assurance processes, health and safety concerns and CQC inspections. Once an action had been completed this would be signed off by the registered manager or a representative of the provider.
- Barchester Healthcare Homes Limited had their own health and safety assessors and an internal regulation auditing team. These representatives of the provider carried out audits of the service. For example, a health and safety auditor ensured the home was working within safe working practices and that the home was appropriately maintained. The regulation team had carried out an internal audit in April 2019 and had identified that the home had made significant improvements. The results of these audits were shared with staff to ensure they were aware of the improvements that had been made and where more improvements could be made.
- Policies were in place, and staff were aware of emergency planning procedures and systems of escalation for immediate and long-term management of major, unplanned incidents with the least disruption to people's care.

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

- Staff were kept informed of changes and adjustments to what was required of them. The registered manager had arranged for monthly meetings in each unit to ensure staff were kept up to date with information. These meetings were used to share lessons learnt from the home and other Barchester services and to promote an open and transparent culture. Every day the home held a stand-up meeting where important messages were communicated and then passed through to all staff. These meetings also detailed weekly bulletins provided by the provider to registered managers and detailing action which he was essential, where action may be required and general information.
- People and their representatives were also kept abreast of changes and improvements to the service through resident and relative meetings. People's relatives spoke positively about the communication they received from the registered manager and felt they were involved and included in the service. Comments included: "There are three monthly meetings and the dates are given out a year in advance"; "The

communication is good. We are updated regularly by email. We are told weekly about the activities, so we are well informed. The staff and the manager listen, and I feel it's well led. There is training, and the staff morale is good. I sense there's a feeling of being supported. The manager is very visible" and "I feel as a family we're fully informed and involved in [relatives] care and about changes in the home." Resident and relative meetings discussed changes in the home, such as the implementation of memory boxes and feedback from internal audits that had been carried out. The home carried out dedicated residents' meetings and a resident ambassador had been nominated. These meetings discussed activities and upcoming events at Badgeworth Court.

- The registered manager spoke proudly of the feedback they had received and ensured this feedback was shared amongst the staffing team.
- Leaflets were available for people's relatives at the entrance of the home. These leaflets were designed to pass on knowledge and help educate people. For example, a children's book had been designed called "Visiting granddads new home book" which provided children information on the changes in their relative's life.

Working in partnership with others.

- The registered manager welcomed the involvement, guidance and recommendations of healthcare professionals. The registered manager kept a record of external audits, such as pharmacy audits from a local care home support team and a pharmacist from the home's contracted pharmacy. Where actions or recommendations had been made, the registered manager ensured these had been actioned. For example, the care home support team pharmacist had raised an action about medicine fridge temperatures which had been acted upon. One healthcare professional told us, "There is a greater awareness of dementia in the home. The home follows guidance and the service engages with local training. They do everything we ask."
- The registered manager had a clear plan around community engagement and all staff were focused on improving the connection to the community to improve the wellbeing of people living at Badgeworth Court. At Christmas the home had provided a Christmas meal to people who would be alone in the community at Christmas. One person was unable to attend on the day, so staff delivered this person their meal.