

RochCare (UK) Ltd

Bank Hall Care Centre

Inspection report

Colne Road
Burnley
Lancashire
BB11 2AA

Tel: 01282838909
Website: www.rochcare.com

Date of inspection visit:
25 May 2021

Date of publication:
15 June 2021

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

Bank Hall Care Centre is registered to provide personal care and accommodation for up to 56 older adults and adults living with a dementia. Accommodation is provided in two interlinked buildings known as Bank Hall and Scarlett House. All bedrooms are single occupancy with many of the rooms having ensuite facilities. At the time of the inspection, there were 30 people using the service.

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

People told us they felt comfortable and safe living in the home. The manager and staff understood their responsibilities to raise concerns and report incidents or allegations of abuse. Systems were in place to ensure lessons were learnt from any incidents and the management team understood their responsibility to be open and honest when something went wrong.

There were sufficient numbers of staff deployed to meet people's needs and ensure their safety. The provider operated an appropriate recruitment procedure. People received their medicines safely and on time. Risk assessments were carried out to enable people to retain their independence and receive care with minimum risk to themselves or others. The home was clean in all areas seen and staff followed safe infection control practices.

The provider had systems to check the quality of the service and to monitor staff practice. People's views about the service were sought and acted on. The manager and staff worked with external professionals to ensure people received prompt and coordinated care.

For more details, please see the full report which is on the Care Quality Commission (CQC) website at www.cqc.org.uk

Rating at the last inspection

The last rating for this service was good (published 11 May 2018).

Why we inspected

This was a planned inspection based on the previous rating.

This report only covers our findings in relation to the key questions Safe and Well-Led. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the all reports' link for Bank Hall Care Centre on our website at www.cqc.org.uk.

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.

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 well-led?

Good ●

The home was well-led.

Details are in our well-led findings below.

Bank Hall Care Centre

Detailed findings

Background to this inspection

The inspection

We carried out this focused 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.

As part of this inspection, we looked at the infection control measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Bank Hall Care Centre 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 did not have a manager registered with the Care Quality Commission. This means the provider is legally responsible for how the service is run and for the quality and safety of the care provided. A manager was in post and intended to apply for registration.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service, including information from the provider about important events that had taken place at the service, which they are required to send us. We considered feedback from the local authority including the safeguarding team.

The provider was not 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. We took this into account when we inspected the service and made the judgements in this report.

We used all this information to plan our inspection.

During the inspection

We observed how staff provided support for people to help us better understand their experiences of the care they received. We spoke with five people living in the home, three members of care staff, the deputy manager, the manager and a director of the company.

We reviewed a range of records. This included two people's care records and risk assessments, ten medication records and one staff member's recruitment records. A variety of records relating to the management of the service were also reviewed. We walked around the service to observe the environment; we did not look at all rooms.

After the inspection

We continued to seek clarification from the provider to confirm evidence found.

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 comprehensive inspection, this key question was rated as requires improvement. At this inspection, this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At the last inspection we recommended the provider developed their medicine management processes in line with current guidance. At this inspection, we found the provider had made the necessary improvements.

- Medicines were stored and managed safely. Staff were suitably trained to administer medicines and checks on their practice had been carried out.
- People told us they were satisfied with the way the staff managed their medicines. One person commented, "They are very good with my tablets. I always get them spot on time."
- The staff maintained appropriate records for the receipt, administration and disposal of medicines. All records seen were complete and up to date.

Systems and processes to safeguard people from the risk of abuse

- The provider ensured people were protected from the risk of abuse. Staff had access to appropriate policies and procedures and training and understood how to raise any concerns about poor practice.
- People told us they felt safe and were happy with the care they received. One person said, "The staff are very good and really helpful."
- The manager and staff were clear about when to report incidents and safeguarding concerns. Staff were confident the manager would act quickly to keep people safe if they reported any issues.

Staffing and recruitment

- People told us the staff responded promptly to their needs.
- The manager had introduced a new dependency tool to assess the level of staffing based on the needs of people living in the home. This enabled the manager to monitor staffing levels in line with fluctuating needs.
- The provider had not employed any new care staff since the last inspection. A new manager had been recruited. We checked the manager's personnel records with a director of the company and noted included all necessary regulatory checks had been carried out prior to the manager commencing work in the home.

Assessing risk, safety monitoring and management

- The manager and staff assessed and managed any risks to people's health, safety and wellbeing. Staff were provided with guidance on how to manage the risks in a safe and consistent manner.
- Staff ensured people had maximum choice and control over their lives, including those with protected equality characteristics.

- The provider had carried out environmental risk assessments and equipment was safe and regularly serviced. All safety certificates seen were complete and up to date.

Learning lessons when things go wrong

- The manager promoted an open and transparent culture in relation to accidents and incidents. Lessons learned were discussed at staff, one to one and flash meetings. We attended a daily flash meeting during the inspection and noted all aspects of people's care and support was discussed.
- Management and staff completed records in relation to any accidents or incidents that had occurred at the service, including falls. The manager carried out a monthly analysis of accidents and incidents to identify any patterns or trends; evidence showed action had been taken to improve people's safety.

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections. The manager ensured staff were using PPE effectively and safely and the service was meeting shielding and social distancing rules. All staff were observed to be wearing appropriate PPE during our visit.
- Staff were provided with infection control training on induction and through mandatory training programmes.
- The provider was admitting people safely to the service and was accessing testing for people living in the home and staff. The provider was promoting safety through the layout and hygiene practices of the premises and was making sure any infection outbreaks could be effectively prevented or managed. The provider's infection prevention and control policy was up to date.

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.

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

- The manager and staff had a clear understanding of their roles and contributions to service delivery. Staff told us they felt valued and supported. One member of staff told us, "I love working here. The new manager is lovely and we are all part of one big family."
- The management team carried out a number of audits and checks covering all aspects of the service. We saw action plans were drawn up to address any shortfalls.
- People living in the home and staff spoke positively about the way the service was operated and managed. At the time of the inspection, the manager had been in post for approximately a week. She intended to submit her application for registration in due course.
- The manager was supported by the area manager, who visited the home on a regular basis. The area manager carried out audits and checked the data submitted by the manager each week. She also had remote access to other electronic systems and information.
- The manager utilised meetings with staff, both on an individual and group basis, to ensure continuous learning and improvements took place. Staff told us they were comfortable in raising any issues or concerns within the meetings, and the manager was open to feedback.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 manager and staff were focussed and committed to delivering a person-centred service which achieved positive outcomes for people. They were knowledgeable about people's needs and preferences. Staff were attentive and we observed positive interactions between staff and people living in the home.
- The manager and staff respected people's rights and encouraged people to make choices and decisions about their care and support. Risks to people's health and well-being were assessed and kept under review; care records reflected people's choices and preferences.
- The manager and provider understood the duty of candour and their responsibility to be open and honest when something went wrong. Staff said the manager was approachable; they were confident they would take appropriate action to respond to any concerns.

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

- People told us they were happy living in the home. One person said, "They look after us very well here."

- Staff involved and engaged people in the life of the home and considered their equality characteristics. People were encouraged to express their opinions through different forums to ensure their views were heard. The provider had carried out a satisfaction survey in 2020 and the results were displayed in the entrance area. The manager explained a schedule of surveys had been planned to take place each month. Each survey focused on a specific aspect of the service.
- The manager and staff worked in partnership with other agencies including commissioning teams and health and social care professionals. This enabled effective, coordinated care and support for people.