

# Bondcare Willington Limited

## Birch Tree Manor

### Inspection report

Wharf Street  
Port Sunlight  
Wirral  
Merseyside  
CH62 5HE

Tel: 01516440777

Website: [www.bondcare.co.uk/birch-tree-manor/](http://www.bondcare.co.uk/birch-tree-manor/)

Date of inspection visit:  
20 November 2020

Date of publication:  
23 December 2020

### Ratings

Overall rating for this service	Requires Improvement ●
Is the service safe?	Good ●
Is the service well-led?	Requires Improvement ●

# Summary of findings

## Overall summary

### About the service

Birch Tree Manor is a care home providing personal and nursing care to 51 people aged 65 and over at the time of the inspection. The service is purpose built and the accommodation is in three units over two floors. Each of the units support people living with different conditions such as dementia and nursing needs. The service can support up to 62 people.

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

Care plans and risk assessments were in place that reflected the needs of the people. Medicines were managed safely and staff who administered medication had had their competencies checked.

People looked happy, healthy and responded positively when staff approached them or spoke with them. The atmosphere was friendly and peaceful.

Staff wore personal protective equipment (PPE) and clear guidance was in place regarding keeping people safe from the risks associated with the coronavirus pandemic. Staff were recruited safely and there were enough of them to meet people's needs.

Quality systems were robust and staffing structure and accountabilities were clear. Accidents and incidents were managed appropriately, and referrals were made to other professionals in a timely manner when people living in the home needed their support. The deputy manager notified CQC of significant incidents when it was appropriate.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was requires improvement (published 04 February 2020). The service remains rated requires improvement. This is due to only safe and well-led domains being inspected.

### Why we inspected

We received concerns in relation to the governance of the home. As a result, we undertook a focused inspection to review the key questions safe and well-led only. 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. Our report is only based on the findings in those areas reviewed at this inspection. The ratings from the previous comprehensive inspection for the Effective, Caring and Responsive key questions were not looked at on this occasion. Ratings from the previous comprehensive inspection for those key questions were used in calculating the overall rating at this inspection.

The overall rating for the service remains requires improvement. This is based on the findings 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 coronavirus and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Birch Tree Manor on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### Follow up

We will work with the local authority to monitor progress. We will return to visit as per our re-inspection 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?

**Requires Improvement** ●

The service was not always well-led.

Details are in our well-led findings below.

# Birch Tree Manor

## 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.

As part of this inspection we looked at the infection control and prevention 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

Birch Tree Manor is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

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 reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the

service. We used all of this information to plan our inspection.

#### During the inspection

We spoke with two people who used the service and four relatives about their experience of the care provided. We spoke with two members of staff and deputy manager. We reviewed a range of records. This included four people's care records and multiple medication records. We looked at four staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at policies and procedures.

# 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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Any potential safeguarding was recognised and reported to the local authority and notified to CQC as required..
- The deputy manager had taken appropriate investigative action when any potential safeguarding was recognised.
- People and relatives, we spoke with all said they felt their loved ones were safe and we observed people were very comfortable in the presence of the staff.

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

- Regular health and safety checks of the environment had been completed. Service agreements and safety certificates were all in date.
- Each person had a Personal Emergency Evacuation Plan (PEEP) in place. This informed staff of the safest way to evacuate a person from the building in an emergency.
- People's needs and risks were identified, and staff had guidance about how to mitigate these risks in the delivery of care.
- Referrals had been made to other health professionals when required.
- Accident and incidents were recorded, reviewed or acted upon to reduce risk. Accidents were recorded within the accident file and audits had been undertaken to look for trends to help reduce the risk of future incidents.

Staffing and recruitment

- Staff files we looked at held the appropriate information needed to ensure fit and proper persons were employed.
- Safe recruitment checks were carried out. However, we identified one person's personnel file did not contain proof of their identification. This was immediately raised with the deputy manager who assured us that this would be remedied. This was confirmed following the inspection.
- During the inspection we saw that there appeared to be an appropriate number of staff on duty.

Using medicines safely

- Medicines were managed safely.
- Records regarding the administration of medicines were accurately completed
- The majority of records for medications prescribed as and when required (PRN) were in place to guide staff when people may require this medication to be administered. However, we identified one person who did not have them. This was immediately raised with the deputy manager who assured us that this would be

remedied. This was confirmed following the inspection.

#### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that 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 requires improvement. At this inspection this key question has remained the same. As the inspection looked at safe and well-led, other key question were not inspected. This means that this key question remains as requires improvement due to existing findings.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Working in partnership with others

- Feedback we received from people and their relatives was mostly positive however, we were told that at times the communication between the staff and relatives was not always effective. This was discussed with the deputy manager who assured us that this would be actioned.
- The equality characteristics of people and staff were considered. For example, the risk assessments prepared for people took into consideration key factors such as that might affect their vulnerability to coronavirus.
- Health professionals were regularly involved in the people's care.

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 deputy manager shared information with the CQC as required.
- The deputy manager and the staff were clear with regards of what was expected of them within the home. The deputy manager was open and transparent about what improvements had been made and what further improvements where needed

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

- Aspects of day to day care were spot checked and key areas of service delivery were monitored to ensure they were in keeping with regulatory requirements.
- Ratings from the last inspection were clearly displayed within the home as required.
- The provider and deputy manager completed regular safety and quality audits to measure performance and generate improvements.
- Induction, training and supervision processes where in place to ensure staff were fully aware of their responsibilities with in the home. This was supported with ongoing competency checks.
- Policies and procedures were in place, including infection control, data protection and disciplinary processes. This helped to ensure staff were aware of the expectations of their role and were held accountable for their actions.

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

- Staff were supported to express their views and contribute to the development of the service at team

meetings

- The deputy manager had endeavoured to continue with quality questionnaires during the pandemic and used the information to improve the service.
- Social media and extensive telephone use was used to enable families and people living in the home to keep in touch during the pandemic.