

Premier Nursing Homes Limited

# Briarwood Care Home

## Inspection report

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Date of inspection visit:

30 September 2020

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09 October 2020

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03 November 2020

## Ratings

### Overall rating for this service

Inspected but not rated

Is the service safe?

**Inspected but not rated**

Is the service effective?

**Inspected but not rated**

Is the service responsive?

**Inspected but not rated**

Is the service well-led?

**Inspected but not rated**

# Summary of findings

## Overall summary

### About the service

Briarwood Care Home is a residential nursing home providing personal and nursing care to older people and people living with a dementia. It accommodates up to 49 people across two units in one purpose-built building. There were 34 people using the service when we visited.

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

People and relatives spoke positively about the care the service provided. Comments from people included, "They couldn't do more" and, "The staff are there when you need them."

Risks to people were assessed and addressed. Medicines were mostly managed safely, with further and sustained improvement needed in some areas. Clear and effective infection prevention and control procedures were in place.

People's consent to care and best interest decisions were recorded.

Care reflected people's assessed needs and preferences. Steps had been taken to improve activities at the service.

A range of effective quality assurance audits were used to monitor and improve standards.

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 and update

The last rating for this service was requires improvement (published 6 December 2019) and there were three breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

### Why we inspected

We undertook this targeted inspection to check whether the requirement notices we previously served in relation to breaches of regulation had been met. The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

As part of CQC's response to the coronavirus pandemic we are also conducting a thematic review of

infection control and prevention measures in care homes. The Safe domain also therefore contains information around assurances we gained from the registered manager regarding infection control and prevention.

#### Follow up

We will continue to monitor information we receive about the service until we 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?**

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

### **Is the service effective?**

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

### **Is the service responsive?**

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

### **Is the service well-led?**

At our last inspection we rated this key question requires improvement. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

# Briarwood Care Home

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check whether the requirement notices we previously served in relation to breaches of Regulation 11 (Need for consent), Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 were met.

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

This inspection was carried out by three inspectors and a specialist advisor nurse.

#### Service and service type

Briarwood Care Home 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

We gave the provider 24 hours' notice of the inspection. This allowed the provider time to let people know we would be contacting them for feedback and provide us with records for review as part of the inspection.

#### What we did before the inspection

We reviewed information we held about the service, including the notifications we had received from the provider. Notifications are changes, events or incidents the provider is legally obliged to send us within required timescales. 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.

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 of this information to plan our inspection.

During the inspection

We spoke with three people and four relatives over the telephone about their experience of the care provided.

We reviewed a range of records. This included 11 people's care records and 12 medication records. We spoke with seven members of staff, including the registered manager, a nurse, a team leader and care staff.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at care and medicine records.

# 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. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the requirement notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

Assessing risk, safety monitoring and management; Using medicines safely

At our last inspection the provider had failed manage medicines safely and to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Safe Care and Treatment).

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Risk assessments had been reviewed and improved. Further and sustained improvement was needed in some areas, but plans were in place to do this.
- Regular checks of people's underlying health conditions were carried out, but were not always recorded. The registered manager took immediate action to address this.
- Medicine records had improved since our last inspection, but further work was needed in some areas. We fed this back to the registered manager, who said action would be taken.
- Medicines given when required had guidance in place to support staff on safe administration.

Preventing and controlling infection

At our last inspection the provider had failed to ensure effective infection prevention and control measures were in place. This was a breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Safe Care and Treatment).

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- The provider was promoting safety through the layout and hygiene practices of the premises.
- The provider was using personal protective equipment effectively and safely.
- The provider was meeting shielding and social distancing rules.

# 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 requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the requirement notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

Ensuring consent to care and treatment in line with law and guidance

At our last inspection the provider had failed to ensure consent was obtained and recorded. This was a breach of regulation 11 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Need for consent).

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 11.

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.

- MCA and best interests decisions were in place and recorded where people's rights were being restricted.
- Consent was appropriately obtained and recorded.



# 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 requires improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the requirement notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

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

At our last inspection the provider had failed to ensure care plans reflected the support people wanted and needed. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Good governance).

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Care plans were personalised, detailed and regularly reviewed.
- People and their relatives were involved in developing and reviewing care plans. One person told us, "They've never done anything I didn't like."

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

At our last inspection we recommended the provider find out more about training for staff, based on current best practice, in relation to activities for people living with a dementia. The provider had made improvements.

- The registered manager had reviewed activities and taken steps to improve them, including for people living with a dementia.
- Active steps had been taken to protect people from social isolation when Covid-related visiting restrictions were imposed. One person said, "They're good with activities."

## 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. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of the requirement notice we previously served. We will assess all of the key question at the next comprehensive inspection of the service.

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

At our last inspection the provider had failed ensure the service had effective good governance processes. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Good governance).

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Quality assurance audits had improved and were used to identify and address issues.
- Effective systems in place to ensure people's care records were reviewed and reflected the support they wanted and needed.