

Brookfield Care Agency Limited

# Brookfield Nursing Home

## Inspection report

Grange Road  
West Kirby  
Wirral  
Merseyside  
CH48 4EQ

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## Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

We visited the service on 11 July 2017. The visit was unannounced. Brookfield Nursing Home provides care and support to people living in their own homes in West Kirby and surrounding areas. At the time of our visit, the agency was providing support for 80 people and 20 staff were employed. We last inspected the service on 10 June 2015 when we found that the agency was providing a good service in all areas. At this inspection we found the service remained Good.

Not all of the people who used the service required help with personal care. Some people had support with household tasks which may be once or twice a week, while others had support when going out, for example on shopping trips.

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People who spoke with the expert by experience were very positive about the service they received. People told us they were very happy with the staff and felt that the staff were reliable and kind. They were able to speak with the manager when needed and they had no complaints about the service.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

The provider had systems to ensure that people were protected from the risk of harm or abuse. We saw there were policies and procedures in place to guide staff in relation to safeguarding adults and all of the staff team were up to date with training.

Good recruitment practices were followed which included the completion of pre-employment checks prior to new members of staff working at the service. Staff received regular supervision and training to enable them to work safely and effectively.

Care records showed that people were involved in decisions about their care and support and contained good information about the support people required and how they liked things done.

The service had a small and stable management team who have ensured that people receive a consistently good service over a number of years. All of the records we looked at were complete and up to date.

Further information is in the detailed findings below.

## 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 remains good.

### Is the service effective?

Good ●

The service remains effective.

### Is the service caring?

Good ●

The service remains caring.

### Is the service responsive?

Good ●

The service remains responsive.

### Is the service well-led?

Good ●

The service remains well led.

# Brookfield Nursing Home

## **Detailed findings**

### Background to this 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 was planned to check 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.

An adult social care inspector visited the office unannounced on 11 July 2017 and looked at records which included four people's care records, two staff files, and other records relating to the management of the service. We spoke with the manager and three other members of staff.

The visit was followed up with telephone calls to people who used the service carried out by 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. The expert by experience spoke with eight people who used the service and relatives of two people who used the service.

Before the inspection we looked at information the Care Quality Commission had received from the service including notifications and the provider information return. This included information from questionnaires that had been sent out to people who used the service. We also looked at any safeguarding referrals, complaints and any information from members of the public.

## Is the service safe?

### Our findings

People who used the service said they felt safe when supported by the staff. They told us "They are very safe and well trained." and "I feel safe. It's the same six or seven people who come." One person said "I only have cleaning done but they do it safely." and another explained "I have a fall alarm it's not them that come but they test my fall alarm regularly." One person we spoke with had support with medication and they commented "They provide my medication always on time and as prescribed."

The expert by experience received no reports of missed visits and was told that the staff were almost always on time but on the rare occasions they were late, staff provided an explanation which people were happy with. One person said "I get four calls a day, they are usually on time and always let me know if they are delayed."

Records showed that all staff had completed training about safeguarding adults. The provider had a policy on safeguarding adults as well as a copy of local authority's policies and procedures with reference to safeguarding adults.

We saw that risks to people's safety and well-being were identified and plans put in place to minimise the risks. Risk assessments were completed with regard to moving and handling, the environment, and people's physical health. The risk assessments were updated annually or sooner if there was any change in the person's needs. Health and safety risk assessments covered areas including care workers travelling, handling medicines, and moving and handling.

There had been two new members of staff since our last visit and we looked at their staff files. The records showed that full recruitment and checking processes had been carried out when these staff were recruited. These included a Disclosure and Barring Service disclosure and at least two written references, one of which was from a previous employer.

Some people were prompted to take their medication, whilst other people needed support with administration of their medication. Staff had received training in medication administration and the service had a medication policy and procedure available for staff to refer to.

## Is the service effective?

### Our findings

People we spoke with were happy with the approach of the staff who visited them. They told us "The girls are on time and do what's needed, they are very polite."; "If there are any new staff they are introduced. I had a new carer, she said she had been before but I couldn't remember, she showed me her badge, they have ID badges." and "They always look in the care book to see what the previous carer has written."

One person we spoke with had support with their meals. They told us "My food is ordered over the internet by [family member]. The staff will make what I want. If I ask, the lunch caller will prepare the vegetables so that the caller at tea time can just cook it for me."

The service employed 20 staff, most of whom had worked for the agency for a number of years and had completed a national vocational qualification (NVQ) in care. Care staff had an individual supervision meeting three or four times a year and all members of staff came into the office weekly. This was used as an opportunity to inform them of any changes or issues. Records showed that some of the supervisions took the form of observed practice. Staff had an annual appraisal which included a self-evaluation form for the member of staff to complete.

Staff training was provided by an external training company and was shared with staff from the adjoining nursing home. Subjects that had been covered by all staff since our last inspection included Food Hygiene, First Aid, Moving and Handling, Safeguarding, Medication and Dementia. A programme of staff training was in progress at the time of this inspection and included Nutrition, Communication, and Equality and Diversity.

A member of staff who we spoke with said that she had asked for additional moving and handling training because there was equipment she was not familiar with, and this was provided very quickly.

Staff also had workbooks relating to the Mental Capacity Act and Deprivation of Liberty Safeguards. Although they were working with people who lived in their own homes, this helped staff to understand issues relating to mental capacity and consent.

## Is the service caring?

### Our findings

All of the people we contacted spoke positively about the support they received and the care staff who visited them. Their comments included: "They are very kind."; "They are all very kind, some exceedingly so." and "They are brilliant."

While we were at the office, a person who used the service phoned in to say how much they liked the care worker who had just been out to them.

Some people gave examples of when staff had gone out of their way to help them. For example, "I had a fall and had to go to hospital. The house was a bit of a mess with blood all over. When I got home they had cleaned all the floor and bedding and even sent my duvet to be cleaned. I never asked them, they just did it for me I was very pleased."

Another person told us "If I want anything I just ask. The other day I mentioned I'd run out of milk to the carer and the next carer just brought some for me."

A relative who completed a CQC questionnaire commented "The care workers have gone out of their way to help with all sorts of extras over and above what they need to do. I would say well done and I appreciate they have called me up if they have been worried about my [relative]."

All of the people who completed a CQC questionnaire confirmed that their care and support workers always treated them with respect and dignity.

Clear and concise information about the service was provided for people in a brochure, a statement of purpose, and a price list.

## Is the service responsive?

### Our findings

People who used the service and their relatives told the expert by experience that their support needs were well met by the agency staff. People commented "They watch me very carefully and always monitor my skin for sores. They never forget."; "They take me shopping we have a nice trip out."; "I'm very happy, they do their job and I've no complaint."; "The carers always report back to the office if they think I'm not well or need any help." and "We are very happy with the service, he is well looked after."

People were aware of their care plans and told us "They stick to my care plan but will always do more if I ask." and "There is a care plan and they always fill the book in." A member of staff who we spoke with said "I like to do things for people the way they want it done."

Most of the people who used the service paid for their own care so this enabled the agency to provide them with a flexible service to meet their individual requirements. The manager gave us an example of one person who felt reassured by having a care worker present in their home when they took a shower. This enabled people to get to know and trust the care workers so that in the future if they required more help it could be provided by staff who they were already familiar with.

When an enquiry was received, either the manager or the senior care worker went to visit the person to discuss their needs and the service they required. We saw records of assessments in people's care files. The assessment forms had been completed in detail and recorded agreement for the service to be provided. The forms were signed by the person requiring a service or a family member.

Plans were in place for the care people required. The documentation was clear and simple and had been completed in full. Care staff completed a visit log after each visit and we saw that entries were detailed and described the care that had been given and how the person was feeling.

The agency had a clear written complaints policy and this was included in the information pack given to people when they started using the service. The complaints procedure advised people to contact the manager if they wished to raise any concerns and gave contact details for the local authority complaints service and for CQC. We recommend that the complaints procedure also include contact details for the provider.

We looked at the agency's complaints log. This showed that two complaints had been dealt with since our last inspection. Records showed the complaints had been handled appropriately and responded to.



## Is the service well-led?

### Our findings

People told us "I know the manager, I'd tell her if anything was wrong."; "I have access to the manager if needed."; "The manager will cover the care sometimes if they are short or delayed with another person." and "The staff and managers are always approachable and easy to talk to."

People who used the service and their relatives expressed their satisfaction with all of the staff who worked in the office. One person said "I go into the office if I need anything. They are very helpful and will change my days if I ask."; "I rang the office to say I could not give 24 hours' notice to cancel a visit. They were very nice and understanding."

The service had a registered manager who had been in post for several years. She was supported by a senior care worker. The service also had a finance manager and a technical services manager who were shared with the adjoining nursing home under the same ownership.

Staff had a meeting with the provider in February 2017. Records showed that a variety of topics were discussed in detail including uniforms and working hours. It was evident from the records that staff had been able to express their views and they had been listened to. A member of staff who we spoke with said that she felt very well supported by the office staff. She told us "You only need to phone if there's anything you're not sure of." She went on to say "This is a lovely company to work for."

People who used the service were invited to express their views through satisfaction surveys sent out twice a year. We looked at the replies to the most recent survey which showed that one person had expressed dissatisfaction with the service. The manager explained how this had been addressed. A full review of each person's support was recorded at least annually and signed by the person using the service.

Daily records and medication record sheets were monitored by the manager and the senior care worker and the information gathered was used to give feedback to staff at supervisions, or if there were any general points, they were put into a newsletter. Each member of staff had a spot check at least once a year, and more frequently if needed.

A health and safety review had been carried out in April 2017 and all policies reviewed. All of the documents we asked for were readily available in the office and had been written and maintained to a good standard and kept up to date.