

Robert Shaw

# Brantwood Residential Care Home

## Inspection report

112-114 Congleton Road  
Sandbach  
Cheshire  
CW11 1HQ

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## Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

**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

Brantwood Residential Care Home provides personal care for up to 21 people. They were supporting 18 at the time of inspection. The home is spread across two floors.

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

People were safe and well cared for and were protected from the risk of abuse. However, we made some recommendations about the safeguarding policy, and safeguarding training.

People told us that staff knew them well and they could meet all of their needs and likes and dislikes.

People could give feedback to the provider about their experience of using the service. Relatives told us they knew who to contact if they had any concerns or compliments.

Governance systems required updating to ensure risks and areas for improvements to care identified. We made recommendations about the management of risk and regulatory requirements.

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

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

### Why we inspected

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.

We undertook this targeted inspection to check on a specific concern we had about how the service manages safeguarding issues, staffing levels and complaints, and their understanding of regulatory requirements. The overall rating for the service has not changed following this targeted inspection and remains good.

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.

### 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 good. 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 good. 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 good. 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**

# Brantwood Residential Care Home

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check on a specific concern we had about the management of safeguarding issues and complaints.

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 undertaken by one inspector.

#### Service and service type

Brantwood Residential 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

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan

to make. This information helps support our inspections. We used all this information to plan our inspection.

#### During the inspection

We spoke with four people who used the service and two relatives about their experience of the care provided. We spoke with five members of staff including managers and care staff.

We reviewed a range of records. This included three people's care records and 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.

# 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 good. 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 a specific concern we had about how the provider manages safeguarding issues. We also looked at staffing levels and skill mix during this inspection. We will assess all of the key question at the next comprehensive inspection of the service.

Systems and processes to safeguard people from the risk of abuse

- There were systems in place to safeguard people from the risk of abuse although we found that improvements could be made.
- The service provided safeguarding training; however, some staff were overdue their refresher courses. The registered manager was aware and planned to make sure all staff were up to date soon.

We recommend the provider look at ways to ensure all staff are up to date with required training.

- There was a safeguarding policy in place and staff knew how to access. However, the policy did not include information for staff about what to do if they had concerns.

We recommend the provider update their safeguarding policy to include clear referral instructions to the local authority.

- Staff could describe different types of safeguarding concerns and understood their roles and responsibilities.

Staffing and recruitment

- There were enough staff to meet the needs of people using the service.
- One person that used the service told us there were enough staff but they seemed busy.
- A relative told us there was a good amount of staff and they knew the needs of people well.
- We looked at staff records and found the provider was applying safe recruitment practises.

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 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's infection prevention and control policy was up to date.

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

The purpose of this inspection was to check a specific concern we had about how the service manages complaints. We will assess all of the key question at the next comprehensive inspection of the service.

Improving care quality in response to complaints or concerns

- The service had a complaints policy, including timeframes to address any complaint received by the provider. The policy directed people to the social care ombudsman if they were unhappy with how a complaint was handled.
- People who use service and their relatives told us they knew how to make a complaint or raise concerns.
- There had been one complaint in the past 12 months. This had been dealt with in a timely manner and the outcome clearly recorded.
- There was a questionnaire for people to fill in for feedback about the service.

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

The purpose of this inspection was to check a specific concern we had about whether the provider understood their responsibilities around regulatory requirements. 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

- The service recorded incidents and accidents in people's care files, however, improvements were needed to effectively record, monitor and learn from incidents.

We recommend the provider consider establishing an effective system to record, monitor and learn from incidents.

- Health and safety policies showed that managers understood some of their responsibilities for regulatory requirements, for example reporting injuries. However, we were not assured that managers understood all duties, for example around reporting safeguarding alerts. We discussed this with the provider who agreed to update their knowledge and policies and procedures immediately.

We recommend the provider update their knowledge and policies around regulatory requirements.

- Managers were supportive of their staff. Staff told us managers were approachable, they felt listened to and able to raise issues.