

Global Care (Birmingham) Ltd

Prospect House

Inspection report

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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

About the service

Prospect House is a residential care home which provides personal care to older people and people living with dementia. The service provides support to up to 33 people. At the time of our inspection there were 31 people using the service.

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

People received the care they needed, when they needed it. There were enough staff on shift to meet people's needs in a timely manner. People felt safe and risks to people were assessed and managed well. Medicines were managed safely and there were systems in place to protect people from the spread of infections.

People and their relatives were happy with the care they received. Staff knew people well and provided person-centred care, according to people's preferences. Staff were kind and caring and had a positive, friendly rapport with people using the service. 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.

People's needs were assessed and kept under regular review. People were supported by staff who received training to ensure they had the right knowledge and skills to support people effectively. All staff felt well supported and were regularly supervised to ensure they completed their roles effectively. Staff supported people to maintain their health and they sought timely advice from health professionals, when necessary.

People, their relatives and staff said they would not hesitate to raise any concerns with the registered manager. The provider had a suitable system in place to manage and act on any complaints.

The service had a friendly, welcoming culture. Staff morale was positive, and they all enjoyed their jobs. The service was managed by an experienced registered manager who coordinated the service well. There were suitable systems in place to monitor the quality and safety of the care provided. The service was clean, and people had access to facilities and any equipment they needed.

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

Rating at last inspection

The last rating for the service under the previous provider was good (published on 7 March 2019).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We looked at infection prevention and control measures under the key question of 'is the service safe?'. 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.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Prospect House

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 Act.

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 completed by three inspectors and 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.

Service and service type

Prospect House is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Prospect House is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with CQC to manage the service. 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.

At the time of our inspection there was a registered manager in post.

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 sought feedback from the local authority and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We used the information the provider sent us in the provider information return. This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with three people who used the service and we spent time observing the daily life in the service. We looked around the building to check environmental safety and cleanliness. After we visited the service, we spoke with five relatives of people who used the service about their experience of the care provided.

We spoke with 10 members of staff including the registered manager, care staff, other ancillary staff and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at three staff files in relation to recruitment and supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection of this service under the previous provider we rated this key question good. At this inspection the rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicines were managed safely. People's medicines records contained enough information to ensure staff supported them with the correct medicines, at the correct times.
- Staff were trained in how to manage medicines safely. Their competence to manage medicines was kept under regular review to ensure their skills and knowledge remained up to date.
- People received their medicines as prescribed. Staff were patient and respectful when they supported people to take their medicines.
- Some minor improvements were needed to the storage of medicines and the frequency at which stock checks were completed. The registered manager agreed to address this straight away.

Staffing and recruitment

- There were enough staff deployed to keep people safe and ensure their needs were met in a timely manner. There was a continuous staff presence throughout the home and staff engaged well with people throughout the day. The registered manager considered people's needs and dependency levels when determining how many staff were needed on each shift.
- People were supported by a longstanding, consistent staff team. People told us there was a low turnover of staff and this meant they were cared for by staff who knew them well.
- The provider used safe recruitment practices when employing new members of staff, to check they were suitable to work with vulnerable people.

Systems and processes to safeguard people from the risk of abuse

- The provider had suitable systems in place to protect people from the risk of abuse. All staff were aware of the need to raise any concerns immediately with the registered manager so action could be taken to keep people safe. Staff were confident the registered manager would act on any concerns they raised.
- People told us they felt safe and their relatives confirmed they were satisfied their family member was safe at the service.

Assessing risk, safety monitoring and management

- People were protected from avoidable risks and their safety was promoted. People's care records contained assessments which identified specific risks posed to them, and clear guidance for staff about how to manage those risks.
- Risks to people were kept under regular review and staff were knowledgeable about the action they needed to take to keep people safe.

- Staff completed regular checks of the building and the equipment they used, to ensure it remained safe. The premises and equipment had necessary safety certificates in place.

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was accessing testing for people using the service and staff.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.
- The provider facilitated visitors to the home so people could maintain their social relationships.

Learning lessons when things go wrong

- The provider had suitable systems in place to learn from any accidents or incidents. All accidents and incidents were recorded by staff and analysed by the registered manager, to try to identify any themes or trends. This information was used to help reduce the risk of repeat events and to make continuous improvements to the safety of the service.

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 our last inspection of this service under the previous provider we rated this key question good. At this inspection the rating for this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed, and a personalised care plan was created, so staff knew what care each person needed and when. People's needs were regularly reviewed, and their care plans were updated if their needs changed.
- People and their relatives were involved in the assessment and care planning process. This enabled staff to identify people's preferences and ensure their care was tailored to their individual needs and choices.

Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and skilled; they carried out their roles effectively. Staff completed training in a range of different subjects to ensure they had the right skills, knowledge and experience to deliver effective care. Staff were happy with the training they received. A relative commented, "They [staff] are really on the ball."
- Staff received regular support and supervision to review their competence, discuss areas of good practice and consider ways they could continue to improve. Staff told us they felt well supported by the registered manager. They felt able to raise any concerns or questions with them.

Supporting people to eat and drink enough to maintain a balanced diet

- People's nutritional and hydration needs were met. When people required a special diet, this was catered for. Kitchen staff were provided with information about people's dietary requirements and people's care records contained detailed information about their dietary needs and preferences.
- Staff followed good practice guidance when people required a modified texture diet to reduce the risk of choking. Staff used the International Dysphagia Diet Standardisation Initiative (IDDSI) framework which is a global initiative to use common terminology to describe food textures and fluid thickness where people required a modified texture diet.
- Where people were identified as being at risk of malnutrition, their weight and dietary intake was monitored.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked alongside a range of health professionals to ensure people's physical and mental health needs were met. Staff regularly sought advice from community health professionals such as the GP and district nurses. This supported staff to achieve good health outcomes for people.
- A visiting health professional confirmed the staff followed their advice and sought guidance from them

when necessary. They had a positive working relationship with the service.

Adapting service, design, decoration to meet people's needs

- The premises had been adapted to meet the needs of people using the service, including people living with dementia. Bathroom doors and doors to people's bedrooms had appropriate signage displayed on them to help people navigate around the building.
- People had been supported to personalise their bedrooms in line with their individual needs and preferences. This supported people to feel at home.
- The provider had commenced a refurbishment programme, and this was having a positive impact on the home's environment.

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

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 MCA 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff understood the importance of supporting people to make their own decisions. They obtained consent from people before they provided any care and support.
- We were satisfied the service was working within the principles of the MCA. People's capacity to make certain decisions had been assessed, where appropriate. Best interest decisions were recorded in people's care records and we were satisfied relevant people had been involved in making those decisions.
- The registered manager submitted appropriate DoLS applications, when necessary, to ensure the service had appropriate legal authorisations in place. The registered manager had oversight of which people were subject to a DoLS authorisation, whether they were subject to any conditions and when they were due to expire.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At our last inspection of this service under the previous provider we rated this key question good. At this inspection the rating has remained good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- Staff were kind and caring and treated people with respect. Relatives told us, "They are brilliant staff. Very helpful", "They are like family" and "The carers are very good and work non-stop during the day."
- People and their relatives were happy with the care they received. They commented, "You are well looked after" and "We are very satisfied with the quality of care at Prospect House."
- We were satisfied care and support was delivered in a non-discriminatory way and the rights of people with a protected characteristic were respected. Protected characteristics are a set of nine characteristics that are protected by law to prevent discrimination. For example, discrimination based on age, disability, race, religion or belief and sexuality.

Supporting people to express their views and be involved in making decisions about their care

- People were afforded choice and control in their day to day lives. We observed staff asking people what they wanted to do during the day and where they would prefer to spend their time. People's choices were respected.
- People had been asked about their preferences for receiving care and information about this was recorded in their care plans.
- Staff had developed a very good rapport with people. This supported staff to provide effective, personalised support to each person, in accordance with their wishes.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. People told us staff listened to them and promoted their privacy.
- People's care records clearly recorded which tasks people could do for themselves and what they needed support with. This helped to promote people's ongoing independence. We observed staff provided people with appropriate encouragement and equipment to enable them to complete tasks for themselves. A person commented, "They encourage you to be independent. For example, they will walk people up and down the corridor. They are good at being patient."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection of this service under the previous provider we rated this key question good. At this inspection the rating has remained good. This meant people's needs were met through good organisation and delivery.

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

- People received person-centred care which met their needs. We observed staff knew people very well and this helped them to deliver care in accordance with people's preferences. A relative commented, "What really impressed me was when [my relative] went to live at the home, the first thing they wanted to know about was her life history."
- People's care plans were person-centred and easy to navigate. The content of people's care records demonstrated staff had a good knowledge of people's needs, preferences, likes and dislikes. This supported staff to deliver individualised care to each person.
- Staff were responsive and attentive to people's needs. Staff recognised when people needed assistance and they offered support in a timely way.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were assessed and met. Where people needed support with communication, this was recorded in their care plan so staff knew how to communicate effectively with them.

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

- People were able to take part in different activities according to their interests. The provider employed an activity coordinator who arranged a programme of activities and entertainment according to people's preferences.
- People and their relatives provided very positive feedback about the way people were supported to remain meaningfully occupied and maintain their interests. People were actively supported and encouraged to continue previous hobbies. Relatives commented, "[My relative] likes joining in all the activities and tells me all about it when I visit" and "The activities coordinator is lovely and [my relative] really enjoys the activities."

Improving care quality in response to complaints or concerns

- The provider had a suitable system in place to ensure any complaints were appropriately recorded, investigated and responded to. Their complaints procedure was made readily available to people who used the service and their representatives.
- People and their relatives knew how to complain and felt able to raise any issues or concerns with the registered manager and staff.

End of life care and support

- The provider had systems in place to support people at the end of their life to have a comfortable, dignified and pain-free death. Staff were accessing training in respect of end of life care provision.

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 our last inspection of this service under the previous provider we rated this key question good. At this inspection the rating has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The provider, registered manager and staff were all keen to provide high-quality, person-centred care. We observed a friendly, welcoming and inclusive culture within the home. Staff morale was positive, and they all told us they enjoyed their jobs. A relative commented, "The carers are really cheerful and there's a nice atmosphere."

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 provider's policy in respect of the duty of candour was not detailed enough to ensure staff knew what kind of incidents the duty applied to, or what action they would need to take if one of those incidents occurred. The registered manager confirmed they would update the policy.
- The service had an open and transparent culture. Staff were confident any concerns or issues they raised would be dealt with appropriately by the registered manager. A relative commented, "I am kept well informed and staff ring me if there are any problems."

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

- The service had a registered manager who provided effective support and guidance to the staff team. Everyone we spoke with told us the registered manager was approachable and supportive. A relative commented, "The manager is really good and leads by example. She's very approachable, very understanding and is really good with the people using the service. I've seen her working on the floor alongside the staff."
- Staff were clear about their roles and responsibilities. They confirmed they received enough support to deliver a good quality service.
- The registered manager regularly completed a range of checks on the quality and safety of the service provided. This supported them to identify any areas which could be improved.
- The provider regularly visited the home so they could maintain oversight of the service. The provider completed a monthly audit to check the safety and quality of the service. We identified the effectiveness of this audit could be improved if it was completed more independently by the provider.

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

- Staff had opportunities to provide feedback about the service. They were able to share their opinions and ideas during regular supervision meetings, staff meetings or directly with the registered manager on a one-to-one basis.
- People and their relatives were asked for their views about the care they received, during reviews of their care and via surveys. Their feedback was analysed by the registered manager to identify if any areas of the service could be improved.
- Staff worked closely with relevant health and social care professionals which helped to ensure people received effective care and support. The registered manager obtained feedback about the service from visiting professionals via surveys. The responses received to a recent survey were all positive.