

South Yorkshire Housing Association Limited

Birch Avenue

Inspection report

67 Birch Avenue
Chapelton
Sheffield
South Yorkshire
S35 1RQ

Tel: 01142453727

Website: www.shsc.nhs.uk/services/birch-avenue

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Ratings

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

Summary of findings

Overall summary

About the service

Birch Avenue is a one-storey purpose built home and provides nursing care for 40 older people some of whom are living with dementia. The home has four, ten bedded, 'bungalows' with an interlinking corridor surrounding a large garden and patio area. Each unit has a communal lounge and dining room. All 40 bedrooms are single and have en-suite facilities. There is a central kitchen and laundry.

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

People were safeguarded from the risk of abuse. Risks in relation to people's care were identified and risk assessments detailed information about how risks could be mitigated. Accidents and incidents were recorded and analysed to identify any trends or patterns. This helped to mitigate future risks and ensured lessons were learned. The home was clean, and people were protected from the risk and spread of infections.

There were enough staff available to assist people to meet their needs in a timely way. Staffing numbers had recently been increased on each bungalow which staff said had significantly improved the time they were able to spend with and support each person. The provider had a safe recruitment process which assisted them in recruiting suitable staff.

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 care delivered in line with best practice. Care plans and supporting documentation included people's individual choices and preferences.

Throughout the inspection we observed staff interacting with people in a caring and considerate way. We saw staff gaining people's consent prior to carrying out care tasks. There was a homely atmosphere in the home and people appeared comfortable, happy, and relaxed. People and relatives, we spoke with were complimentary about the care and support they or their family member received.

The management team carried out regular audits to ensure the quality of the service was maintained. There were good systems in place for communicating with people, their relatives, and staff to collect their views and feedback regarding people's care and support.

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

Rating at last inspection and update

The last rating for this service was good, published on 29 June 2018.

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 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.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Birch Avenue on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Birch Avenue

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 Health and Social Care Act 2008.

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 1 inspector 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

Birch Avenue 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.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

Notice of inspection

This inspection was unannounced. Inspection activity started on 2 May 2023 and ended on 3 May 2023. We visited the service on 2 May 2023.

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, professionals who work with the service 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 (PIR). 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 took this into account when we inspected the service and made the judgements in this report.

During the inspection

We spoke with 8 people who used the service and 4 relatives about their experience of the care provided. We spoke with 12 members of staff including the clinical nurse manager, deputy manager, registered nurses, student nurses who were on placement, care workers and ancillary staff. We observed staff interacting with people who used the service, to help us understand their experience. We reviewed a range of records. This included 3 people's care records and 4 medication records. We looked at 3 staff files in relation to recruitment and staff supervision. We reviewed a variety of records relating to the management of the service.

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 we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems in place. Staff had a good understanding of what to do to make sure people were protected from harm or abuse. They had received appropriate and effective training in this topic area.
- During the inspection we observed some people showed behaviours that may challenge. The staff teams were patient and supportive to people and worked to provide a calm atmosphere and show people to safer areas.
- People and relatives confirmed the home was safe. People said they felt safe. We observed staff interact with people in a kind and compassionate manner. One person said, "It's very pleasant here and the staff who work here are grand." A relative said, "It's a great place and the care is second to none. It gives me peace of mind that [name] is well looked after here."

Assessing risk, safety monitoring and management

- Risks in relation to people's care and support had been assessed and were managed effectively.
- Risk assessments were detailed, and we observed staff delivering care and support in line with them.
- People had personal emergency evacuation plans in place to show what support people required in case of an emergency.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.
- The registered manager and staff team were knowledgeable about MCA and DoLS and worked within the principles of the MCA.
- Were people lacked capacity to make decisions, appropriate people were involved in making decisions in people's best interests.

Staffing and recruitment

- There were enough staff available to assist people to meet their needs in a timely way. Staffing numbers had recently been increased on each bungalow which staff said had significantly improved the time they were able to spend with and support each person. Staff said, "Extra staffing numbers have made a massive difference. We can spend more time with people, we feel we have much more presence on each bungalow as well" and "They have upped the staffing levels and employed some more nurses. We also have another full-time activities co-ordinator. It has improved loads these last few weeks."
- People told us staff responded in a timely manner when they needed assistance. One person told us, "The staff help when I need them to."
- The provider had a system in place to safely recruit staff, this included pre-employment checks such as Disclosure and Barring Service checks (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Medicines were managed safely. There were systems in place to support people to receive their medicines as prescribed. People's medicines records contained enough information to ensure staff supported them with the correct medicines, at the correct times.
- The managers completed regular audits of the medicines management system. These audits were effective at identifying areas which needed to improve and ensure action was taken to address any issues.
- Staff told us they received training in the safe administration of medicines and their competencies were assessed regularly.

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.

Visiting in care homes

The provider followed Government guidance regarding visiting the home, there were currently no restrictions.

Learning lessons when things go wrong

- The management team kept a record of accidents and incidents and used this information to identify trends and patterns.
- The management team completed an analysis which identified lessons learned and actions to take to mitigate future incidents.

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 we rated this key question good. The rating for this key question 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- We observed a good atmosphere in the home and people appeared comfortable and happy. The feedback from people about the service and management team was very positive. People appeared comfortable with the staff.
- Comments from people and their families included, "The place is lovely, and the care is very good," "Our relative has been here for a few years and we have never had any issues with the way [name] is looked after," "Staff are very patient. They have got to know [name] ways and they manage their care well. They go the extra mile" and "I couldn't wish for a better place; they [staff] give absolutely brilliant excellent care, and are amazing."
- Staff all said they would recommend the service to others, and they felt supported by the management team. One staff said, "I would 100% recommend Birch Avenue. I feel people are so well cared for. The managers look after us staff as well. I am so happy to work here."
- The home is supported by a relative's group, Support 67 who fund raise and provide the home and residents with activity equipment and entertainers to promote a therapeutic environment. The group meet every two months with a manager of the home to agree future plans for improvement and to discuss governance.
- People and relatives told us they had regular contact with the registered manager and other managers of the service, so were able to provide feedback about the service very regularly.

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 registered manager and provider understood their responsibility under the duty of candour. This is a set of requirements that providers of services must follow when things go wrong with care and treatment.
- The provider and managers were aware of their regulatory responsibilities and understood how and when to submit information to the CQC.

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

- A number of audits and checks were completed to help ensure continuous learning and improvement. The audits included the identification of any issues and actions to address them.
- Spot checks and competence evaluations were completed with staff regularly. This helped management

understand where further training, mentoring and support was required. Staff told us how they enjoyed working at the service and felt supported by the registered manager and provider. Staff comments included, "I am supported personally and professionally by the managers who are up to date and excellent."

- The provider audited the service regularly, to help share learning and ensure consistent high standards. They demonstrated they were committed to addressing any concerns or ideas to improve the quality of the service.
- People and relatives all spoke highly of the management team and provider. One relative said, "The manager is lovely. Always on hand for a chat if I need to ask any questions." Another said, "The Managers [named] are brilliant. I can ask them anything. If I can't make a visit, I have the peace of mind that if anything happens, they will ring me straight away."

Working in partnership with others

- The provider worked in partnership with other health and social care organisations and agencies. Professional feedback was positive. One care professional told us, "I observed good interactions between staff and residents. The staff were welcoming, polite, and friendly and have a good rapport with residents."
- People were supported to access healthcare professionals when required. A GP visited the service every week and as needed. People told us, "I am seeing the doctor in a bit. They sort the doctor to come and see me." A relative said, "[Name] had a cut on their leg and staff made sure they got a special wounds nurse to see them."
- There was evidence of working closely with the local authority, the local Infection Prevention and Control (IPC) team and other community health and social care professionals.