

Mrs Fiona Collins

# Bramley House Residential Home

## Inspection report

Westcott Street  
Westcott  
Dorking  
Surrey  
RH4 3NX

Date of inspection visit:  
03 May 2017

Date of publication:  
26 May 2017

Tel: 01306740003

Website: [www.bramleyhouse.net](http://www.bramleyhouse.net)

## Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

Bramley House Residential Home (Bramley House) is a care home providing accommodation and personal care for up to 16 older people. There were 11 people living in the home at the time of our inspection.

The inspection took place on 3 May 2017 and was announced.

The home 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.

We carried out an unannounced comprehensive inspection of this service on 15 June 2016. Two breaches of legal requirements were found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to maintaining appropriate records and ensuring legal notifications to us were submitted in a timely way. We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This inspection found that the provider had taken the action they told us they had. This report only covers our findings in relation to the leadership of the service. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Bramley House Residential Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Since our last inspection, the person in charge of the daily running of the service has been registered as the manager for Bramley House. The new registered manager was in the process of completing a relevant management course. They had also taken responsibility for ensuring that all statutory notifications are submitted in line with legal requirements.

The management and staffing team at Bramley House had worked hard to improve the standard of record keeping across the service. As such, we found that records were now a much better reflection of the support provided to people. Care plans and risk assessments now provided more information to ensure that new and temporary staff were able to deliver care in the same way as those staff who worked more regularly at the service.

There were systems in place to regularly audit and improve the service delivered. People and their representatives were encouraged to share their views and were routinely consulted about proposed changes and developments for the service.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

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

The service was well-led.

The culture within the service was open and positive and care was provided in a way which ensured the person was always at the centre.

There were systems in place to gather feedback from people and their representatives and involve them in the running of the service.

A range of audits were regularly carried out to maintain quality and the safe running of the service.

**Good** 

# Bramley House Residential Home

## **Detailed findings**

### Background to this inspection

We undertook an announced focused inspection of Bramley House Residential Home on 3 May 2017. We gave the registered manager 24 hours' notice to ensure that they were available to meet with us and provide access to the records we needed to see. We inspected the service against one of the five questions we ask about services: Is the service well-led? This is because the service was not meeting some legal requirements in this area at the time of our last comprehensive inspection.

The inspection was carried out by one inspector with experience in the regulation of services for older people.

Before the inspection, we reviewed records held by CQC which included notifications, complaints and any safeguarding concerns. A notification is information about important events which the registered person is required to send us by law. This enabled us to ensure we were addressing potential areas of concern at the inspection. We asked the provider to complete a Provider Information Return (PIR) before our inspection. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

As part of the inspection we spoke with three people who lived at the service and met with four staff, including the registered manager.

We reviewed a number of documents relevant to the management of the service. These included the care plans for two people, three staff files and a variety of audits and records relating to quality assurance.

## Is the service well-led?

### Our findings

At our comprehensive inspection in June 2016 we identified that whilst people liked the informal and relaxed way the service was run, that there were risks attached to the casual approach taken with record keeping. In addition, at that inspection we also found that the provider had failed in their legal duty to keep us informed about incidents affecting the running of the service.

Following that inspection, the provider wrote to us to tell us that they had taken immediate steps to improve the management of the service. The registered manager has since routinely submitted required notifications in a timely way. At this inspection, we also found that the standard of record keeping had improved across the service and as such both requirements had been met.

People were again positive about the leadership of Bramley House. One person talked of the management and staffing team and said, "Oh yes, they are all very kind, can't fault them at all." Likewise another person commented, "The home is very good, I'd rather not need to be in a care home, but that's not a criticism of here at all." People informed us that both the registered manager and provider were approachable and that if they raised any issues that things got done.

The culture of the service was open and inclusive. People, relatives and staff were continuously encouraged to express their ideas and thoughts. People told us that they had attended residents' meetings where they discussed topics such as activities, food and the on-going renovations to the building. One person had taken the minutes from the last meeting and was going to chair the next meeting.

The records of these meetings had greatly improved and it was now possible to see the actions taken as a result of these discussions. For example, in the last meeting one person had expressed a wish to eat supper at a later time. As such, this person confirmed that both they and another person now ate their supper together at 7pm. Likewise, the minutes recorded that another person had commented in the meeting that they missed their double bed from home. The registered manager confirmed that a larger room was currently being renovated and on completion, a double bed would be purchased and the person would then move in to this room.

Annual satisfaction questionnaires sent to people and their representatives highlighted a high degree of satisfaction about the service. In particular, positive feedback was received in respect of staff attitudes, the management of the service and the living environment.

The service had good systems in place to ensure that staff received on-going supervision and appraisal. There were regular staff meetings and we read in the minutes how staff were encouraged to discuss their work, ways of improvement and challenge each other's practices. Staff were also regularly competency checked by the registered manager to ensure best practice was maintained.

There were a number of systems in place for auditing and monitoring the service provided. These included regular checks on medicines, health and safety and food hygiene and cleanliness. Following the

requirement from the last inspection, there had also been an increased emphasis on the monitoring of care records to ensure these accurately reflected the care provided. We found significant improvements to the information documented in care plans, risk assessments and daily records.

The provider had a contingency plan in place to ensure the continuation of the service in the event of an emergency such as fire or power outage and staff were confident about how this would be implemented if necessary.