

Florence Lodge Healthcare Limited

Broadwindsor House

Inspection report

Broadwindsor
Beaminster
Dorset
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Tel: 01308868353

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26 May 2023

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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

Broadwindsor House is a residential care home providing personal care to 20 people at the time of the inspection. The service can support up to 24 people.

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

People told us they felt safe living at the home. Relatives agreed. Staff told us they would feel confident whistleblowing if they observed or heard about poor practice.

Risks to people were assessed, recorded and regularly reviewed. This included those related to any health conditions and the home environment. There were enough staff on duty to meet people's needs.

People told us they received their prescribed medicines on time. Relatives confirmed this. Medicines were only administered by staff with the relevant training and ongoing competency checks.

Infection and control procedures were robust and protected people, staff and visitors from harm. People told us their family and friends could visit without restriction.

Accidents and incidents were recorded and analysed. This supported the timely identification of themes and trends and the action required to help prevent a recurrence. Learning was shared.

The home had a positive culture. Staff enjoyed working with their colleagues and fully supported each other. Staff felt supported both in their work and with challenges that arose in their personal lives.

Professionals who visited the home regularly spoke positively about the management and care people received.

The registered manager and staff had a clear understanding of their roles and responsibilities.

The registered manager was highly thought of. There was unanimously positive feedback about them from all stakeholders. People and relatives felt the home was well managed.

The home undertook annual satisfaction surveys to gather the views of people, relatives, staff and professionals. Feedback was entirely positive.

The registered manager and deputy manager undertook various audits providing a robust oversight of quality and risk in the home. Staff were encouraged and supported to develop their skills and obtain further qualifications.

The home had established and maintained good working relationships with other organisations such as GP

surgeries, social workers, district nursing teams and local frailty team.

Management recognised the part the home played in the local community. This included strong links with volunteers, a village school, college and donating to local events.

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 this service was good (published 14 October 2017).

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 Broadwindsor House 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.

Broadwindsor 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 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

Broadwindsor 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. Broadwindsor 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 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 26 May 2023 and ended on 2 June 2023. We visited the service on 26 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 and professionals who work with the service. 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 used all this information to plan our inspection.

During the inspection

We spoke with 3 people who used the service and 8 relatives about their experience of the care provided. We spoke with and received written feedback from 9 members of staff including the registered manager, deputy manager, head of care, senior care assistants, care assistants, a volunteer, kitchen and housekeeping. We received feedback from 2 health professionals who visit the home regularly.

We reviewed a range of records. This included 3 people's care records and multiple medication records. We looked at three staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

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

- People told us they felt safe living at the home. Relatives agreed. Comments included: "I feel completely safe", "I absolutely feel safe here", "Yes I do think (relative) is safe there, the 24 hour level of staffing is good", "Yes, very safe there, (relative) had fallen at home but since being at Broadwindsor House, staff are on it 100% of the time" and, "Oh yes, [family member] is safe. I never worry."
- Staff demonstrated a good understanding of the signs and symptoms that could indicate people were experiencing abuse or harm. Staff knew how to raise concerns internally and to external agencies such as the local authority and CQC.
- Staff told us they would feel confident whistleblowing if they observed or heard about poor practice. They felt confident they would be listened to, and action taken in a timely way if they raised concerns.

Assessing risk, safety monitoring and management

- Risks to people were assessed, recorded and regularly reviewed. People had personalised risk assessments to help reduce risks including mobility, skin integrity, diabetes and nutritional intake. A relative commented, "After a fall they transferred [family member] to a ground floor room next to the office so they could be monitored more closely."
- Spot checks were carried out regularly to ensure staff were practicing safely and competently. Staff commented: "Checks are done very regularly" and "The spot checks keep all staff focused and you also get tips and advice."
- General environmental risk assessments had been completed to help ensure the safety of people, staff, relatives and visiting professionals. These assessments included: gas safety, water temperature, legionella, window restrictors, electrical systems and equipment.
- People had personalised emergency evacuation plans which helped ensure a safe evacuation from the premises in an emergency such as a fire. Regular fire drills were carried out. A fire safety assessment visit was conducted by the local fire service in December 2022. They concluded a reasonable standard of fire safety was evident.

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.

Staffing and recruitment

- There were enough staff on duty to meet people's needs. People told us staff attended to their needs in a reasonable time when requesting their assistance. Relatives and our observations confirmed this. A staff member commented, "We have a good amount of staff on each shift."
- The home had safe recruitment practices including checks with the Disclosure and Barring Service (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

- People told us they received their prescribed medicines on time. Relatives confirmed this. Comments included: "They are very good at monitoring medication", "They have sorted out the meds, relative probably now physically better than they have been for two years" and, "No problem at all since being there."
- People's medicines administration records were legible and complete. Any issues were followed up in a timely way.
- Staff who administered medicines had received the relevant training and ongoing competency assessments. Staff administering medicines wore 'do not disturb' tabards. This reduced the risk of errors caused by distraction.
- For each person prescribed medicines they only needed to take occasionally, guidance was in place for staff to follow to ensure those medicines were administered in a consistent way.
- Medicines requiring stricter security were stored appropriately with stocks matching records.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections. A relative said, "Their infection control is good."
- 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. A relative told us, "There was an outbreak, but it was very well controlled and managed by staff."
- We were assured that the provider's infection prevention and control policy was up to date.
- The provider was supporting visiting in line with government guidance and local risk assessments. People told us their family and friends could visit freely.

Learning lessons when things go wrong

- Accidents and incidents were recorded and analysed. This supported the timely identification of themes and trends and the action required to help prevent a recurrence. Learning was shared via handovers, team meetings and supervision.

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

- The home had a positive culture. Staff commented: "The culture of the home is just one big family, but also run very professionally the support is out of this world from management and all staff", "It's such a lovely home with lots of laughter and kindness", "This is not just a house, because of [registered manager] it actually feels like home", "It's changed my life for the better I have more confidence in myself and my job. I love what I do, and I am really happy" and, "It is professional, hardworking, supportive, open, transparent and definitely family like."
- Staff got on well with their colleagues and felt supported by them. They told us, "All of my colleagues here, I would class as friends and family as we are a very small team and work very well together", "I think we have a lovely team at Broadwindsor House and we all work well" and, "When I came to [the home] I was instantly welcomed and made to feel part of the team I can honestly say I get on well with everyone and have made some real friends for life."
- Staff were proud to work at the home. Their comments included: "I do feel proud working here as I see each day how happy the residents are, the staff, it's like a breath of fresh air", "Yes, I feel very proud to work here. I get to be part of this great team that make a difference to the lives of the residents", "I am very proud to be working [here]. We are all hard working and care very much about the people [here] and I like to think it shows" and, "I love Broadwindsor House!"
- Professionals who visited the home regularly spoke positively about the management and care people received. One told us, "I believe the home to be very well run and the staff very caring. I have only heard positive feedback from residents and families." Another had fed back, "I would feel happy for my own family to be cared for here."
- The registered manager described the staff as "loyal, caring and passionate." They continued, "I love the relationships they have with the residents. The care they provide is outstanding. They listen and take on board what I say. They are a good team and bounce off each other. They share ideas as they all have different skills sets. I'm very proud of all my team!"

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 had a good understanding of the duty of candour. They said, "We need to be open and transparent with people using and receiving care in the home. Always be honest, good recording, apologise, take responsibility, resolve what has happened, speak to all relevant people."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The registered manager and staff had a clear understanding of their roles and responsibilities. The registered manager said, "Thus includes being responsible for the safety and wellbeing of residents, staff and the building. Ensuring all legislation and guidelines are followed."
- The registered manager had a good understanding of CQC requirements, in particular, to notify us, and where appropriate the local safeguarding team, of incidents including potential safeguarding issues, disruption to the service and serious injury. This is a legal requirement.
- The registered manager was highly thought of. Staff said: I have never worked for someone who is so caring, the best boss I have had to date", "I feel [registered manager] is a fantastic manager. I feel [name] is very professional in every way", "[registered manager] has worked really hard to get [the home] how it is now. Is very passionate about the home and people who live there", "[registered manager] is a very fair, understanding and caring person who I have the utmost respect for" and, "[registered manager] has their finger on the pulse and knows what is happening here."
- People and relatives felt the home was well managed. Comments included: "Management is good, easy to contact, usually someone available, can always get hold of someone even if you have to wait for a call back", "I think the place is very well led" and, "[registered manager] is brilliant, is on it all the time, never lets anything slip that is to the benefit of people living there."
- Staff felt appreciated. Their comments included: "I do feel appreciated every day I work I'm always thanked for all I do", "I feel very appreciated at Broadwindsor House and [registered manager] will always thank us especially if we have had a challenging day", "I do feel appreciated all the time", "I feel appreciated from the laughter, random gifts from the manager, the kindness and flexibility from [registered manager]", "In the short time I have been here I have been made to feel very appreciated" and, "[registered manager] will often tell staff they really appreciate the hard work they do."
- Staff felt supported by the registered manager. They said, "The management has been my absolute rock during having [health condition] treatment. So much support it is beyond words", "I would not have been able to stay here if [registered manager] hadn't been so kind and understanding", "If we feel a bit low or something is going on in our personal life [registered manager's] door is always open, has been very supportive to me as a family member is [unwell] and "Management is really good, couldn't ask for a better manager. Really kind, compassionate and caring."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The home undertook annual satisfaction surveys to gather the views of people, relatives, staff and professionals. The last was in January 2023. Comments had included: "I love living here. I wouldn't be anywhere else", "I am very glad I am here", "We could not be happier, more than happy at last, gave the family peace of mind" and, "The manager is very experienced and gives me great confidence that my mother is properly looked after and cared for." A person told us, "I feel listened to and able to express my views."
- Team meetings were held and well attended. Staff were given opportunity to raise concerns and influence the direction of the home.
- The registered manager supported staff when encountering challenges inside or outside of work. For example, one staff member said, "I feel [registered manager] is always there for me incredibly supportive and kind. Always offers guidance and tries to make every situation better for me." Another told us, "[registered manager's] door is always open for us to talk to her whether it's personal or work related."

Continuous learning and improving care

- The registered manager and deputy manager undertook various audits providing a robust oversight of quality and risk in the home. These audits included care plans, health and safety, fire safety, training and call

bell response. Where audits identified issues, these were quickly resolved.

- Staff were encouraged and supported to develop their skills and obtain further qualifications. Staff told us, "If there's any other training we feel we want to do we are supported in doing this", "We are always encouraged to develop new skills" and, "I am encouraged to do courses and feel that I could ask to do any course that I thought relevant to my job if and when I wanted/needed to" and, "[registered manager] always encourages staff to improve their skills and qualifications."

Working in partnership with others

- The home had established and maintained good working relationships with other organisations such as GP surgeries, social workers, district nursing teams and local frailty team.
- The home recognised the part it played in the local community. This included strong links with volunteers, a village school and donating to local events.
- The home had enabled college students to take on roles within the home and worked alongside college tutors to ensure they were supported effectively.