

Durham Care Line Limited

Bowe's Court Care Home

Inspection report

Bowes Court
Stones End, Evenwood
Bishop Auckland
County Durham
DL14 9RE

Date of inspection visit:
25 May 2021

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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

Bowe's Court provides personal and nursing care for up to 23 younger adults living with a range of conditions such as Huntington's Disease and physical and learning disabilities. At the time of inspection 23 people were using the service.

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

People and their relatives were very positive about the service and the care provided. One relative told us, "My relation could not be in a better place."

Incidents and accidents were investigated, and actions were taken to prevent reoccurrence.

Staff understood their responsibilities for keeping people safe. There was a proactive approach to assessing and managing risk which supported people to be as independent as possible. Safe recruitment practices were in place to help ensure that only suitable people were employed at the service.

Medicines were managed safely. Reviews were regularly undertaken which involved the person, health and social care professionals to ensure people's physical and mental health needs were met and changes responded to quickly.

The home was clean and tidy. Staff wore appropriate PPE and we observed good infection control practice.

People were treated in a respectful manner by all staff. People felt listened to and were actively involved in the running of the home and were being supported to access rehabilitation opportunities.

People, their relatives and staff said the management team were supportive. Systems were in place to monitor the quality of care provided and continuously improve the service. The management team and staff worked with a wide range of health professionals both internally and externally to the service, to achieve positive outcomes for people's health and well-being.

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 requires improvement (published 10 October 2019) and there were two breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 6 August 2019. Two breaches

of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve the safe recruitment of suitable staff and good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions safe and well-led which contain those requirements.

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.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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

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?

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.

Bowe's Court Care Home

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 Care Act 2014.

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 carried out by one inspector.

Service and service type

Bowe's Court 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 did not have a manager registered with the Care Quality Commission, although the current manager had applied to become the registered manager. This means the provider is 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.

We visited the service on 25 May 2021.

What we did before the inspection

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service

and made the judgements in this report.

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

During the inspection

We spoke with four people who used the service and two visiting relatives.

We spoke with seven members of staff including the provider's governance and compliance manager, the head of care outcomes, a nurse, the chef, a Care Home Assistant Practitioner (CHAP), a senior care assistant and three care assistants. We also spoke with the GP for the service.

We reviewed a range of records. This included three people's care records. 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 focused inspection published in October 2019 this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Systems were in place for the management of medicines so that people received their medicines safely.
- Care plans around people's medication were in place and guidance to support the administration of medicines prescribed on a 'when required' basis were in place.
- Staff were trained and were assessed as competent to administer medicines. The provider's consultant pharmacist had provided an additional level of scrutiny and support that had helped drive better medicines management.

Staffing and recruitment

- There were safe staffing levels throughout the service. There was still a higher level of agency nurse usage and we discussed with the provider ways of ensuring effective handovers and communication.
- Staff had checks on their references and Disclosure and Barring Service prior to commencing work at the service.

Preventing and controlling infection

- Systems were in place to ensure there were effective and robust infection control processes at the service.
- Staff wore PPE correctly, and there was plenty of securely held stocks.

Assessing risk, safety monitoring and management

- Risks related to the delivery of care and the safety of the environment within the home were safely managed.
- People's care records contained evidence that risks were regularly revised and updated. We asked the home to ensure that there was a checklist to ensure any new admissions had risk assessments in place within 72 hours.
- The service was embedding the Positive Behaviour Support approach to ensure that guidance and training for staff regarding de-escalation when people became distressed was consistent across the service. We spoke with a new staff member who told us they found the training to offer de-escalation very beneficial.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People were safeguarded and protected from potential abuse. Staff knew how to recognise, and report safeguarding concerns and felt they would be listened to.
- Safeguarding matters along with incidents and accidents were recorded and reviewed. Any actions to reduce any risks were implemented.

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 requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection the provider's governance audits and quality monitoring checks had failed to identify the lack of suitable and safe recruitment of staff. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Quality monitoring of the service was in place. The service was further developing systems such as accident and incident monitoring to ensure any follow up actions or lessons learnt were completed and embedded.
- Timely statutory notifications to CQC had been received following any significant events at the service.

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

- The management team and staff demonstrated a commitment to provide meaningful, person-centred care and support that met people's individual needs. One relative told us that during the lockdown they also missed the staff team as much as their own relation, they said, "They treat us like their own family too."
- Staff were happy in their work. They described the management team as approachable and supportive. One told us, "We are good team here, yes we have the ups and downs you get in any team but we do look out for each other really well."

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; Continuous learning and improving care

- Policies were in place that identified the actions staff should take in situations where the duty of candour would apply.
- The registered manager understood their duty of candour, to be open and honest when things went wrong. For example, when incidents had occurred in the home, these were immediately communicated to relatives and reported to professionals appropriately.

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

- Feedback on the quality of the service was actively sought from people, relatives, staff and professionals. We saw people had asked for more access the community and a new adapted car had been provided and was in use.
- People were involved in all aspects of reviews about their care and support. One person told us, "Having the chance to have this rehab makes me so happy."
- Staff worked with a wide range of internal and external therapists and health professionals. We received some comments from the home's GP that we shared with the management team. They told us they would meet with the GP to take this feedback forward.