

Longwood Lodge Care Limited

Broom Lane Care Home

Inspection report

Broom Lane
Rotherham
South Yorkshire
S60 3NW

Tel: 01709541333

Date of inspection visit:
19 October 2022

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23 November 2022

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

Broom Lane Care Home provides personal care to older people with a range of support needs, including dementia. It is divided into 3 discrete units and accommodates up to 60 people. There were no vacancies at the time of the inspection.

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

We were assured people were being cared for safely. The provider continued to demonstrate a high regard to the risks presented by the ongoing COVID-19 pandemic. Relevant risk assessments had been carried out, and staff had received appropriate training in relation to infection prevention and control.

Medicines were safely managed, and staff had been trained in relation to medicines management. Records of medicines received, administered and returned were clear, and storage arrangements for medicines were appropriate.

Staff had received training in relation to safeguarding, and the provider had suitable arrangements in place for responding to any incidents of suspected abuse. Relatives told us they believed the home to be a safe place.

Staff told us they felt supported by management within the home. The registered manager was skilled and experienced, and supported by a deputy manager and area manager. There were formal and informal arrangements in place for dialogue between staff and managers.

Recruitment was undertaken safely, with appropriate background checks before staff started work.

Governance arrangements were suitable to ensure the provision of safe care, with the area manager telling us about recent incidents and lessons learned. The management team worked transparently with external agencies, such as healthcare professionals and the local authority, to ensure people were well cared for.

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.

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 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 January 2022)

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 remains 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 Broom Lane Care Home on our website at www.cqc.org.uk.

Why we inspected

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

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

Broom Lane 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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by 1 inspector

Service and service type

Broom Lane Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under 1 contractual agreement. Broom Lane Care Home 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

The inspection was unannounced.

Inspection activity started on 19 October 2022 and ended on 28 October 2022. We visited the home on 19 October 2022 and contacted people's relatives and staff by phone and email following this.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback

from the local authority. 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 2 people using the service and 6 people's relatives about their experience of the care provided. We spoke with 6 staff including the area manager. We reviewed a range of records. This included 3 people's care records and a sample of medication records. We looked at 3 staff recruitment files and 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 our last inspection we rated this key question requires good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Risks were safely managed within the service.
- Where the provider had identified people were vulnerable to risk, for example in relation to their nutrition or skin integrity, monitoring records were in place.
- Regular safety checks were carried out on the environment and equipment. We noted some aspects of the environment appeared to be worn and would benefit from some maintenance. The area manager confirmed to us this work would be commenced immediately.

Systems and processes to safeguard people from the risk of abuse

- People's relatives told us they believed the service to be safe.
- The provider had appropriate systems and processes in place to protect people from the risk of abuse and avoidable harm. These were overseen by the management team.
- Staff told us they had received training in relation to safeguarding, and the provider's training records confirmed this.
- Safeguarding alerts were raised externally when required to the local authority and the CQC.

Staffing and recruitment

- There were enough staff employed to meet people's needs, although we had received feedback prior to the inspection from some staff who did not feel this to be the case. The area manager told us they were monitoring this, and felt some issues may have arisen based on when staff took smoking breaks. They assured us they were taking action around this.
- The provider regularly reviewed dependency levels to check the staffing levels continued to meet people's needs.
- Staff were recruited safely. References and Disclosure and Barring Service (DBS) checks were requested prior to new staff commencing employment. 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 within the home.
- Staff had received training in medicines management.
- Guidance for staff to safely administer medicines prescribed 'as required' (PRN) was in place, although after discussion the area manager said further detail would be added to this guidance.
- Controlled drugs were stored appropriately, and stock levels were accurate.

- The provider had systems in place for the receipt, storage, administration and disposal of medicines. Audits were completed 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 meeting shielding and social distancing rules.
- 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 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 facilitated visits for people in accordance with government guidance. Meetings at the home for people's relatives had resumed, and people were able to receive visits from their loved ones.

Learning lessons when things go wrong

- Accidents and incidents were reported and recorded correctly, including to external bodies where required.
- The area manager had a good oversight of incidents within the home, and gave examples of how changes had been implemented following any untoward incidents or accidents.

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.

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 requires improvement. At this inspection the rating for this key question has 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; continuous learning and improving care

- The management team were committed to continuous improvement and raising standards.
- The quality monitoring arrangements allowed managers to have oversight of how care was being delivered and identified any areas for improvement.
- Staff received a good level of training and understood their roles.

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

- The management team and staff were committed to achieving positive outcomes for people.
- Assessments of people's needs included information about their personal preferences, so that care could be delivered in a person-centred way.
- People's relatives told us staff knew their relatives well, with one saying: "They know all [my relative's] funny ways and they work with that"

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; Working in partnership with others

- The management team understood their duty of candour, and records we checked showed they were open with people's relatives when things went wrong.
- The provider worked well with other organisations, such as the local authority or healthcare providers, and welcomed their input.

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

- The provider had appropriate methods in place for engaging with people, their relatives and staff.
- Meetings for people's relatives had re-commenced following the restrictions of the COVID-19 pandemic being lifted, and staff meetings took place regularly. The area manager told us they valued feedback from staff and visitors.
- The provider regularly surveyed staff, people using the service and their relatives to get feedback about their experience of the service. The vast majority of responses were positive, with the provider taking action where shortfalls were raised.