

Belgravia Care Home Limited

Belgravia Care

Inspection report

406 North Promenade
Blackpool
Lancashire
FY1 2LB

Tel: 01253595567

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05 February 2021

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service

Belgravia Care is registered to provide care for up to 25 older people, people living with dementia, mental health or physical disabilities. The home is situated on the promenade at North Shore, Blackpool. There are bedrooms on all floors. There are choices of communal lounges and dining areas. There were 25 people who lived at Belgravia Care when we inspected.

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

People and their relatives told us they felt they were cared for safely by the staff team. However, this did not reflect our findings in relation to infection control and cleanliness of the home.

The management team had assessed risks to minimise the likelihood and spread of infection and in relation to COVID-19. However, the home was not clean or hygienic, which increased the risk of infection and was unpleasant for people. Infection control was not of a safe standard for reducing and managing the risk of infection outbreaks. The registered manager and provider had carried out infection control audits but had not identified the issues we found.

The home was not always well-led, and governance was not always effective. Although the registered manager carried out audits, the system for auditing and monitoring the service did not always identify issues of concern. After the inspection, the provider arranged a deep clean of the home, routine cleaning was increased, additional cleaning staff were employed and audits were improved upon.

People's care records were personalised and informative. People's care and support was assessed which helped people to manage or avoid preventable risks. We received positive feedback from people supported about the home. They told us they felt the registered manager and staff team involved and informed them about their care and any changes in the home.

Staff recruitment procedures were robust, and staff received regular training to help them provide the skills needed to give people good care.

Staff spoken with demonstrated an understanding about how to safeguard people from the risk of abuse. Staff supported people with their medicines safely and the registered manager audited medicines regularly.

After the inspection, the provider arranged a deep clean of the home, routine cleaning was increased, and infection control practice improved.

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 last report (8 November 2018).

Why we inspected

We received concerns in relation to care practice, infection control and management of the home. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection. The overall rating for the service has changed from good to requires improvement. This is based on the findings at this inspection.

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 coronavirus and other infection outbreaks effectively.

We have found evidence that the provider needs to make improvements. Please see the safe and well-led sections of this full report.

You can see what action we have asked the provider to take at the end of this full report.

The provider began to take action shortly after the inspection to mitigate the risks identified. This has made the home safer than it was on inspection. The provider arranged a deep clean of the home which improved infection control. They also increased cleaning staff and improved monitored of the environment.

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

Enforcement

We are mindful of the impact of the COVID-19 pandemic on our regulatory function. This meant we took account of the exceptional circumstances arising as a result of the COVID-19 pandemic when considering what enforcement action was necessary and proportionate to keep people safe as a result of this inspection. We will continue to discharge our regulatory enforcement functions required to keep people safe and to hold providers to account where it is necessary for us to do so.

We have identified breaches in relation to keeping the home clean and hygienic and, monitoring that this is carried out, at this inspection.

Please see the action we have told the provider to take at the end of this report.

Follow up

We will request an action plan for the provider to understand what they will do to improve the standards of quality and safety. We will work alongside the provider and local authority to monitor progress. We will 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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led

Details are in our safe findings below.

Requires Improvement ●

Belgravia Care

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 an inspector and a mental health act reviewer.

Service and service type

Belgravia Care 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 had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was announced shortly before arriving at the home. We inspected because we had received concerns about care and infection control and needed to discuss the safety of people supported, staff and visitors.

We started the inspection activity on 05 February 2021 and ended on 18 February 2021. This included telephone and video calls to people supported and staff. We requested other information to be sent to us by the service.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included notifications we had received from the provider, about incidents that affected the health, safety and welfare of people supported by the service. We sought feedback from professionals who work with the service, including Blackpool local authority and Healthwatch. We used this information to plan our 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.

Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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.

During the inspection

We spoke with four people who lived at Belgravia Care about their experience of the care provided. We spoke with the registered manager, and one of the directors and four care and ancillary staff.

We reviewed a range of records. This included two people's care records. We looked at three staff recruitment records. We also looked at a variety of management records. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead in ongoing improvements. We walked around the building to check if the home was clean, hygienic and a safe place for people to live.

After the inspection we spoke with the provider who began making the necessary improvements and sent us information in about this.

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 inspection this key question was rated as good. At this inspection this key question has now deteriorated to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Preventing and controlling infection; Learning lessons when things go wrong

- We were not assured the home was clean and hygienic. The service was not visibly clean when we inspected. Enhanced cleaning and effective schedules for cleaning were not in place. We found the laundry room, kitchen bedrooms, bathrooms and corridors throughout the home were unclean. This exposed people to the risk of infection and was unpleasant for people to live in.

People who used the service were placed at risk because robust procedures and practice to reduce the risk and spread of infection were not in place. This was a breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

The provider responded promptly after the inspection. They told us a deep clean of the home had been carried out and suitable checks of the environment were in place.

- There was an up to date infection control policy. Staff travelled to and from work without using public transport. They changed in and out of their uniforms at work to reduce the risks of transporting COVID-19 or other viruses. There was an area within the home for staff to put on and take off uniforms. There were several PPE stations throughout the home as needed and there were washing and sanitising facilities available. However, the poor cleanliness of the home reduced the effectiveness of this.
- When there was a COVID outbreak, several staff moved into the home until the outbreak cleared, to reduce the footfall to and from the home and curtail the risk of further infection. During the inspection we observed staff used PPE safely. Staff tested people, and staff for COVID-19 regularly. Staff checked temperatures of staff and essential visitors and offered tests to essential visitors on entering the home. Due to the national COVID lockdown when we inspected, family and friends were only able to visit in exceptional circumstances.
- People supported, and staff had been risk assessed in relation to COVID-19. This meant the management team knew who may be at higher risk of contracting COVID-19 or should be shielding, and could take action to reduce risks. Risk assessments for visitors and people admitted or discharged from the home were completed.
- The registered manager reported notifications to CQC and other relevant external agencies. They reflected on accidents and incidents that did not go as well as planned to see if there was anything they could have done in a better way.

After the inspection, the provider arranged a deep clean of the home. They also employed an additional cleaner to provide the extra help needed. An infection control health professional visited the home to give advice and support. The registered manager increased the cleaning regime, so staff were working in a safe

way. However, we will want to check that the cleanliness of the home is sustained and consistent.

We have also signposted the provider to resources to develop their approach.

Staffing and recruitment

- People supported and staff felt there were enough staff to support them with their care and support needs. However, Belgravia Care is a large building and cleaning hours were insufficient to keep the building clean, as evidenced on the inspection.
- Recruitment was carried out safely. The registered manager arranged police and reference checks and induction training when recruiting new staff. New staff who had not worked in care previously had been booked onto the care certificate training to assist them in their role.

Systems and processes to safeguard people from the risk of abuse; Assessing risk, safety monitoring and management

- People said they felt safe and protected from the risk of abuse and avoidable harm. Staff were trained in safeguarding adults who may be vulnerable and staff spoken with knew what to do if they felt someone was being harmed or abused.
- Senior staff completed informative and person-centred care records and risk assessments. These included COVID related planning and mental capacity assessments. However, as the care records were lengthy, a short profile to allow staff to quickly see the main care and preferences for individual would be beneficial.
- We looked at equipment checks as well as safety certificates for gas, electrical installations and lift servicing on the inspection. The provider had kept these up to date and actions taken when needed.

Using medicines safely

- People received their medicines safely. Staff gave people their medicines as prescribed and in line with good practice guidance. Medicine administration records (MARs) were completed accurately and medicines stored securely. Senior staff audited medicines regularly to make sure medicines were given as prescribed.

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 good. At this inspection this key question has deteriorated to requires improvement. This meant the service management and leadership was inconsistent and did not always support the delivery of high-quality care

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- CQC was not assured there were effective governance systems for management oversight and leadership and audit processes, in particular for infection prevention and control and cleanliness. Quality assurance systems were in place but had not identified the issues we found. The management team did not always follow best practice guidelines. This increased the risks to people supported, staff and visitors.

The ineffectiveness of this auditing and monitoring system placed people at risk of avoidable harm. The above matters demonstrate a breach of Regulation 17 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (Good Governance).

The provider responded promptly after the inspection. They told us they had arranged a deep clean of the home, increased cleaning staff and completed monitoring checks of the environment.

- We advised the registered manager of the CQC website, local authority support, Public Health England and Skills for Care guidance and emphasised the importance of checking this frequently.
- There was a clear staffing structure and lines of responsibility and accountability which people understood.

Continuous learning and improving care; Working in partnership with others

- The registered manager had provided learning and development opportunities through meetings, discussions and training to assist in providing good outcomes for people.
- The management team reviewed accidents and incidents to see if lessons could be learnt and to reduce risks of similar events.
- The registered manager maintained good working relationships with partner agencies
- Staff had developed links within the local community, although most of these were on hold because of the restrictions in relation to the Coronavirus pandemic.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People were complimentary about the registered manager and staff team. They told us they felt they

involved and informed them about their care and any changes in the home. People said the registered manager was easy to talk with, approachable, and kind. One person told us, "I am fine here. I can talk with [registered manager]. The staff are good, I am well looked after." Another person said, "They are all very excellent especially [registered manager]."

- Staff told us they felt supported by the registered manager. One staff member said, "I love it here. It is the best job I have ever had." Another staff member told us, "[Registered manager] is really good. I could easily go to her if I had any worries."

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 provider and registered manager understood the requirements and their responsibilities under the duty of candour.
- The provider met their responsibilities to apologise to people and/or their relatives when mistakes were made and acted on their duty of candour.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	<p>Regulation 12 HSCA RA Regulations 2014 Safe care and treatment</p> <p>People who used the service were placed at risk because robust procedures and practice to reduce the risk and spread of infection were not in place. This was a breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.</p> <p>Regulation 12 (1) (2) (b) and (h).</p>
Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	<p>Regulation 17 HSCA RA Regulations 2014 Good governance</p> <p>The provider had failed to operate effective governance systems to monitor the quality of care and safety of service users and for the running of and management of the home. This is a breach of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: Regulation 17 1, 2,(a) (b)</p>