

Queensbridge Care Limited

Queensbridge House

Inspection report

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

Inspected but not rated

Summary of findings

Overall summary

About the service

Queensbridge House is a residential care home providing accommodation and personal care to up to 27 people. The service provides support to younger people who live with complex mental health. Some of whom receive treatment under the Mental Health Act 1983 and some have also offended and been through the criminal justice system. The service supports these people to step down from more secure settings such as prison or secure mental health units, to live again in the wider community. The service also supports older people who live with dementia.

At the time of our inspection 8 people with mental health needs and 6 people with dementia care needs were receiving support. People were accommodated in 1 adapted building on 2 separate units according to their needs.

This was a targeted inspection which only reviewed safe ways of working on the mental health unit. Based on our inspection the provider had taken action to improve people's safety; care was planned and delivered safely.

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

The provider had reviewed their policies and procedures and amended these to further support safe ways of working and to uphold people's human rights. All staff spoken with had a good understanding of the provider's policies and safe ways of working guidance.

People's risk assessments and care plans had been reviewed and improved. Assessments and care plans provided staff with clear guidance on how to support people safely, in accordance with the provider's policies and procedures.

Staff had received additional training to underpin their knowledge. All staff spoken with had a good understanding of people's needs and how to reduce risks to people.

People's care and support had been reviewed by commissioners of care. Health care professionals were involved in developing and monitoring people's care. We spoke with one visiting health care professional who was happy with the care being provided by the service to their patient.

Action had been taken to improve the safety of the environment. This included systems in relation to fire and environmental safety.

At the time of the inspection, we observed people receiving the care which supported their mental and physical wellbeing.

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 7 August 2023).

The provider completed an action plan after the last inspection to show what they would do and by when to improve.

Why we inspected

We undertook this targeted inspection to review the immediate action taken by the provider, to improve people's safety, following our inspection on 3, 4 and 22 May 2023. At this inspection we have not followed up the breaches of regulation identified in the inspection.

We use targeted inspections to follow up specific areas of enforcement or concern. Targeted inspections do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

This inspection only looked at certain areas of the safe key question. Please see our findings under this section in the full report.

The overall rating for the service has not changed following this targeted inspection and remains requires improvement.

We found no evidence, during this inspection, that people were at risk of harm from the concerns identified in our previous inspection (3, 4 and 22 May 2023).

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

Follow up

We will review the action plan from the provider in relation to the last inspection 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 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?

Details are in our safe findings below.

At our last inspection we rated this key question inadequate. We have not reviewed the rating as we have not looked at all of the key question at this inspection.

Inspected but not rated

Queensbridge 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.

This was a targeted inspection to review the immediate actions taken by the provider to improve the safety of the service following our May 2023 inspection.

Inspection team

One inspector carried out this inspection with the support of a CQC senior specialist (mental health).

Service and service type

Queensbridge 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. Queensbridge 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.

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. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We reviewed 4 people's care records which included care plans and risk assessments. We spoke with 5 staff, which included the registered manager, deputy manager, 1 administrator/support worker and 2 team leaders. We also reviewed 3 policies and records and actions taken in relation to the environment.

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 this key question was rated inadequate. We have not changed the rating as we have not looked at all of the safe key question at this inspection.

The purpose of this inspection was to review the immediate actions taken by the provider to improve safe ways of working. We will follow up on the breaches of regulation previously identified, at the next inspection. The areas of this key question not inspected during this inspection will also be inspected at our next inspection of the service.

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

- The provider had reviewed their referral and admissions policy making the eligibility criteria clearer. This includes the service not being able to support people with a primary diagnosis of drug or alcohol abuse.
- The provider had revised their restraint policy (operated in conjunction with their management of violence and aggression policy and other safeguarding policies) this clearly outlined the services approach in this area. The provider had also introduced a new observations policy. This categorises levels of observations and when and how these would be used. Both these policies supported safe delivery of care and upheld people's human rights.
- People's care plans had been reviewed and updated to better reflect people's needs. These provided clear detail and guidance for staff on how to support people. Information related to the level of observation and therapeutic support people required had improved.
- The provider had introduced a risk assessment framework which helped staff determine the level of risk in a consistent way. Risk assessments had been reviewed and people's care plans provided staff with clear guidance on how to reduce and mitigate risks to people.
- Escalation and de-escalation care plans had been incorporated. These provided staff with detailed information about what may escalate a person's distress and the support they should be given to regain their wellbeing. These plans were implemented in accordance with the provider's policies and procedures and advice from healthcare professionals.
- Staff had received additional training in prevention and management of violence and aggression (PMVA). This was delivered in conjunction with the provider's restraint and management of violence and aggression policies. All staff spoken with were clear on the limitations and practices the provider's policies referred to.
- Staff confirmed they attended meetings when at work which discussed the management of known risks and new emerging risks.
- On the day of the inspection staff received training on ligature risk and management.
- The provider had responded to recommendations made by the local authority's fire safety team to improve fire safety. Action had been taken in relation to fire prevention and individual fire risk assessments had been completed where necessary. People had improved personal emergency evacuation plans (PEEPs) in place, giving information about the support they would need to evacuate the building in the event of a fire.

- Improvements had been made to how windows were restricted to prevent falls from windows of height and staff were ensuring chemicals hazardous to health were stored safely.
- The cardiac defibrillator had been serviced and placed in a more accessible position.
- The registered manager confirmed that the increased monitoring of medicines management, introduced at the last inspection, continued to support safe management of people's medicines.