

# Amore Elderly Care (Wednesfield) Limited

# Bentley Court Care Home

## Inspection report

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Date of inspection visit:  
10 June 2021

Date of publication:  
05 July 2021

## Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service well-led?

Requires Improvement 

# Summary of findings

## Overall summary

### About the service

Bentley Court is a nursing home providing personal care to 37 people at the time of the inspection, some of whom were living with dementia. The service can support up to 76 people in a purpose-built building although at the time of the inspection the provider was limiting occupancy to 41 people.

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

People could not be assured that the provider quality assurance systems would identify all areas of improvements required at the home.

People were assured the environment would be safe as the provider maintained the building and carried out remedial work in a timely manner. Equipment was serviced within the manufacturer's timescales.

People could be assured by the systems in place to assess and manage their safety.

People could be assured that if they were involved in an accident or incident, the provider would take step to learn from them and take action to prevent a re-occurrence.

People's care plans were reflective of their current needs.

People were supported by enough staff who supported them in a timely manner and staff members received training on how to keep people safe from the risk of abuse.

People's medicines were managed effectively.

We found there was a positive culture shared between staff to promote good outcomes for people.

Managers and staff were open and honest. People, their relatives and staff had the opportunity to make changes to the service.

Staff worked in partnership with other healthcare professionals.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was requires improvement (published 8 November 2019).

### Why we inspected

The inspection of [insert location name] commenced on [insert date] and was unannounced.

The inspection was prompted in part by notification of an incident following which a person using the service developed serious health conditions. This incident is subject to a criminal investigation and as a

result this inspection did not examine the circumstances of the incident. However, the information shared with CQC about the incident indicated potential concerns about the management of health conditions, fluid intake and the environment. This inspection examined those risks. We found no evidence during this inspection people were at risk of harm from this concern. Please see the safe and well led sections of this full report.

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 remained the same.

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.

#### Follow up

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 safe.  
Full details are in the safe section below.

Good 

### Is the service well-led?

The service was not always well led.  
Full details are in the well led section below.

Requires Improvement 

# Bentley 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 completed by three inspectors.

#### Service and service type

Bentley Court Care Home is a 'nursing home'. People in nursing 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 currently registered with the Care Quality Commission. However, the manager was in process of applying for their registration at the time of our inspection. This means that they (once registered), along with the provider, will be 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; however, we telephoned the provider from outside the home because of the risks associated with Covid-19. This was because we needed to know of the Covid-19 status in the home and discuss the infection, prevention and control measures in place.

#### 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 Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

During the inspection

We spoke with three people who used the service about their experience of the care provided and we spent time in the communal area observing the support people received. We spoke with nine staff members including the manager, quality director, nurses, support workers and domestic staff. We reviewed a range of records. This included four people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. 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 inspection this key question was rated as requires improvement. At this inspection this key question has improved to good. This meant people were safe and protected from avoidable harm.

### Staffing and recruitment

- At the time of the inspection the home was using a large number of agency staff to cover shortfalls in their staff team. Whilst we saw no direct impact from this on people using the service, we were concerned that this could reduce the consistency of the care provided to people by staff who are familiar and know them. During the inspection we shared these concerns with the manager who explained they were in the process of recruiting more permanent staff and took measures to try and use the same agency staff in the interim.
- Staff were recruited safely. Staff recruitment files included checks on their identity, character, and work history. Staff employment was subject to satisfactory disclosure and barring service (DBS) clearance.
- On the days of our inspection we observed there were enough care staff to meet people's needs and call bells were answered, so people did not have to wait too long for support.
- The provider used a tool to assess the number of staff required to ensure that there were enough staff available to meet people's needs.

### Assessing risk, safety monitoring and management, staffing and recruitment

- People living at Bentley Court Care Home were assessed for risks to their safety and these were reviewed regularly.
- People were supported with health conditions through risk assessments and plans of care written which staff followed to help maintain people's health.
- People were encouraged to maintain healthy levels of fluid intake, staff recorded when people had a drink and these records were checked during daily meetings to identify when people needed support and encouragement to drink more.
- Staff at the home carried out regular checks on the environment to ensure it remained safe.
- The provider showed us records of checks of equipment, water hygiene and of gas, electrical and fire safety systems and equipment that had been carried out by registered contractors as required by law.

### Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at Bentley Court Care Home, one person said, "I feel very safe living here and no there are staff here to help me"
- The provider had policies and procedures in place to support staff's understanding about how to safeguard people from the risk of potential abuse.
- Staff had received training in recognising the signs of abuse and the procedures to follow if they had concerns. A staff member told us, "If I had concerns, I would report them to my line manager and if I felt I was not listened to I would report them to it somebody more senior or direct to the safeguarding department."

### Using medicines safely

- Medicines were managed by qualified nurses who received regular competency assessment to ensure their skills were up to date.
- We observed medicines were stored in accordance with the pharmaceutical manufacturers' guidance.
- People told us they received their medicines as directed by the GP and the records we looked at confirmed this.
- Nurse's took responsibility for administering medicines and we observed they did this with patience and kindness.
- Systems to manage medicines were organised and ensured safe and timely administration of medicines to people. Staff were following safe protocols for the receipt, storage and disposal of medicines.
- During the inspection we saw records of GP visits where people's medicines were discussed and changes were suggested by staff, for example we saw one person's lunchtime medication had been changed as they were often asleep at the time it was due.

### Preventing and controlling infection

We reviewed the infection control measures in place in light of the COVID 19 pandemic.

- We were assured that the provider's infection prevention and control policy were up to date.
- 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 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 accessing testing for people using the service and staff.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.

### Learning lessons when things go wrong

- We saw accidents and incident were fully documented and investigated to identify ways of preventing them from happening again.



# 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 remained the same. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of 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 did not have effective systems in place to monitor and drive good and safe care provision. 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.

- Regular quality assurance checks were carried out by the management team of the home and by personnel from the provider. These covered areas such as the environment, safety measures, infection control and medicines. Whilst we saw significant improvements in these since the last inspection, during the inspection we saw several stair gates fitted to people's bedroom doors. We were concerned as these were unsuitable as they created a falls risk. We shared our concerns with the manager who explained that they had been used to reduce a historic risk which was no longer present and took immediate action to remove them or make them safe where people asked them to remain. Further strengthening of the systems was required to ensure all areas are reviewed for improvements
- At the time of our inspection the manager was not registered with us, however they were in the process of applying to register. This is a ratings limiter for well-led, therefore we cannot improve the rating of requires improvement.
- The manager understood their regulatory requirements. This included displaying their previous inspection rating and submitting notifications to CQC regarding certain incidents and events.
- The manager had a plan for improvements at the service and we saw that this was regularly reviewed for progress.

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

- There was a person-centred culture in the home. Each person was treated as an individual with their own unique needs.