

Crown Care IV Limited

Balmoral Court

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Inspected but not rated

Is the service responsive?

Inspected but not rated

Is the service well-led?

Outstanding ☆

Summary of findings

Overall summary

Balmoral Court is a care home providing accommodation and nursing and personal care to older people and younger adults. The service can support up to 99 people. People are accommodated in four units, including a male only and a female only unit. People are supported with physical and mental health needs, including people living with a dementia related condition. At the time of inspection 93 people were using the service.

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

The service was exceptionally well led. The provider's vision and values were person-centred to make sure people were at the heart of the service. This vision was driven by the exceptional leadership of the registered manager.

The service supported some people with complex needs. There was clear evidence of collaborative working and excellent communication with other professionals to help meet people's needs and maintain their placement wherever possible. A healthcare professional commented, "I continue to enjoy working with the team at Balmoral. The management maintains a stable staff team and communicates well with my practice."

People's equality and diversity as unique individuals with their own needs was respected by staff. The service was flexible and adapted to people's changing needs and wishes and promoted their independence. People's care records were well-personalised and up-to-date.

There was a strong and effective governance system in place. Processes were in place to manage and respond to complaints and concerns. People and relatives recognised that their views were valued and respected.

People and relatives stated staff were kind, caring and supportive of people and their families. Comments included, "Carers are amazing, I take my hat off to the staff" and "I like the way staff do things, they are very polite, very friendly and always have a smile."

People were involved in decisions about their care. They 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.

People said they felt safe with the care they received. One relative commented, "Staff have a nice attitude with people, they are safe the way staff support them." There were enough appropriately skilled staff to meet people's assessed needs. Robust vetting procedures were in place when recruiting new staff. Staff training was up-to-date.

The service was following safe infection prevention and control procedures to keep people safe.

Medicines management procedures were in place. People did not report any concerns with their medicines.

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 July 2019).

Why we inspected

This focused inspection was prompted by the notification of a specific incident, following which a person using the service died. This incident was subject to a criminal investigation. As a result, this inspection did not examine the circumstances of the incident. The information CQC received about the incident indicated concerns about the management of people's safety. This inspection examined those risks and we reviewed the key questions of safe and well-led and parts of effective and responsive. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the relevant domains of this report.

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 reviewed the information we held about the service.

Ratings from previous comprehensive inspections for those key questions inspected but not rated were used in calculating the overall rating at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Balmoral 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 effective?

Inspected but not rated

Inspected but not rated.

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Is the service responsive?

Inspected but not rated

Inspected not rated.

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-led findings below.

Balmoral Court

Detailed findings

Background to this 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. This was a focused inspection to check whether people were receiving safe care and treatment after a serious incident had occurred with a person.

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

The inspection site visit was carried out by an inspector and two pharmacist inspectors. A second inspector, a professional advisor and two Experts-by-Experience supported the inspection remotely. An Expert-by-Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Balmoral 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 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. Having consideration of the coronavirus pandemic, we gave the registered manager a short period of notice of our arrival. This was to ensure safe systems were in place to protect everyone.

What we did before the inspection

We reviewed information we had received about the service since the last inspection, including the

notifications we had received from the provider. Notifications are changes, events or incidents the provider is legally obliged to send us within required timescales. 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 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 used all of this information to plan our inspection.

During the inspection

We spoke with 16 people and 26 relatives by telephone and video calls, about their experience of the care provided. We made observations around the service.

We reviewed a range of records. This included eight people's care records. We reviewed multiple medicine administration records and accompanying records. We looked at five staff files in relation to recruitment and staff supervision. A variety of records relating to the management and governance of the service were reviewed.

We spoke with nine members of staff, including the registered manager, activities coordinator, administrator, nursing and care staff.

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 good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Staff were trained in safeguarding and had access to guidance about what to do to report any concerns about abuse.
- People and relatives said people were kept safe. One person said, "It's a good home. Staff go out of their way to help. Even on night shift they keep an eye on you."

Assessing risk, safety monitoring and management

- Risks were assessed to ensure people were safe and staff took action to reduce the chances of them occurring. One person told us, "I was falling regularly at home, but I've had no falls here."
- Care plans contained explanations of the measures for staff to follow to keep people safe, including how to respond when people experienced behaviours that may challenge.
- The building was well-maintained. Regular checks took place to ensure people were kept safe.

Staffing and recruitment

- Staffing levels were monitored to ensure there were enough staff to provide safe support.
- People said there were enough staff. One person commented, "Staff come straight away if I want anything."
- The provider had adequate checks in place to make sure staff were safely recruited.

Using medicines safely

- Medicines were managed safely. People received their medicines in a safe way, where support was required.
- Where people were prescribed 'when required' medicines, this was supported by a separate protocol for staff to follow.
- Systems were in place for the ordering, storage, administration and disposal of medicines.

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 accessing testing for people using the service and staff.
- 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.

Learning lessons when things go wrong

- Accident and incident reports were analysed, enabling any safety concerns to be acted on.
- De-briefings took place with staff and reflective practice at staff meetings to analyse any incidents.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed prior to using the service and reviewed on an ongoing basis. Advice was sought from external professionals to ensure support was delivered in line with latest guidance and best practice.
- Assessments included information about people's medical conditions, mental health, dietary requirements and other aspects of their daily lives.

Staff working with other agencies to provide consistent, effective, timely care

- Where people required support from healthcare professionals this was arranged and staff followed guidance provided to ensure people's needs were met appropriately. A professional commented, "I have found staff to be very responsive and willing to work through challenges to achieve the best for people."
- There were care plans in place to promote and support people's health and well-being.
- Access to health services, such as GPs, behavioural team and mental health services was well-documented.

Ensuring consent to care and treatment in line with law and guidance

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 Act 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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff understood and followed the principles of the MCA and Mental Health Act. This included supporting people to make their own decisions and assuming capacity unless they thought otherwise.
- People's legal rights were upheld. Staff sought advice when they were concerned and guidance from external professionals was followed.

- People and their representatives were involved in decisions about care provided. One person told us, "You can ask a question and staff will give me a proper answer, staff respect me." Where people lacked capacity, best interest decisions had been made appropriately.

Staff support: induction, training, skills and experience

- Staff received training including any specialist training to ensure people were supported safely and their needs were met.
- Staff completed an induction programme at the start of their employment that included the Care Certificate. They received regular supervision and appraisal.
- Staff received opportunities for personal development. One staff member commented, "There are great opportunities for career progression and development. Staff receive training to give them understanding about people's support needs."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received care and support centred around their individual needs and preferences.
- Care records were detailed and personalised with details of how people preferred to have their care and support needs carried out.
- The service regularly reviewed people's needs and worked in close partnership with people, relatives and relevant professionals to make changes.

End-of-life care and support

- No one was currently receiving end-of-life care. Records were in place that contained information about how people wished to be cared for at this time.

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 outstanding. At this inspection this has remained the same. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- People were at the heart of the service. The organisation led by example to create a culture which was incredibly caring and supportive to people and staff.
- An exceptionally motivated and enthusiastic staff team was in place, led by a motivated management team that worked together to follow best practice and achieve very positive outcomes for people who were referred to the service. A professional had commented, "The service is well-led with an experienced staff team and motivated senior management team. The team are proactive and adaptable."
- Balmoral Court and the staff team had been recognised and had won a national and regional care award in 2019 for the care provided.
- The organisation was committed to protecting people's rights with regard to equality and diversity. Staff were trained to understand how they supported people's rights and this was embedded in their practice.
- There was very positive feedback from people, relatives and professionals. The service was praised for the caring and dedicated nature of the staffing and management team and the support people received. A person had commented, "You are all appreciated in these troubled times."

Working in partnership with others

- Very successful work took place with staff working in partnership with other professionals to ensure people received care appropriate to their needs, promoting their independence and to enable them to enjoy a better quality of life.
- The service provided specialist care to some people with complex mental health needs. Professionals very positive feedback included, "The management staff have been very proactive in working with ourselves. It is a credit to the staff at Balmoral that we have been able to keep these people with complex physical and mental health needs in the community as a number have failed numerous other care placements."

Continuous learning and improving care

- There was an ethos of continual improvement and keeping up-to-date with best practice across the service.
- The provider was passionate about ensuring all staff had the opportunity to develop their skills and receive training. Staff were champions and had responsibility for leading on different aspects of care.
- Strategically the organisation ensured it kept up-to-date with best practice. The home's management team had grown their networks with other services and partnership agencies. They took a pro-active and practical approach to involving themselves in local and national projects and initiatives.

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

- The service was very well-led.
- The management and staff structure provided clear lines of accountability and responsibility, which helped ensure staff at the right level made decisions about the running of the service.
- The quality assurance process was highly effective. The governance and improvement agenda were firmly embedded into all areas to improve service provision. It reduced the risk of harm to people and promoted reflective and outstanding practice.

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

- There was consistent strong engagement with people, relatives, staff and external professionals. Action plans were developed which showed the management team and staff were persistently striving for excellence through consultation, research and reflective practice.
- The registered manager recognised the importance of involving people in developing the service, listening and acting on feedback.
- There were excellent links with the local community, including visits to and from local schools, colleges and churches. These visits had been suspended during the pandemic. People were kept very well-informed about events in the service and initiatives in the community.

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 had robust procedures in place regarding reporting and acting and learning from when things went wrong.
- The registered manager was aware of their responsibilities with regard to Duty of Candour. They were open and honest and knew when they needed to use the Duty of Candour.