

Bondcare Willington Limited

Brancepeth Court

Inspection report

Hall Lane
Willington
Crook

County Durham DL15 0PW

Tel: 01388747698

Website: www.bondcare.co.uk/brancepeth-court/

Date of inspection visit: 24 November 2022

Date of publication: 21 December 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

Brancepeth Court is a care home, which can accommodate up to 49 people. The service is split into three units, which provides nursing and personal care for older people, a 7 bed facility for adults with learning disabilities called Rose Cottage and a unit for people with mental health needs. On the day of inspection there were 38 people living in Brancepeth Court and Rose Cottage.

Brancepeth Court is located in the same building as another registered care home called Lumley Residential Home.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

Right Support

People were regularly asked for their opinions and gave them freely. People were involved in discussions about their support and given information in a way they understood. Where people had support, they told us this was flexible, available when they needed it and to the level they needed. People were supported safely with medicines. Infection prevention and control practices reflected current guidance.

Right Care

Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. The service had enough appropriately skilled staff to meet people's needs and keep them safe. Staff had training on how to recognise and report abuse and they knew how to apply it. The provider understood the new electronic assessment tool required further enhancement to ensure it fully covered people's needs.

Right culture

The service was open to new ways of working and ongoing improvements were introduced to promote independence and inclusivity. Staff placed people's wishes, needs and rights at the heart of everything they did. They sought advice and feedback from everyone involved in people's care. Staff were aware of and working to best practice guidance for supporting people with a learning disability and/or autistic people.

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 good (published 22 February 2018).

Why we inspected

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

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.

This report only covers our findings in relation to the Key Questions safe and well-led which contain those requirements. 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 has remained good based on the findings of this inspection.

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 •
Is the service well-led? The service was well-led.	Good •



Brancepeth 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. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

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

An inspector carried out the inspection.

Service and service type

Brancepeth Court is a 'care home'. People in care homes receive accommodation and personal care as a single package under one contractual agreement dependent on their registration with us. Brancepeth Court 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 not a registered manager in post. A manager had recently been appointed and had submitted their application.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local commissioners and professionals who work with the service. 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 7 people who used the service about their experience of the care provided and contacted 8 relatives. We spoke with the director, regional manager, manager, 3 care staff members and the cook.

We reviewed a range of records, which included 4 people's care records, staff files and a variety of records relating to the management of the service, including policies and procedures.



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

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Staff understood when people required support to reduce the risk of avoidable harm, and risk assessments were in place. The risk assessments were detailed and the manager was currently working with staff to ensure they effectively planned for all potential risks.
- The provider had a range of policies and procedures to manage risk and monitor the safety of both people and staff.
- The provider had safeguarding systems in place. Staff had training and a good understanding of what to do to make sure people were protected from harm or abuse.
- People confirmed they felt safe using the service. One person told us, "It is really good here and I am happy."
- The manager critically reviewed the operation of the service and actively made changes as and when these were needed.

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. The manager was in the process of reviewing people's care records to ensure all capacity assessments and 'best interests' documents were decision specific.

Staffing and recruitment

- The provider operated safe recruitment systems to ensure suitable staff were employed.
- There were enough staff to safely care for people. The staff found they could meet people's need throughout the night and day as well as being able to spend meaningful time chatting and playing games with individuals. One person told us, "The staff are great, and there are always staff around to help me."

Using medicines safely

- People's medicines were managed in a safe manner. Staff were trained in medicines management and were assessed as competent to administer people's medicines.
- Regular checks were carried out of people's medicines to ensure records were accurate.
- Staff were given clear guidance on when to administer 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.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

• The provider was facilitating visits for people living in the home in accordance with the current guidance.



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 good. At this inspection the rating has remained good. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The manager promoted a positive, person-centred culture. The manager and staff put people's needs and wishes at the heart of everything they did. One person said, "I could not think of a better place to be, the staff listen to us."
- People told us the manager was approachable and acted swiftly to address any issues. They ensured people and their families were involved in discussions about their care and support needs. People told us they were confident staff had the skills they needed to provide them with the right care.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements; 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 manager regularly reviewed the systems and processes in the service to determine if improvements and where enhancements could be made. Action plans were used to identify and monitor where changes were required and how these could improve the service.
- Reports had been sent to alert the CQC and local authorities when incidents occurred. The manager closely reviewed all incidents and ensured all relevant parties were involved in this process.
- Staff were passionate about providing good care outcomes and took ownership of their practice. They understood their roles, responsibilities and their accountability.
- The service had good links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing.