

Care In Mind Limited

Stubble Bank

Inspection report

159 Whalley Road Ramsbottom Bury Lancashire BL0 0DG

Tel: 01706396994

Date of inspection visit: 20 September 2022

Date of publication: 07 October 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

Stubble Bank is a care home and specialist residential mental health service, which provides treatment and rehabilitation to up to six young people aged between 16 and 30 years. The service is based in a large house in a residential area of North Bury. At the time of our inspection, the service supported five people.

The service supports young people who have a diagnosis of complex or enduring mental health difficulties, and who may have spent a lot of time in hospital or secure settings. The service provides a psychologically informed therapeutic environment in which young people can receive the appropriate therapy to help them recover and reintegrate back into society.

People's experience of using this service and what we found We have made recommendations about the safe storage of medicines.

Staff had a good understanding of safeguarding processes. Risk assessments were robust and relevant. Staff were recruited safely. Medicines were managed safely. Systems were in place to reduce the risk of the spread of infection. Accidents and incidents were reported and analysed in a timely manner.

People 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.

The provider was well organised, and the registered manager had a clear vision for the service. Managers were open and honest in their approach to supporting people. The provider had clearly defined roles and managers and staff were clear about their responsibilities. People were given the opportunity to regularly give feedback to improve service provision. The provider had clear audit processes to ensure good quality care.

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 16 September 2021).

Why we inspected

The inspection was prompted in part by notification of an incident. 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 very high-risk behaviours. This inspection examined those risks.

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.

Recommendations

We have made recommendations about the safe management of some medicines.

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 • |
| The service was well-led. | |
| Details are in our well-led findings below. | |



Stubble Bank

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.

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 was carried out by two inspectors, a specialist advisor in mental health, and an Expert by Experience. 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

Stubble Bank 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service is small, and people are often out, and we wanted to be sure there would be people at home to speak with us.

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. 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 the registered manager, deputy manager, regional manager, and six support staff. We spoke with two people receiving support and two relatives. We reviewed two people's care records.

We reviewed records and audits relating to the management of the service. We asked the deputy manager to send us documents before and after the on-site inspection. These were provided in a timely manner and this evidence was included as part of our inspection.



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 for this key question has remained good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- The handover process for staff access to some medicines did not always mitigate the risk of potential abuse by staff.
- Storage room temperatures were not always recorded correctly due to faulty equipment; this was actioned by the registered manager during the inspection.

We have recommended the provider consider current guidance on storage of medicines and take action to update their practice accordingly.

- Medicines were administered and disposed of safely.
- People's medication records confirmed they received their medicines as required.
- Staff received appropriate training in the management of medicines and competency assessments were completed by managers.

Systems and processes to safeguard people from the risk of abuse

- The provider had processes to protect people from the risk of abuse.
- Managers acted timely to address concerns and allegations and implemented changes to make sure people were safe.
- Staff had completed safeguarding training and were confident about raising concerns.

Assessing risk, safety monitoring and management

- Risks to people were assessed and regularly reviewed. This included a range of bespoke and person-centred individual risk assessments, a comprehensive assessment of the home environment and a locality risk assessment. The provider mitigated any identified risks through a range of methods.
- The provider used an evidence-based risk assessment tool to identify each person's risks and developed risk management plans for the risks identified.
- Staff received training in identifying and managing individual risks.
- Staff regularly discussed the risks presented by people and associated risk management strategies at multi-agency meetings, team meetings, in supervision and reflective practice sessions.

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. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- The provider ensured staff were recruited safely and had the necessary safety checks in place before starting work, including a criminal record check to confirm they were suitable to work with people. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- There were enough staff employed to meet people's assessed needs.
- The registered manager supported staff to complete a period induction, shadowing other staff and getting to know people who used the service before starting to work alone; this included a robust training programme including 'Safewards for Safe Homes' which is recommended for mental health services.
- Staff told us they felt the induction period was very supportive in helping them understand how to keep people safe. One staff member said, "Managers and staff are amazing. I felt really supported in my transition into the team."

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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 following government guidance for safe visiting and at the time of the inspection visiting was not restricted.

Learning lessons when things go wrong

- The registered manager recorded and investigated concerns in a timely manner to keep people safe.
- Lessons learned were shared with staff to reduce the risk of issues reoccurring and to improve the quality of care provided.
- Relatives said staff knew how to keep people safe and responded well to concerns. One relative told us, "[My relative] is safe living at Stubble Bank. Staff have really supported [their] progress with independence and if I have concerns, I know I can speak to staff. The staff are nice and caring. The manager is very good."



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

Continuous learning and improving care; Working in partnership with others

- The provider worked well with people, other relevant professionals and organisations, to ensure people's needs were met. This included liaison with statutory health and social care bodies.
- The registered manager presented evidence of joined-up work between the provider and other professionals to meet the needs of people using the service.
- Since the last inspection a new annexe room had been created for multi-disciplinary meetings held with people and other relevant professionals. This ensured any difficult discussions were not brought into the main living environment.
- Health professionals had mixed views on partnership working with Stubble Bank. One health professional felt there could be more work done with local health services to meet people's specific health needs. Other health professionals thought joint working was robust; one health professional told us, "I have always found Stubble Bank to be supportive and caring towards residents. I have had no issues or concerns regarding their care. The team always update me regarding risks and incidents and will make themselves available when required."

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

- The provider had a strong person-centred care culture, which valued individual identities and diversity and actively sought to support individual preferences. This was reflected in people's care information.
- The registered manager promoted openness and honesty, and people were at the centre of the support planning process.
- The provider had a clear ethos, values and principles which underpinned the service model; these were understood by all staff, people and key stakeholders.
- People felt staff supported their independence and encouraged family involvement. One person said, "I have overnight stays with my family, and they visit [Stubble Bank]. It's important to me."

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 registered manager was clear about their responsibilities for reporting incidents and concerns. Risks were clearly identified and escalated where necessary.
- The provider had clear processes for reviewing concerns and improving support by learning from the issues identified.
- People felt comfortable raising concerns with managers and were confident they would be listened to

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

- The provider had clear lines of accountability and staff understood their roles and responsibilities. Staff were clear about their responsibilities in supporting people through difficult situations and when to contact health professionals.
- A range of audits and monitoring systems had been used by the registered manager to assess the quality and performance of the service provided; these had been completed both internally and at provider level.
- Staff said they felt supported by the provider. One staff member told us, "I feel supported in my role; after a recent incident we had a team debrief which I found helpful. I felt I could talk to people about my experience, which was helpful."

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

- The provider had clear processes in place for monitoring support and highlighting areas of improvement.
- The registered manager worked closely with people, and where appropriate their relatives, to understand their cultural beliefs and backgrounds.
- People we spoke to said staff were person-centred in their approach to people's support. One person said, "staff are supportive and kind; if I am struggling, they sit with me for as long as I need them to. I trust them."