

# The Community Housing Group Limited

# Berrington 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 caring?	Inspected but not rated
Is the service responsive?	Inspected but not rated
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

This report was created as part of a pilot which looked at new and innovative ways of fulfilling CQC's regulatory obligations and responding to risk in light of the Covid-19 pandemic. This was conducted with the consent of the provider. Unless the report says otherwise, we obtained the information in it without visiting the Provider.

### About the service

Berrington Court is a community based extra care facility that was providing personal care to 37 people at the time of the inspection.

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

Staff had received training in safeguarding and knew how to keep people safe. Staff had been recruited safely and were trained and supported to provide the best possible care for people. Medication was administered safely and staff supported people following good infection control practices.

People were supported by staff who had the skills and knowledge to meet people's needs.

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.

People were supported by staff who were kind and caring and people's equality and diversity needs were respected. People's support needs were assessed regularly and planned to ensure they received the support they needed.

The management team had good oversight of the service and audits were completed regularly. Surveys were completed to gather information about people's views. Spot checks were carried out to ensure the quality of the service was maintained.

### Rating at last inspection

The last rating for this service was good (published 06 September 2018).

### Why we inspected

This was a planned pilot virtual inspection. The report was created as part of a pilot which looked at new and innovative ways of fulfilling CQC's regulatory obligations and responding to risk in light of the Covid-19 pandemic. This was conducted with the consent of the provider. Unless the report says otherwise, we obtained the information in it without visiting the Provider.

The pilot inspection considered the key questions of safe and well-led and provide a rating for those key questions. Only parts of the effective, caring and responsive key questions were considered, and therefore

the ratings for these key questions are those awarded at the last inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Berrington Court on our website at [www.cqc.org.uk](http://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

At our last inspection we rated this key question good. We have not reviewed the rating at this inspection. This is because we have not reviewed all of the key lines of enquiry (KLOEs) in relation to effective.

### Is the service caring?

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 have not reviewed all of the key lines of enquiry (KLOEs) in relation to effective.

### Is the service responsive?

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 have not reviewed all of the key lines of enquiry (KLOEs) in relation to effective.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below.

# Berrington Court

## Detailed findings

### Background to this inspection

#### The inspection

As part of a pilot into virtual inspections of domiciliary and extra-care housing services, the Care Quality Commission conducted an inspection of this provider on 9 November 2020. The inspection was carried out with the consent of the provider and was part of a pilot to gather information to inform CQC whether it might be possible to conduct inspections in a different way in the future. We completed this inspection using virtual methods and online tools such as electronic file sharing, video calls and phone calls to gather the information we rely on to form a judgement on the care and support provided. At no time did we visit the provider's or location's office as we usually would when conducting an inspection.

#### Inspection team

The inspection was carried out by one inspector 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

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought or rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

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

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

#### 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 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 nine people who used the service and one relative about their experience of the care provided. We spoke with 10 members of staff including the nominated individual, registered manager, team leaders and support workers. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included five 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.

# 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 we spoke with told us they felt safe. One person said, "I am quite independent but I do feel safe."
- Staff knew how to recognise potential abuse and protect people from it. Staff had received training in how to keep people safe and described the actions they would take where people were at risk of harm.

Assessing risk, safety monitoring and management

- Risk assessments were in place for people and staff we spoke with were aware of people's risks and were able to tell us how they supported people to keep them safe.
- The provider had an electronic call monitoring system where staff logged in and out of calls. People we spoke with told us that generally calls were on time. One person told us, "They [staff] are fairly regular with times."
- People using the service were given life lines to press when they needed help. One person said, "I've got my panic button around my neck, any problems and I push that, and somebody is here in a few minutes, that's a good thing to have".

Staffing and recruitment

- There were recruitment processes in place and recruitment checks were carried out before staff were appointed. This ensured suitable staff were appointed to support people.
- There was enough staff to support people safely. Staff supported people on a rota basis. People we spoke with told us they didn't always get the same staff. One person said, "I don't get the same staff and I don't know who's coming, but I know them all".

Using medicines safely

- Peoples' medicines were managed safely. Medicines administration records we observed showed people received their medicines as prescribed.
- Care staff received training and regular competency checks to ensure they were administering medicines safely.

Preventing and controlling infection

- Staff received training in how to prevent and control infection and told us PPE was readily available to them.
- The provider had an action plan in place in order to manage the spread of the Covid-19 virus.

Learning lessons when things go wrong

- Accidents and incidents were recorded and investigated to reduce the risk of them from happening again in the future.



# 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 reviewed the rating at this inspection. This is because this inspection was carried out as part of a DCA pilot inspection and only part of this key question was reviewed.

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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA.

- Staff had received training in the MCA and had a good understanding of the Act and staff told us how they asked for consent before providing support.
- Where people had a DNAR (do not attempt resuscitation) in place, this was clearly recorded in their care plan.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. We have not reviewed the rating at this inspection. This is because this inspection was carried out as part of a DCA pilot inspection and only part of this key question was reviewed.

Ensuring people are well treated and supported; respecting equality and diversity

- People were supported by kind and caring staff. One person told us, "They [staff] are very helpful, if on one of the calls there is not much to do, they will do other things like put the hoover round. They will sit and have a chat rather than rush off. Some of them have fetched me some shopping in their own time. The carers are very good."
- The registered manager told us how they worked alongside the principles of the Eden Project which is a project designed to reduce loneliness, helplessness and boredom for people living in their own homes. One member of staff said, "Some girls will come in on their day off and bring their dog for people who love dogs."
- Staff we spoke to told us how much they loved their job and the people they supported. One member of staff said, "I really enjoy it here, it is one of the best places I have worked in."
- The well-being advisor supported people to socialise and take part in activities to reduce social isolation and improve people's well-being.
- We found people's quality and diversity needs were respected and people's individual needs were clearly recorded in their care plans. The well-being advisor told us how people were supported to follow their faith, for example, people were enabled to attend socially distanced church services.

Supporting people to express their views and be involved in making decisions about their care

- People and their families were involved in care planning and their views and wishes were respected.
- Staff told us how they supported people to make decisions for themselves. One member of staff said, "I ask them [people using the service] if they want me to help them and always make sure that I don't do anything they don't want me to."

# 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 reviewed the rating at this inspection. This is because this inspection was carried out as part of a DCA pilot inspection and only part of this key question was reviewed.

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

- A care plan and assessment were in place to show the support people needed and these were reviewed regularly. People were involved in reviews of their care.
- Care plans contained personalised information about what was important to them, including people's hobbies, likes and dislikes, to enable staff to provide person centred care.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's preferred method of communication was recorded in their care plan and people were able to request documentation in different formats.
- The service has access to Telecare which provides technology such as Ipads to support people's communication needs and support their independence. The provider was also able to offer translation services and text talk.
- The provider has links with outside organisations such as Sight Concern and Deaf Direct to support people with their individual communication needs.

End of life care and support

- There was no-one receiving end of life care at the time of inspection.

# 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 good. At this inspection this key question has remained the same. 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

- Feedback we received about the service was mostly positive. One person told us, "The office staff are very good; they are always there for you."
- All staff we spoke with told us how approachable the management team was and they felt very supported. One member of staff told us, "The management are brilliant."

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 management team were open and honest with us throughout the inspection and keen to learn and improve the quality of the service. The registered manager told us, "We are open and honest; we are honest with the people we care for and we will do our utmost to put things right. If we are doing something wrong it needs to be addressed."

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

- The provider's electronic monitoring system flagged up alerts when tasks needed completing and these were monitored daily. The system also alerted when care plans needed updating or when staff were due training. The system enabled managers to have good oversight of the service and action any discrepancies or areas of concern promptly. For example, we saw where there was a blank entry on a medication administration record and staff were able to evidence what action had been taken to resolve the issue.
- The provider had a business development plan to drive forward improvements in the business. Actions included looking at new technology to enhance people's life style and choices. The nominated individual told us, "Care and support is at the forefront."
- The provider held regular staff meetings to give staff the opportunity to discuss any issues they may have and to get support from other members of the team.
- Spot checks and competency checks were carried out regularly on staff in order to ensure they were providing good quality care for people.
- Staff received regular supervisions. Staff confirmed this and we saw evidence of this in records we checked.

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

- The provider carried out surveys to get feedback from people and this was used to improve the quality of the service.
- The provider produced monthly newsletters to keep people updated with current activities and events.

#### Continuous learning and improving care

- Management and care staff received on-going training to ensure their learning, skills and knowledge were current to be able to support people.

#### Working in partnership with others

- The service worked in partnership with social workers, health professionals and relatives to ensure the service supported people's needs.