

Blackrod House Limited

# Blackrod House

## Inspection report

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Date of inspection visit:  
24 May 2023

Date of publication:  
15 June 2023

## 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

Blackrod House is residential care home located in Blackrod, Bolton and is operated by Blackrod House Limited. The home can support up to 30 people. At the time of inspection 27 people were living at the home, although 1 was currently in hospital.

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

People felt safe living at Blackrod House and spoke positively about the care and support they received. Staff had received training in safeguarding and knew how to identify and report concerns. Accidents, incidents and falls were documented and reviewed to identify any patterns and trends and consider any lessons learned. Medicines were managed safely by staff who received training and had their competency assessed. People had received their medicines on time and as prescribed. The home was clean, with effective cleaning and infection control processes in place.

People and staff told us the home was well run and a nice place to live and work. People's views were sought through regular meetings and questionnaires. Staff were kept up to date through team meetings and daily handovers. The home used a range of systems and processes to monitor the quality and effectiveness of the service provided. Actions plans were used to drive improvements where necessary.

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 the service was good (published 20 December 2017).

### Why we inspected

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

We undertook this focused inspection to assess whether the current rating of good was still accurate. This report only covers our findings in relation to the Key Questions Safe and Well-led, as these were the only Key Questions inspected.

For those key questions not inspected, we used the ratings awarded at the last comprehensive inspection to calculate the overall rating. The overall rating for the service has remained good. This is based on the findings at this inspection.

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

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.

### 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.

# Blackrod House

## 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 an 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

Blackrod House 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. Blackrod House 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 a registered manager in post.

#### Notice of inspection

The inspection was unannounced. Inspection activity started on 24 May 2023 and ended on 25 May 2023 by which time we had received and reviewed evidence provided during and after our visit to the home. We

visited Blackrod House on 24 May 2023. This inspection was prompted by a review of the information we held about this service.

#### What we did before the inspection

Prior to the inspection we reviewed information and evidence we already held about the home, which had been collected via our ongoing monitoring of care services. This included notifications sent to us by the home. Notifications are changes, events or incidents that the provider is legally obliged to send to us without delay. We also asked for 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 of this information to plan our inspection.

#### During the inspection

We spoke with 8 people about the home and care provided. We also spoke with 5 members of staff, which included the registered manager, deputy manager and 3 care assistants.

We reviewed a range of records and other documentation. This included 3 people's care records, risk assessments, safety records, supplementary charts, audit and governance information. We also looked at medicines and associated records for 4 people.

#### After the inspection

We reviewed additional evidence from the provider. This included training information, staff competency checks and compliance records.

# 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. The rating for this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe living at Blackrod House. One person stated, "I feel safe as there are plenty of people to look after me, if I sneeze, they come running. I have a buzzer in my room, but I haven't needed to use it as the staff constantly pop in and out of my room" and "I am safe here as the security is very good and the staff treat me well."
- A safeguarding file was in place which contained up to date policies and procedures, including how to report any safeguarding concerns to the local authority. A log was also in place on which any referrals, along with actions taken and outcomes were recorded.
- Staff told us they had received training in safeguarding, which was regularly refreshed and knew how to identify the different types of abuse and report any concerns. Staff told us they felt confident any concerns reported to management would be addressed timely.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Each person's care records contained a range of risk assessments, to enable staff to keep them safe and meet their needs.
- Accidents, incidents and falls had been documented consistently, in line with the provider's policy. Each incident or accident had been reviewed by management to ensure appropriate action had been taken and consider any lessons' learned. Each incident or accident was then logged on a computer spreadsheet, to help look for patterns and trends.
- Safety checks of the premises and equipment had been completed consistently, in line with guidance. Certificates were in place to confirm trained professionals had assessed the safety of items such as hoists, slings and the lift. An up-to-date fire risk assessment was in place and each person had a personal evacuation plan, in case of emergencies.

Staffing and recruitment

- Enough staff were deployed to meet needs and keep people safe. Feedback from people and staff supported this. One person told us, "There are plenty of staff around all the time. I have a buzzer in my room and if I use it someone sees me straight away." A staff member stated, "Yes, there are no issues with staffing levels."
- The registered manager was mindful of the importance of continuity of care, and people feeling safe being supported by people they knew. As such, existing staff were used to cover any shortages due to sickness or annual leave, with use of agency a last resort.
- Safe recruitment processes had been followed when new staff commenced employment. This included seeking references from former employers and completing checks with the Disclosure and Barring Service to ensure applicants were of suitable character to work with vulnerable people.

### Using medicines safely

- Medicines were managed and administered safely by care staff, who had received training and assessed as competent.
- Medicines were stored safely and had been given as prescribed, with records of administration completed correctly and accurately.
- Detailed guidance was in place for 'as required' medicines, such as paracetamol, which explained how, why and when to give this medicines and the expected outcome, to help staff identify if it had been effective.

### Preventing and controlling infection; Visiting in care homes

- The home was clean with effective cleaning and infection control processes in place. People told us staff wore personal protective equipment (PPE) when supporting them. One stated, "The staff wear gloves and aprons when supporting people." We observed staff wearing and disposing of PPE appropriately during the inspection.
- Infection control policies and procedures were up to date and reflected current national guidance. Detailed cleaning checklists were in place and completed consistently.
- The registered manager confirmed relatives were welcome to visit at any time in line with current Government guidance. However, some relatives still liked to ring up to announce their intention to visit and most relatives tended to visit in the afternoon.

# 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. 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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- A range of audit and monitoring processes were in place and had been completed in line with the provider's audit schedule. These included audits of care files, accidents, incidents, staff training and supervision.
- Action plans were generated from each audit and used to drive improvements. An overarching improvement plan, onto which all separate actions were recorded was not currently being used. However, the registered manager stated this was something they would consider moving forwards, to help improve oversight.
- The provider and registered manager were proactive in reporting accidents, incidents and concerns to the appropriate professionals in a timely manner and had submitted statutory notifications to CQC as necessary.

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

- People told us they liked living at the home and were happy with the care and support they received. One person stated, "I am happy here, I have no worries and am well looked after." People also spoke positively about the staff and the registered manager. One person told us, "I see the manager about. The staff are all friendly, they will do anything for you. I would recommend the home to others; I don't think you could find a better place."
- People and relative's views were captured via regular meetings, as well as questionnaires. One person told us, "I have been given questionnaires about how the home is performing and there are residents' meetings about once a month when people can discuss things. I would recommend the home as I like it here."
- Regular staff meetings were also held, to ensure staff were involved in the running of the home and kept up to date with relevant information. Their views were also sought through annual surveys.
- Staff told us they enjoyed working at the home and felt supported. One stated, "it's a good place to work, we have a great team here. Any issues we can go to management, and they get sorted."

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 home was meeting the requirements of the duty of candour. The registered manager was reported to be open, honest and friendly and willing to listen and act on any concerns. One person told us, "If I have a

worry, I can speak to [registered manager]. She will sit on my bed and listen then sort things out. I am happy here; they do everything well."

#### Working in partnership with others

- We noted a number of examples of the home working in partnership with other professionals or organisations. The home had links with local schools who visited the home to take part in activities or sing for people living at the home.
- The home also had links with a local church, with people attending a weekly coffee morning and monthly film club.
- The home had recently started to take people to a local pub which held a monthly luncheon club for people living with dementia.