

CLBD Limited

# Burham Court

## Inspection report

Burham Court  
Burham  
Rochester  
Kent  
ME1 3XX

Tel: 01634685025

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23 August 2017

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

# Summary of findings

## Overall summary

This inspection took place on 23 August 2017 and was unannounced.

Burham Court is registered to provide personal care. It is a domiciliary care service and at the time of the inspection there were 2 people receiving support.

There was a registered manager employed at the service. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At the last comprehensive inspection, the service was rated Good overall and Requires Improvement in the 'Safe' domain.

We had carried out an unannounced comprehensive inspection of this service on 17 February 2016. A breach of legal requirements was found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach of Regulation 19 of the Health and Social Care Act Regulated Activities Regulations 2014, Fit and proper persons employed. The provider told us they would meet the regulation by 28 April 2016. We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements and those required in Safe domain. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Burham Court on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

Why the service is now rated as Good in the safe domain.

People told us they felt safe whilst being cared for by the staff that helped them when they need support.

Effective recruitment procedures were now in place to ensure that staff employed were of good character and had the skills and experience needed to carry out their roles.

People received their medicines safely and when they should. There were systems in place to manage medicines safely.

Risks associated with people's care and support were assessed and staff took steps to keep people safe and healthy whilst enabling their independence as much as possible.

Staff knew how to recognise and respond to abuse. They had received training on how to keep people safe.

Accidents and incidents were recorded and appropriate action taken to reduce the risk of further

occurrences.

Staff had received infection control training and were clear on their responsibility in preventing cross infection when caring for people.

People had their needs met by sufficient numbers of staff and staff rotas were based on people's needs and health appointments.

## 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.

Robust recruitment procedures were in place to protect the people they care for.

There were sufficient numbers of trained staff on shift to deliver care and support to people when they needed it.

Staff had a good knowledge and understanding on how to keep people safe. Safeguarding policies and procedures were in place.

Medicines were appropriately administered. Risk assessments were clear and up to date so staff had clear guidance in order to meet people's needs.

# Burham Court

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook an unannounced focused inspection of Burham Court on 23 August 2017. This inspection was carried out to check that improvements to meet legal requirements planned by the provider after our 17 February 2016 inspection had been made. We inspected the service against one of the five questions we ask about services: is the service Safe? This is because the service was previously not meeting legal requirements. This inspection was carried out by one inspector.

The provider did not complete a Provider Information Return (PIR), because we carried out this inspection before another PIR was required. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. Prior to the inspection we reviewed other information we held about the service, we looked at the previous inspection report, the provider's action plan following the last inspection and any notifications received by the Care Quality Commission. A notification is information about important events, which the provider is required to tell us about by law.

During the inspection we reviewed two people's records. We also looked at a variety of documents. These included people's risk assessments, medicine records, four staff recruitment files, staff rotas and training records, and accident and incident reports.

We spoke with one person who was using the service, a registered manager of a service run by this provider who was overseeing the service in the planned absence of the services registered manager, a service director and four members of staff.

# Is the service safe?

## Our findings

At our last comprehensive inspection on 17 February 2016 we found that the provider had not ensured that robust recruitment procedures were followed to make sure only suitable staff were employed. We asked the provider to take action to address the issues. The provider sent us an action plan which detailed that they would meet the regulation by 28 April 2016.

The person we spoke with said, "I am happy with the girls who help me", yes I do feel safe with them". They also told us, "If I did not like something the staff were doing I would tell [registered manager] and she would tell them".

There was a clear safeguarding and whistle blowing policy in place. There was also copy of the local Kent and Medway safeguarding protocols in the office. All staff spoken with were all familiar with the process to follow if they witnessed or suspected any abuse. Staff had received training both face to face and online. Staff were given scenarios about a person being abused, all knew what their responsibilities were in taking action to protect the person and report it appropriately.

The Recruitment processes was found to be robust, it had been reviewed since our last visit. The providers 'staff recruitment and selection' policy had been updated. They included quality monitoring sheets to make sure that all required checks are made before any new staff were employed. They have also gone through the records held for staff who had previously been employed to ensure the files were also brought up to date, ensuring all their checks were now in place.

We looked at four staffs employment records. Each had a list of what documents needed to be in place when a person was employed. The files were arranged so that it was easy to find the documents required. They included a completed application form, a record of the interview and comments regarding the person's suitability. There was a form that managers also completed at interview which explored any gaps identified in the employment history. There were copies of documents used to confirm someone's identification and (DBS) the police checks. There were at least two references from previous employers. There was also a system in place to ensure staff were legally able to work in this country.

People benefited from staff who had been trained on infection control. This meant that staff understood the need to prevent cross contamination with in the persons home and between people that they visit. Staff spoken with explained how important it was to wash their hands and wear appropriate PPE (personal protective equipment). One staff said, "I always wash my hands when I arrive and leave a person's home. I encourage people I care for to keep their home clean, if they are not able to by themselves I would support them to do this. I wear gloves and aprons when providing personal care and when dealing with soiled laundry as necessary". Another staff member said, "It is good to encourage the people we care for about good hygiene. It will protect the person themselves and the staff supporting them".

People had their needs met by a sufficient numbers of staff to ensure they did not miss a call when staff were on leave or sick. The rotas seen for the previous two weeks showed that people were supported as

planned. A person told us that they have the same staff visiting most of the time, but if staff go on holiday they let me know who is coming instead.

We were told by staff accidents and incidents involving people were recorded and the manager was made aware. These were reviewed to ensure that appropriate action had been taken following any accident or incident to reduce the risk of further occurrences. Incidents and accidents were also reported to the persons care manager and CQC if significant.

Comprehensive risk assessments had been undertaken to ensure that people received safe and appropriate care. Risk assessments included a list of assessed risks relating to day to day support and activities. For example, risk assessments were in place to ensure people were safe when accessing the community, mobilising and taking prescribed medicines. Risk assessments gave clear guidance to staff about safe working practices. The risk assessments were reviewed regularly and we noted that people had signed these and their care plans to demonstrate consent. Staff were able to provide care which was safe and met each person's needs.