

J A Rodrigues

Bethany House

Inspection report

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Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
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Is the service well-led?	Inspected but not rated
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Summary of findings

Overall summary

About the service

Bethany House is a residential care home providing personal care and accommodation for up to 30 people. The service was supporting eight people at the time of the inspection.

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

The provider and manager did not consistently or effectively follow the provider's recruitment policies and procedures, introduced following the previous inspection, to protect people from avoidable harm.

The provider and manager did not consistently or effectively follow the provider's governance matrix, introduced following the previous inspection, to provide oversight of the service including recruitment practices. The provider's failure to maintain oversight of the service left people at potential risk of avoidable harm.

This was a targeted inspection to consider recruitment processes, management and governance of the service. Based on our inspection, the provider's recruitment processes were unsafe and the governance of the service was ineffective.

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 inadequate (published 12 October 2021) and there were multiple breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection enough improvement had not been made or sustained and the provider was still in breach of regulations.

Why we inspected

We undertook this targeted inspection to check the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met around a specific concern we had about the safety of recruitment and selection of staff, and governance and oversight of the service. The overall rating for the service has not changed following this targeted inspection and remains inadequate.

CQC have introduced targeted inspections to follow up on Warning Notices or to check specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

Follow up

Full information about CQC's regulatory response to the more serious concerns found during inspections is added to reports after any representations and appeals have been concluded.

You can read the report from our last focused inspection, by selecting the 'all reports' link for Bethany House on our website at www.cqc.org.uk.

Special Measures:

The overall rating for this service is 'Inadequate' and the service remains in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe. And there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it. And it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

At our last inspection we rated this key question inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Is the service well-led?

At our last inspection we rated this key question Inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

Inspected but not rated

Bethany House

Detailed findings

Background to this inspection

The inspection

This was a targeted inspection to check whether the provider had met the requirements of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 around specific concerns about recruitment processes, and concerns we had about the governance of the service.

Inspection team

The inspection was undertaken by two inspectors.

Service and service type

Bethany House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The provider was also registered with the Care Quality Commission, as the registered manager. 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

This inspection was unannounced.

What we did before the inspection

We reviewed the information we had received about the service since the last inspection. 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 the provider and the manager and we reviewed recruitment records for 12 staff and the provider's governance matrix.

After the inspection
No further clarification was received from the provider.

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 inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of a specific concern, we had about recruitment practices. We will assess all of the key question at the next comprehensive inspection of the service.

Staffing and recruitment

- The provider had continued to fail to ensure recruitment practices were safe. For example, staff had not been recruited in compliance with the provider's recruitment policy and associated documentation was incomplete. This meant the provider could not be assured that recruitment practices were safe.
- References were not always provided by the most recent employer and risk assessments were not carried out where the most recent employer references were not received.
- References received by the provider were not always recorded on headed paper or nor did they set out the dates of employment.
- One staff file did not contain interview notes, and another did not contain a start date. Two staff files also evidenced the application form for employment had been completed by the candidate, after the employment interview had taken place. This meant the interviewer could not check information such as starting dates or gaps in employment.
- Staff completed health care declaration forms. However, where health care conditions were identified, risk assessments had not been completed.
- Evidence found at this inspection meant the provider could not ensure people were being supported by staff who had been recruited safely.

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 inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had met the requirements of a specific concern, we had about the provider's governance practices and oversight of the service. We will assess all of the key question at the next comprehensive inspection of the service.

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

- The provider did not have an effective system of delegation. For example, the provider had appointed a new manager to conduct quality assurance audits. However, the provider had not provided any training for the new manager. The manager was initially supported by a consultant, who left soon after their appointment. The new manager did not have a good understanding of their role and the provider had failed to offer the manager any further support.
- The provider had a governance matrix in place, setting out who was responsible for each type of audit. Since the implementation of the governance matrix, the provider and manager had not completed any of the audits allocated to them. This meant the provider did not have oversight of the service.
- Inspectors asked the manager about audits that had taken place since the last inspection, the manager said, "It was [name of consultant] who was overseeing and putting things in place and they stepped down". Inspectors asked who would have this responsibility now. The manager replied, "I guess that will be me now". The manager stated they had not completed any audits since the consultant had left.
- The provider did not have oversight of the service and the provider's systems and processes failed to identify the issues within the recruitment process that inspectors found during this inspection.
- Two recruitment audits had taken place; these were incomplete and identified issues had not been resolved. This meant people were at risk of being supported by unsuitable staff because they had not been recruited safely.
- The provider failed to maintain records of quality assurance work carried out by the consultant and told inspectors, "[Name of consultant] has left us high and dry and [Name of consultant] has taken everything with them" and "As far as I am aware the audits were all perfect." This meant the provider did not have oversight of the service or health, safety and well-being of people receiving the service.
- Staff supervisions and competency assessments were not taking place. The provider asked inspectors what the link was between staff supervisions and recruitment regulations. The inspector explained to the provider the impact of staff training and supervision on recruitment. The provider told inspectors, "I agree we are not operating with good practice, due to supervisions".