

Mark Jonathan Gilbert and Luke William Gilbert

Birch Abbey

Inspection report

55 Alexandra Road
Southport
Merseyside
PR9 9HD

Tel: 01704410010

Date of inspection visit:
18 January 2021

Date of publication:
05 February 2021

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

Birch Abbey is a residential home providing personal and nursing care to up to 60 people with a variety of health needs. At the time of our inspection 50 people were living at the service.

Medicines were managed safely in accordance with the relevant guidance for care homes. Following our last inspection, systems to monitor the safety of medicines' administration had been improved. The building and essential equipment were well-maintained, clean and free from odours. Relatives told us they sometimes had difficulty contacting staff at Birch Abbey. The provider had made recent improvements to the telephone system and building access in response to concerns. Prior to the inspection, we received information of concern regarding staffing levels and the use of agency staff. Safe recruitment procedures were followed, and staff were deployed in sufficient numbers to meet people's care needs. The home deployed effective measures to manage the risk of infections, including COVID-19. Accident and incident policies and procedures were in place and there was a system to record and report them. There was a recent, noticeable reduction in the number of falls and medicines' errors following analysis and corrective action. Systems were in place to safeguard people from the risk of abuse.

At the time of the inspection the home did not have a registered manager. However, interim arrangements for the management of the home were robust and effective. Staff understood their roles and responsibilities in relation to safety, quality and compliance with regulations. The home had systems in place to monitor, assess and improve the safety and quality of service being provided. Staff demonstrated kindness and respect in their interactions with people. It was clear they provided care in an individualised manner. The service had improved since our last inspection. Staff and managers demonstrated a commitment to improve further. People living at the service and staff were positive about the current management of the service and the level of communication. Staff engaged well with other health and social care professionals to ensure people's health and wellbeing was maintained.

Rating at last inspection and update

The last rating for this service was Good (published 12 September 2019). The service remains Good.

Why we inspected

We received concerns in relation to the conduct of staff. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

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 coronavirus and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Birch Abbey on our website at 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

Is the service well-led?

Good ●

The service was well-led

Birch Abbey

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

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, 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

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

The service did not have a manager registered with the Care Quality Commission. The previous manager had recently left, and the provider was in the process of recruiting to their post. This means that the provider is 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 inspection

Before the inspection we checked the information that we held about the service. This included statutory notifications sent to us by the provider about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send us by law.

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 also obtained feedback from the local authority and the local Healthwatch team. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

During the inspection

We looked around the premises and assessed infection prevention and control practice. We also observed the interactions between people living at the service, care delivery and activities provided at the service. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We spoke with two people living at the service, ten relatives and ten staff who held various roles at the service, including the quality improvement lead, regional manager, deputy manager, nurses and carers. We looked at a range of documentation including five people's care records, medication records, four staff files, accident and incident records, safeguarding records and safety and quality audits.

After the inspection

We continued to seek clarification from the provider to validate evidence. We looked at a range of information relating to safety and quality assurance.

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 Requires Improvement. At this inspection this key question has improved to Good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicines were managed safely in accordance with the relevant guidance for care homes.
- Following our last inspection, systems to monitor the safety of medicines' administration had improved. Where concerns were identified, the home had taken action to improve safety and compliance.
- People received their medicines as prescribed by competent staff.
- Medicines were stored and recorded in line with national guidance and best practice.

Assessing risk, safety monitoring and management

- The building and essential equipment were well-maintained, clean and free from odours.
- The environment, equipment and fire systems were safely managed. Regular checks of emergency equipment and systems were completed. However, some staff expressed concern the absence of a dedicated maintenance person was delaying some non-essential repairs.
- Relatives told us they sometimes had difficulty contacting staff at Birch Abbey. The provider had made recent improvements to the telephone system and building access in response to concerns.
- Individual risk was reviewed regularly and following incidents and accidents. Risk assessments were sufficiently detailed and led to changes in people's care to keep them safe.

Learning lessons when things go wrong

- Accident and incident policies and procedures were in place and there was a system to record and report them.
- Records indicated what action was agreed in response to any accidents and incidents. Actions had been completed and records reviewed to identify patterns or trends.
- There was a recent, noticeable reduction in the number of falls and medicines' errors following analysis and corrective action.

Staffing and recruitment

- Safe recruitment procedures were followed, and staff were deployed in sufficient numbers to meet people's care needs.
- Prior to the inspection, we received information of concern regarding staffing levels and the use of agency staff. People living at the service said there were enough staff to meet their needs. Some permanent staff and relatives commented on the negative impact of the use of agency staff. One relative said, "The only thing is that when I've gone to see [relative] recently in the pod I haven't recognised some of the staff on duty at the time and I wondered if they were agency staff and that they've been losing some of their regular staff."
- We looked at staff rotas, the dependency tool and observed staffing levels during our inspection. We

established the use of agency staff was primarily associated with the need for additional 1:1 care and not core services.

- Staff were safely recruited, trained and supported. Records showed the required information and pre employment checks, such as criminal records checks, had been completed.

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 admitting people safely to the service.
- We were assured that the provider was accessing testing for people using the service and staff.
- 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.
- The layout of the building and people's health conditions made it difficult to maintain effective social distancing.
- Relatives were particularly positive about the efforts of a recently appointed staff member who organised safe visits to the home.

Systems and processes to safeguard people from the risk of abuse

- People and relatives told us the service was safe. However, relatives said the COVID-19 visiting restrictions made it difficult to properly assess whether the service was safely provided at all times.
- Comments included; "I've no concerns about [relative's] care; they've been very good at understanding [person]. [Person] seems to have put on weight and I've never seen anything to show [person's] not being well cared for," and "I've no concerns about her being safe there."
- Policies and procedures were in place to guide staff in relation to safeguarding vulnerable adults and whistleblowing.
- Staff received safeguarding training and information about how to raise safeguarding concerns.
- Records showed how staff took appropriate action when any such concerns arose.

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.

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

- Interim arrangements for the management of the home were robust and effective.
- Two managers had recently left the home. The provider based an experienced regional manager in the home while a replacement was recruited. Staff told us this had provided stability and support.
- A range of policies and procedures were in place that staff could access if they needed any guidance; these were up-to-date and regularly reviewed.
- Staff understood their roles and responsibilities in relation to safety, quality and compliance with regulations.

Continuous learning and improving care

- The home had robust and effective systems in place to monitor, assess and improve the safety and quality of service being provided.
- Systems demonstrated the completion of actions and the development of learning following significant incidents. There was evidence of learning from other homes in the provider's portfolio. For example, a template had been improved following feedback from another home's inspection.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- Staff demonstrated kindness and respect in their interactions with people. It was clear they provided care in an individualised manner.
- The service had improved since our last inspection. Staff and managers demonstrated a commitment to improve further. For example, care records were in the process of being transferred from one electronic system to another to ensure they met individual, organisational and regulatory requirements.
- All staff and managers were open, honest and responsive during the inspection.

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

- People living at the service and staff were positive about the management of the service and the level of communication. Some relatives spoke about recent issues with communication and, in particular, telephone contact. One person said, "There is better communication now since the area manager has been in charge with Zoom meetings, phone calls and emails on what's happening."
- Most people confirmed they had been provided with information regarding COVID-19 and changes that

were being implemented to keep people safe.

- The provider issued regular surveys to residents, families and staff. Information from these surveys was used to drive change and improvement.

Working in partnership with others

- Staff engaged well with other health and social care professionals to ensure people's health and wellbeing was maintained.
- Referrals to other health services were managed well and appropriately followed up on.