

# Barchester Healthcare Homes Limited

## Beaufort Grange

### Inspection report

Hatton Road  
Cheswick Village  
Bristol  
Avon  
BS16 1AH

Tel: 01173210430  
Website: [www.barchester.com](http://www.barchester.com)

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### Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

Beaufort Grange is a residential care home providing personal and nursing care to 74 people. The service at the time of the inspection was supporting 72 people. This was over three floors. Each floor was split into two units with separate lounges, kitchenettes, dining areas and seating areas where people could socially distance themselves from other people. There were gardens and balconies that people could access independently.

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

People and their relatives spoke positively about the service they were receiving. They told us there was enough staff and staff were kind and responsive to their needs. Staffing was planned based on the occupancy of the home and people's individual needs. Some people were supported on a one to one basis to keep them and others safe. This was kept under review as people settled into the home life at Beaufort Grange.

People were kept safe because risks were assessed and mitigated. Medicines were managed safely. People were able to retain responsibility for their medicines where they were assessed as being safe to do so. Safe recruitment was undertaken to ensure people were protected. Staff wore personal protective equipment in line with national guidance. Relatives and visitors were welcomed to the home.

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.

Beaufort Grange provided a comfortable and a homely atmosphere for people. The home was clean and free from odour. Plans were in place to refurbish some areas of the home such as flooring and replacement of curtains.

There were robust systems in place to monitor the quality of the service and drive improvements. Staff described a team, that worked together to deliver care that was person centred. There was an open, transparent and positive culture and people, their relatives, staff and professionals told us the management team were approachable.

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 and update

The last rating for this service was good (published 4 January 2018).

Why we inspected

The inspection was prompted in part by notification of an incident following which a person using the service sustained a serious injury. This incident is subject to further investigation by CQC as to whether any

regulatory action should be taken. As a result, this inspection did not examine the circumstances of the incident. However, the information shared with CQC about the incident indicated potential concerns about the management of risk. This inspection examined those risks and staffing within the home.

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.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well led sections of this full report.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has not changed and remains good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Beaufort Grange 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, 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 well-led findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our safe findings below.

# Beaufort Grange

## 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 completed by three 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

Beaufort Grange 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. Beaufort Grange is care home with nursing. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced.

### 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. 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 this information to plan our inspection.

### During the inspection

We spoke with ten people that lived in the home and six visiting relatives. We spoke with the regional director, the registered manager and 13 staff that included registered nurses, care staff, maintenance staff, housekeeping, and catering staff. We also emailed staff working at Beaufort Grange and received four responses. We contacted four visiting health and social care professionals for their views on the service.

We observed medicines being given to people and how equipment, such as pressure relieving equipment and hoists, were being used in the home. We looked at care files and associated documentation, medicine records, staff recruitment files, staff training records, quality assurance audits and records of meetings. We used this information to help us to make a judgement about the service.

# 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. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Systems were in place to monitor any allegations of abuse to ensure these were reported appropriately and to monitor any subsequent actions.
- Staff had received training on safeguarding and understood their responsibility to report to the unit manager/nurse and the registered manager. Staff knew how to report safeguarding concerns internally and externally.
- People and their relatives told us they felt safe. A relative told us, "They are really good here and I feel it is safe" another said, "I have no worries, she is in safe hands".
- Two people told us on occasions they had to wait ten minutes for their call bell to be answered especially at night. One person told us that sometimes they have to wait for a second member of staff to help because they needed a hoist. These people told us they did feel safe and were overall happy with the care and support they received. This was shared with the registered manager who provided evidence that call bells were regularly monitored.

Assessing risk, safety monitoring and management

- People were kept safe because systems were in place in respect of ensuring people's safety. Risks which affected people's daily lives, such as mobility, skin integrity and the, management of health conditions and continence were documented and known by staff. The staff and the management team had a good oversight of these risks and the actions being taken to reduce further risks to people.
- Where people were at risk of falls this was closely monitored, equipment to reduce injury and or one to one staff support was put in place to minimise further risks to the person. Advice was sought from the GP and the falls clinic to ensure there were no other underlying factors.
- Health and safety checks were completed regularly on moving handling equipment, equipment to keep people safe, and specialist equipment for reducing pressure wounds. Staff had received moving and handling training and their competence was regularly reviewed.
- Routine checks were completed on the environment such as water temperatures, legionella checks, fire, gas and electrical appliances. These were completed by a designated member of staff and external contractors.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

#### Staffing and recruitment

- People were supported by sufficient staff. Staffing was planned and a staffing tool was used, which looked at occupancy and people's individual needs. Some people were receiving one to one support. This was kept under review as some people had their one to one hours reduced, once they had settled into home life at Beaufort Grange.
- People and their relatives told us there were enough staff. One person said, "Staff on the whole are very good and regular staff are mainly on duty" and another person told us, "I am independent but when I need staff, I get the help I need". Another person said, "Thumbs up from me. I feel safe and well looked after".
- Catering, housekeeping staff and an activity co-ordinator complimented the care staff enabling the care staff to focus on the care of people living in the home. There was always a nurse on duty. Staff confirmed there was sufficient staff to enable them to support people. A member of staff said, "You can never have enough staff, but we plan well, work well as a team and rarely run short".
- Safe recruitment and selection processes were in place to make sure staff were safe and suitable to work with people living in Beaufort Grange.

#### Using medicines safely

- Medicines were safely managed. There were systems for ordering, administering, and monitoring medicines.
- Medicines were secure, and records were appropriate. Regular audits and stock checks were completed. Controlled medicines were stock checked each week.
- People were encouraged to self-administer their own medicines. Assessments were carried out to make sure this was safe. Some people were administering their own eye drops or using their inhalers independently.
- Only staff that had been trained and their competence checked would help people with their medicines. This was kept under review.

#### 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 supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- 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.

#### Visiting in care homes



- The home was open to visitors without the need to book an appointment. They had removed the need to complete COVID-19 tests before visiting and only asked visitors to not visit if they felt unwell. This supported people to maintain regular contact with their family and friends.

#### Learning lessons when things go wrong

- An analysis of accidents and incidents was undertaken to identify any themes and trends, specific to an individual or general to the home. People's risk assessments and care plans were updated where needed. This was communicated to staff via handovers and staff meetings..

# 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 requires improvement. At this inspection the rating has changed to 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

- Improvements had been made since the last inspection in respect of ensuring accidents had been recorded correctly. A nurse had updated one person's best interest decision documentation in respect of the use of a sensor mat in response to our findings during the inspection. However, these were in place for other people.
- Monthly checks were also completed by the provider's representatives to ensure a quality service was being provided to people living at Beaufort Grange. This included identifying areas for improvement, which were followed up over subsequent months. Action plans had been drawn up by the registered manager and the staff team.
- Daily 'stand-up' meetings were held where the management team (head of units, catering, housekeeping and nurses) reviewed key issues such as any risks relating to staff, new incidents or accidents and any concerns regarding people's health and well being. This was to ensure there was a whole home approach and the sharing of information to manage risks.
- Staff had daily handover meetings to communicate important changes and to ensure continuity of care for people. Staff were able to read the handovers enabling them to keep up to date in respect of the welfare of people.
- The registered manager reviewed call bell times to ensure people were receiving timely care and support. They had provided us with additional information after the inspection addressing the concerns that some people had told us about the delays at night when using their call bell. Staff had been reminded that call bells must be acknowledged within four minutes.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager and the staff team demonstrated they had a commitment to providing care that was tailored to the person. There was a culture where people and their relatives were included in making decisions about the care and support they needed. This was a service that listened and learnt from feedback.
- The registered manager and staff were proud to work at Beaufort Grange and talked about the team working together to ensure people received the care and support they needed.
- The registered manager had an open-door approach to management and completed daily walk arounds of the service. The registered manager was knowledgeable about the risks to the service including staffing, safe management of the pandemic and the needs of people. A visiting professional told us, "The manager is

always approachable as are the nurses".

- Feedback from people and their relatives was positive in respect of the care and support that was in place. Comments included, "This is a special place, excellent communication, mum is really well cared for" and "I am fairly independent, but I get all the care I need".

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 registered manager was aware of the duty of candour and if mistakes were made, they had a duty to be open and honest, issue an apology and take any necessary action.
- Relatives confirmed they were kept informed of any accidents or incidents that happened to their loved ones. Relatives also confirmed they had regular contact with the staff if there was a change in wellbeing, or updates from GP appointments.
- The registered manager understood their responsibility to report significant events to the Care Quality Commission and Local Authority safeguarding team to protect people.
- The provider displayed their rating prominently in the home, and the outcome of the last report with people and visitors.

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

- A monthly newsletter was produced and shared with people living in the home and their relatives. Monthly resident and family meetings were held to share information and seek feedback. These were held through video call during the pandemic for family and friends.
- Surveys were completed to seek people's views and aid improvements. These were sent to people, family, stakeholders and staff. The registered manager told us they were in the process of completing this for 2022.
- Staff meetings were held monthly to share updates and seek the views of the staff. Minutes were maintained for those that could not attend to ensure they were kept informed about any updates.

Continuous learning and improving care

- Some of the care planning documentation that we viewed would benefit from being archived. This was because they related to previous government guidance in respect of the management of COVID and were no longer relevant. One person had duplicate care plans around the risks relating to the locking of their bedroom door. Assurances were provided this would be addressed.
- The registered manager continually monitored training of staff. Staff confirmed they attended training relevant to their role, which was a combination of online and face to face training.
- Champions had been identified to improve practice and support staff within the home. These included champions for infection control, dementia, safeguarding, health and safety and equality and diversity. Observations of practice were regularly taking place to ensure staff competence and to make improvements within the service.

Working in partnership with others

- The service worked with professionals and commissioners to ensure people's needs were met. A visiting health professional told us, "I have seen the home through some challenging times. At all times they have responded well in my opinion throughout the pandemic, ensuring their residents were kept as safe as possible".