

Burlington Care (Yorkshire) Limited

The Hawthornes

Inspection report

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service well-led?

Good 

Summary of findings

Overall summary

About the service

The Hawthornes is a residential care home providing accommodation and personal care for up to 40 older people, including people who are living with dementia. At the time of our inspection there were 28 people living at the service.

The Hawthornes has two floors. The first floor provides care to people living with dementia. All bedrooms have en-suite facilities and there are communal areas such as lounges, dining rooms and bathrooms on both floors.

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

People felt safe. Systems were in place to safeguard people from the risk of abuse. People received their medication as prescribed by staff who had been appropriately trained.

Risks to people were effectively managed. Staff knew people well and were knowledgeable about individual risk management. Safe infection prevention and control (IPC) practices were in place to minimise the risk of spread of infection.

Systems in place to monitor the service were effective in identifying and addressing areas that required improvement. There was a positive culture at the service. People were happy with the support they received. People and staff were involved in making changes to the service.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was requires improvement (published 16 August 2019).

Why we inspected

This inspection was prompted through our intelligence monitoring system. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

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.

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. The overall rating for the service remains as requires improvement.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Hawthornes 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.

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.

The Hawthornes

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 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

Two inspectors carried out this inspection.

Service and service type

The Hawthornes 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 service had a manager registered with the Care Quality Commission. 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. We sought feedback from the local authority and Healthwatch Kirklees. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and

improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service about their experience of the care provided. We spoke with three members of staff on site and five staff members via telephone. This included the registered manager, a deputy manager, a domestic member of staff and care workers.

We reviewed a range of records including multiple medication records. We looked at two staff files in relation to recruitment, induction and staff supervision.

After the inspection

We reviewed a range of records including three people's care records. A variety of records relating to the management of the service, including policies, procedures, training data and quality assurance records were reviewed. We continued to seek clarification from the provider to validate evidence found. We spoke with three relatives.

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 now improved to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- Staff were recruited safely. We spoke with the registered manager about ensuring staff employment history dates were accurately recorded, they agreed to address this.
- There were sufficient staff to meet people's needs.
- The provider used a dependency tool to ensure there was a safe number of staff to meet people's needs. The provider had recently reduced staff numbers based on occupancy and people's needs however, this was under regular review.

Using medicines safely

- Medicines were managed, stored and administered safely. Records showed people received their medications as prescribed.
- There were protocols in place for administering 'as required' medications. We spoke with the registered manager about one prescription being specific, for example, stating the exact number of paracetamol to be given rather than 'one or two'. Action was taken to address this.
- Staff received training and regular competency checks to ensure safe medicines management.

Systems and processes to safeguard people from the risk of abuse

- People felt safe living at the service. Feedback from people included; "I am very happy here; everything is how I like it" and "They look after me so well."
- The service had policies and procedures in place to safeguard people and protect them from harm.
- Staff received regular safeguarding training. They were able to identify different types of abuse and followed internal and external processes to keep people safe.

Assessing risk, safety monitoring and management

- The service had systems and processes in place to report accidents and incidents. Staff were aware of the process to follow for incident reporting.
- People had risk assessments and care plans in place. These were up to date and reflective of people's individual needs and risks.
- Staff knew people well. They were aware of people's individual risks and interventions in place to manage these.
- Health and safety maintenance checks were up to date, for example, electrical and gas safety.

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 meeting shielding and social distancing rules.
- 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 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.

Learning lessons when things go wrong

- The registered manager monitored and analysed accidents and incidents. Themes and trends were identified and used to improve practice at the service.

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 requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The service promoted a person-centred culture. People were encouraged to be as independent as possible.
- Staff were person-centred, caring and respectful in their approach. Relatives told us; "Staff know [name] well, they are knowledgeable and trained to know how to support them" and "There is great community spirit at the service."
- People were offered a choice and were supported to make decisions to enhance their quality of life.

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

- There were effective governance systems in place to audit the quality of the service.
- The registered manager completed regular audits to monitor and improve the quality of service delivery. Action plans were completed following audits, the registered manager maintained good oversight of progress and outcomes.
- Staff received regular training to ensure they had the appropriate skills to support people.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People and their relatives felt able to approach the registered manager with any concerns. One relative told us they felt able to approach any staff member if they had concerns stating they, "Are all approachable, helpful and kind."
- There were regular staff meetings and supervision at the service. Most staff felt comfortable to raise concerns and they would be listened to and supported. Other staff stated that whilst they felt able to raise concerns, they did not feel these would remain confidential. The registered manager was advised of this and assurances were received regarding confidentiality.
- People were encouraged to give feedback and make suggestions. The service had an easy read survey in place for people to complete. Changes were made as a result of the feedback obtained.
- The service worked effectively in partnership with other agencies to ensure good outcomes for people.

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 open and honest when accidents and incidents occurred.

- Appropriate notifications were submitted to CQC and the local authority.