

Botany House Limited

Danesmoor Residential Care Home

Inspection report

45 Helmshore Road
Haslingden
Rossendale
Lancashire
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Tel: 01706216862

Date of inspection visit:
02 November 2021
03 November 2021

Date of publication:
19 November 2021

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Danesmoor Residential Care Home is a residential home registered to provide accommodation and personal care for 24 people aged 65 and over. At the time of the inspection, 16 people lived at the home. The home is set in its own grounds in a residential area of Haslingden.

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

People told us they felt safe living in the home and staff were kind and caring. Staff understood how to safeguard people from abuse and report any concerns. There were sufficient numbers of staff deployed to meet people's needs and ensure their safety. Risk assessments were carried out to enable people to retain their independence and receive care with minimum risk to themselves or others. People were protected from the risks associated with the spread of infection. Medicines were managed safely in the home. Whilst police checks and references had been obtained prior to new staff working in the home, there were gaps in one staff member's history of employment. The manager assured us this issue would be addressed.

Effective systems were in place to ensure lessons were learnt from any incidents and the registered manager understood their responsibility to be open and honest when something went wrong.

All people had a care plan which detailed their needs and preferences. The registered manager had ensured all staff had ready access to up to date information about people's needs. People were provided with appropriate activities and had access to a complaints procedure. Staff had good relationships with the people living in the home and we observed staff responding to people's needs with kindness and respect.

The provider, registered manager and staff had worked hard to address the shortfalls found at the previous inspection and were confident the improvements would be sustained. The registered manager carried out a number of audits to check the quality of the service. They provided clear leadership and took into account the views of people, their relatives and staff about the quality of care provided. The registered manager and staff used the feedback to make ongoing improvements 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 and update

The last rating for this service was requires improvement (published 6 October 2020) and there were two breaches of the regulations identified in relation to the management of risks and the governance of the service. The provider completed an action plan after the last inspection to show what they would do and by when to make the necessary improvements.

Why we inspected

We received concerns in relation to the management of medicines, care practices, record keeping and the management of the home. As a result, we undertook a focused inspection to review the key questions of

safe, responsive 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 found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe, responsive and well-led sections of this full report.

The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

You can read the report from our last inspection, by selecting the 'all reports' link for Danesmoor Residential Care Home 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 responsive?

Good 

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good 

The service was well-led.

Details are in our well-led findings below.

Danesmoor Residential Care Home

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

The inspection was carried out by an inspector.

Service and service type

Danesmoor Residential Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (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 information we had received about the service, such as notifications. These are events that happen in the service that the provider is required to tell us about. We also sought feedback from the local authority.

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 this information to help us plan the inspection.

During the inspection

We spoke with seven people living in the home, five care staff, the housekeeper, the registered manager and two directors of the company including the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also spoke with a visiting healthcare professional.

We had a tour of the building with the registered manager and reviewed a range of records. This included three people's care documentation, two staff files and eight people's medication records. We also reviewed a range of records relating to the management of 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 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.

Assessing risk, safety monitoring and management

At our last inspection, the provider failed to ensure current risks to people's health and safety were appropriately assessed and recorded in people's care plans. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- The registered manager and staff assessed and managed risks to people's health, safety and wellbeing. People's care plan documentation included risk management strategies and guidance for staff about how to provide their care in a safe way.
- Staff ensured people had maximum choice and control over their lives, including those with protected equality characteristics.
- The provider had arrangements for the ongoing maintenance of the premises. Since the last inspection, new flooring had been fitted in the hallway and shared areas and many of the bedrooms had been redecorated. The registered manager had carried out environmental risk assessments and ensured equipment was safe and regularly serviced. All safety certificates seen were complete and up to date.
- The provider had a business continuity plan which described how people would continue to receive a service in adverse circumstances. We also saw staff had developed personal emergency evacuation plans, which included information how to support people in the event of a fire.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- The provider had established systems and processes to safeguard people from abuse. Staff had access to appropriate policies and procedures and training and understood how to raise any concerns about poor practice.
- People told us they felt safe and were happy with the care they received. One person told us, "I feel very safe here. The staff and [registered manager] are absolutely wonderful. They give me all the freedom I want."
- Staff completed records in relation to any accidents or incidents, including falls. The registered manager checked the records to make sure any action taken was appropriate and effective. The registered manager carried out a monthly analysis of accidents and incidents to identify any patterns or trends.
- Any lessons learnt were disseminated to the staff team via handover, individual or group meetings.

Staffing and recruitment

- People told us the staff responded promptly to their needs. One person told us, "The staff are there whenever I need them. They will do anything they can to help" and another person commented, "There's always someone around and they always have time for a laugh and a joke." We noted there were sufficient staff deployed during the inspection.
- We looked at two staff members' recruitment records. Whilst both staff had completed an application form and police checks and references had been obtained, we found gaps in one staff member's history of employment. The manager assured us this matter would be addressed.

Using medicines safely

- People told us they were satisfied with the way the staff managed their medicines.
- Medicines were stored and managed safely. Staff were suitably trained to administer medicines and checks on their practice had been carried out.
- The staff maintained appropriate records for the receipt, administration and disposal of medicines. There were written protocols to guide staff on the administration of medicines prescribed 'as and when' required.

Preventing and controlling infection

- People were happy with the level of cleanliness and hygiene in the home. One person told us, "The standards of hygiene are very high here." On a tour of the building, we observed a good level of cleanliness in all areas seen.
- After inspecting the infection prevention and control arrangements in the home, we were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was accessing testing for people using the service and staff.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last comprehensive inspection, this key question was rated as requires improvement. At this inspection this key question has improved to good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received person-centred care and support in a way that was flexible and responsive to their needs. People were happy with the care they received. One person told us, "Staff without exception are very good. They are very obliging and if they can, they will."
- Since the last inspection, a new electronic care planning system had been introduced. Each person had an individual care plan, which was reflective of their current needs. Staff reviewed the care plans at regular intervals. The staff had handheld devices to ensure they had ready access to people's care plans and other essential information.
- Staff had a good knowledge of people preferences and were responsive to their needs. They maintained daily records of care and handover records. These provided information about changing needs and any recurring difficulties. We noted people's needs were described in respectful and sensitive terms.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's information and communication needs had been considered as part of the assessment and care planning processes. The registered manager understood people's right to have information presented to them in an accessible manner, such as larger print documents or the use of pictures.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to take part in meaningful activities in line with their interests and preferences. People told us they participated in a broad range of activities including arts and crafts, games and baking. Some people also enjoyed walking in the garden and local community. We saw photographs of people engaged in recent activities displayed around the home.
- A member of care staff took the lead for activities and they talked positively and enthusiastically about their role. They told us, "[Registered manager] always makes sure I have plenty of time to do activities and I just love doing things with everyone."

Improving care quality in response to complaints or concerns

- People had access to a complaints procedure. The procedure was clear in explaining how a complaint

could be made and reassured people their concerns would be dealt with.

- The registered manager had established arrangements to investigate any concerns. She confirmed there had been no complaints about the service in the last 12 months.

End of life care and support

- People were supported to have comfortable, dignified and pain free end of life care. Wherever appropriate, people's end of life wishes, and preferences were recorded and reviewed as part of the care planning process.
- Staff involved the relevant professionals when required and obtained appropriate medicines and equipment to ensure people remained pain free. Staff had access to training and the provider's policies on end of life care.

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.

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

At our last inspection, the provider had failed to operate effective systems to assess, monitor and manage the quality and safety of the service. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The registered manager and staff had a clear understanding of their roles and contributions to service delivery. Staff morale had improved, and they felt valued and supported. One member of staff told us, "The home has a lovely atmosphere. We all work well together as a team."
- The registered manager had established effective systems to monitor the standard and quality of the service. The audits were comprehensive and covered all aspects of the service. We saw action plans were drawn up to address any shortfalls.
- The registered manager was supported by the nominated individual and a director of the company who visited the home on a regular basis. We noted they had completed a thorough audit of the service.
- People and staff spoke positively about the way the service was managed and the registered manager's leadership style. One person told us, "[registered manager] is brilliant. I like everything about her. There is nothing she wouldn't do for us" and a member of staff commented, "I can't praise [registered manager] enough. There has been so much improvement over the last 12 months."
- The registered manager utilised meetings with staff, both on an individual and group basis, to ensure continuous learning and improvements took place. Staff told us they were comfortable in raising any issues or concerns within the meetings, and the registered manager was open to feedback.

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 understood and acted on their duty of candour responsibilities. They promoted and encouraged candour through openness. People told us the registered manager and staff were open and honest. Good relationships had been developed between the registered manager, staff and people living in the home.

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

- The registered manager and staff were committed to providing people with positive outcomes. They knew people well and understood their needs and preferences.
- The registered manager and staff respected people's rights and encouraged people to make choices and decisions about their care and support. Risks to people's health and well-being were assessed and kept under review; care records reflected people's choices and preferences.
- People were supported in a sensitive and kind manner. Feedback from people was positive and evidenced they felt included and listened to.

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

- The registered manager encouraged feedback from people. The quality of the service was monitored by speaking with people, regular meetings and customer satisfaction surveys to monitor whether they were happy with the service. The meetings gave people and staff the opportunity to share their views.
- The registered manager and staff were committed to delivering person centred care that respected people's diversity and personal and cultural needs. Wherever possible, people were involved in the development and review of their care plans,
- The registered manager and staff worked in partnership with other agencies including commissioning teams and health and social care professionals. This enabled effective, coordinated care and support for people.