

Mannacom Limited

Copperbeech

Inspection report

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Ratings

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

Summary of findings

Overall summary

About the service

Copperbeech is a residential care home providing personal care to 20 people at the time of the inspection. The home is registered for up to 20 people with a mental health diagnosis. Accommodation is provided in single bedrooms.

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

Everyone we spoke with said they felt safe and enjoyed life in the home. People told us that they had been more settled since moving to the home.

People felt they had a sense of purpose and led active lives in accordance with their wishes due to their home environment, their contact with the community and the support and approach of staff members. People told us they felt in complete control of their care and able to contribute, voice their opinions and have their wishes met.

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.

Care and support were delivered on an individual basis and the occupants of the home decided their own daily routines. Care, support and activities were planned around individual likes and dislikes. People were encouraged to participate in activities which were meaningful to them for example, shopping and social activities, sport on T.V. and attendance at football matches. On the whole people were independent and came and went from the home as they wished.

There was a formal complaints procedure available to people living in the home. We have recommended that informal and general "moans" also be recorded, with the actions taken and outcomes.

Professionals also spoke extremely highly of the home and how the home was able to support people to have good outcomes, helping to maintain good mental and physical health. They commented on the relaxed atmosphere in the home, with people laughing and relaxed in the company of staff. When possible given the restrictions of the building people would be supported until the end of their life by people who knew them.

Healthcare records were kept to high standards and staff knowledge of individuals was extremely good. This enabled staff to recognise early changes in people and early access to primary healthcare services this ensured excellent continuity of care.

Thorough recruitment, staff induction and ongoing training were in place to ensure that staff were suitable to work and provide support within the home.

We received mixed comments about the food even though we saw that those living in the home had input in developing the menus. People had access to food, snacks and drinks throughout the day, food was freshly prepared.

Any minor issues within the home were dealt with prior to becoming complaints, however everyone felt that their views were respected, and they could offer feedback about their care and the environment which would be respected and acted upon.

People were encouraged to continue their involvement with their chosen religion after moving to the home.

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 good (published March 2017). We have used the previous rating to inform our planning and decisions about the rating at this inspection.

Why we inspected

This was a planned inspection based on the previous rating.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring 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.

Copperbeech

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The inspection team

The inspection was carried out by one inspector.

Service and service type

Copperbeech residential care home is a 'care home'. People in care homes 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 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

The inspection was unannounced.

What we did before the inspection

We reviewed all the information we held about the provider and spoke with the commissioning authority. We reviewed the notifications sent to us from the provider in line with their legal responsibility. 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.

During the inspection

We looked at two people's care records and checked two records relating staff administration of medicines

and training. We checked audits and quality assurance reports, incident and accident records, as well as the recruitment, supervision and training information for two staff. We visited the care home and met with people living in the home.

We spoke with five members of staff including, support workers, senior staff, domestic support staff and the registered manager. People we spoke with living in the home were able to discuss their welfare and well-being with us and therefore we did not contact any relatives. We also spoke with two nurses from the community team regarding people's care and treatment.

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.

Using medicines safely

- Medications were stored safely in a locked room in a locked cabinet, this was an improvement from the last inspection.
- The temperature that medicines were stored at was monitored and recorded, this is an improvement from the last inspection.
- We saw from records that people received their medication at the prescribed times. Audits were completed daily to ensure errors were detected at an early stage.
- The home ensured that medication was reviewed regularly and helped support people to reduce or increase their medication, helping to achieve good outcomes.
- People were supported to self-medicate to maintain independence as appropriate, records were clear on what level of support people required with their medication.

Systems and processes to safeguard people from the risk of abuse

- One person told us, "I feel very safe here", another "I am more settled here than ever in my life".
- Staff receive regular training and updates regarding safeguarding adults.
- Staff were familiar with the provider's safeguarding policies and procedures. They could describe what constituted harm and what action to take if they saw any incidents of concern.

Assessing risk, safety monitoring and management

- Audits and checks were completed in respect of the environmental risks such as electrical equipment, fire equipment and gas safety.
- Risks were assessed relating to the environment, risk assessments were completed to ensure people's safety.
- People living in the home had a variety of risk assessments in place according to their needs and various activities they were involved in. These promoted positive risk taking to ensure they had fulfilled lives and participated in activities in the community.

Staffing and recruitment

- There were enough numbers of staff to provide safe, consistent care that met the needs of the people living in the home.
- Staffing was adjusted and increased if people wanted a staff member to attend external meetings/ appointments or events with them.
- Thorough recruitment procedures were evident. Pre-employment checks were undertaken on all staff prior to employment.

- We found that risks had been assessed for people working in the home due to medical conditions and pregnancy.

Preventing and controlling infection

- The environment was exceptionally clean and well maintained.
- There was dedicated domestic support in the home for cleaning and laundry. Visitors told us that the home always smells fresh and clean whatever the time of day.

Learning lessons when things go wrong

- All accidents and incidents were clearly recorded along with the action taken to reduce the risk of re-occurrence.
- There was a culture of continuous learning when things went wrong. This included ensuring clear actions were in place in response to minor issues raised through to more significant incidents.
- We found that following a recent event, an event analysis was carried out and learning shared with all staff members and if appropriate with people in the home. Staff were offered support following the incident.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices, delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People's needs were thoroughly assessed prior to moving into the home.
- People are supported by specialist services on the Wirral and we saw that relationships were positive between the staff groups.
- A visiting professional told us, the home "Manage people well and the way they work means that people's mental health is supported and stable".
- Records were maintained daily and demonstrated that support was given in line with people's preferences and preferred routines.

Staff support; induction, training, skills and experience

- Staff told us that they felt supported by the management team and by each other. One person said, "We are all like family".
- There was a clear training program for staff and this was monitored by the manager and owner to ensure staff completed their training requirements.
- Staff told us they were never asked to undertake tasks they did not have the knowledge or training to do.
- People attended regular community healthcare appointments at the GP's, dentists and opticians.

Supporting people to eat and drink enough to maintain a balanced diet

- We received mixed comments from the people living in the home, some good and some not so good regarding the choice of food on the menu.
- We saw that there was regular consultation regarding the menu planning. People living in the home had many opportunities to put ideas forward for the menu.
- During our inspection we saw people had choice as to what they wanted to eat.
- We saw people had independent access to snacks, fruit and drinks throughout the day.
- People understood their own dietary needs in respect of their health issues for example diabetes. Staff encouraged people in trying to achieve healthy weight by attending the GP practice and slimming clubs.

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

We checked whether the service was working within the principles of the MCA.

- We saw that mental capacity assessments had been completed to consider whether people were being deprived of their liberty.
- The service supported people to make a variety of decisions relating to their care and support.

Adapting service, design, decoration to meet people's needs

- The home was clean, fresh and tidy. The home was decorated to a good standard and we saw that individual bedrooms were designed and reflected individuals' taste and choice.
- We discussed the advisory notices from the recent lift inspection with the owner and manager and were satisfied that work to maintain lift safety was appropriate. Major work to replace the lift was at the planning stage.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were well supported to be as independent as possible and keep their skills. Staff philosophy was that they were there to respect people's individuality and do everything possible to support the person to be happy and comfortable in their own home.
- Care plans were written using positive language, for example, "What people admire about me" and plans developed around people's strengths.
- Staff had completed equality and diversity training and understood the importance of treating people as equals.
- People were treated with kindness, respect and compassion. People told us that the staff were very kind; we heard kind, supportive and thoughtful interactions throughout our visit.

Supporting people to express their views and be involved in making decisions about their care

- Regular meetings were held with people living in the home both collectively to address house matters and individually to ensure their support was arranged in accordance with their wishes.
- Inclusion in the decisions about the home and care gave people a sense of empowerment and control.
- People had access to advocacy services and support from local community services.

Respecting and promoting people's privacy, dignity and independence

- Staff ensured people's confidentiality was maintained. Personal information was securely stored and only accessed by authorised staff. Information was protected in line with General Data Protection Regulations (GDPR).
- People were treated with respect and dignity. Comments from people included; "Staff always treat me very well" and "I like that they are here if I need them, even just for a chat".
- People's independence was respected and promoted. One person said, "Staff let me do as much as I can for myself".

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- Care needs were assessed at the time people took residence at the home. Plans were written in a sensitive and personalised way.
- People were supported in accordance with their choices and preferences. Care plans were regularly updated to reflect people's changing needs and fluctuating mental health support needs.
- People received support from longstanding staff members who knew them well.

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 living in the home had good literacy skills and purchased newspapers and books.
- People were provided with information to meet their communication needs. The manager told us that information could be provided in different format should the needs arise in the future.

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

- We saw that people maintained regular contact with family members.
- People chose their own activities program and had developed routines and structures which helped to support their well-being.
- We saw that one person was supported by church friends to attend church regularly.

Improving care quality in response to complaints or concerns

- There was a clear complaints policy.
- No formal complaints had been made to the manager.
- People told us that if they had any "moans" they were always sorted straight away.

We recommended that the provider maintain a record of these "moans" with the action taken and the outcome, so they can clearly demonstrate they listen to the people living at Copperbeece.

End of life support

- Nobody at the time of the inspection was receiving end of life care. We spoke of how this had been

managed in the past, with previous residents and community resources available to enable people to have a pain free death and remain at home.

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; and 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

- People, their relatives and staff were asked for feedback about the service. This information was used to develop the service.
- Staff meetings were held throughout the year and staff told us their views were encouraged and acted upon.
- Ratings from our last inspection were displayed in the home. The manager had informed us of incidents and accidents as required by legislation.
- A comprehensive range of audits and checks were undertaken by the management team and they were effective in monitoring and addressing any shortfalls.
- The managers all spent time working alongside staff modelling and demonstrating high standards of care.

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

- The staff team had clear roles and responsibilities within the service that they understood.
- The staff and management team had developed positive relationships with the people they supported and their relatives.
- People received individualised care that was regularly reviewed. People's opinion of the care and support they received was regularly reviewed.

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

- Staff receive equality and diversity training.
- People living in the home, staff and relatives were asked to contribute to the running of the home during reviews and surveys.
- Staff encouraged and supported people to live their lives according to their lifestyle choices.
- Staff meetings were held throughout the year and staff told us that they felt their views were listened to.

Continuous learning and improving care; Working in partnership with others

- The staff team worked closely with other agencies to ensure positive outcomes for people. This included

working with health and social care professionals and Commissioners so that people received person centred care and support to meet their needs and choices.

- One health professional told us, "I could fill these beds twice over", and "Records kept are accurate and people's health is stable".
- There was a strong focus on learning from incidents and adverse events. For example, we saw where things had not gone as well as they could, or when audits highlighted shortfalls the service had analysed this in detail and put measures in place to improve practice.