

Healthcare Homes Group Limited

Bilney Hall

Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service well-led?

Inspected but not rated

Summary of findings

Overall summary

We carried out an unannounced comprehensive inspection of this service on 28 and 30 June 2016. A breach of the legal requirements was found and a warning notice was issued in respect of this breach. We gave the provider until 1 September 2016 to meet the legal requirements in relation to this warning notice. We undertook this focused inspection to check that they had undertaken changes to meet these requirements. This report only covers the findings in relation to that notice.

We have not changed the overall rating for this service as a result of this inspection, which was only to follow up our enforcement action. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Bilney Hall on our website at www.cqc.org.uk.

Bilney Hall is a care home that provides accommodation and personal care for up to 64 people. There were 48 people living in the home on the day of the inspection, some of whom were living with dementia.

At the time of the inspection, the home had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act and associated Regulations about how the service is run. The registered manager was not present during this inspection visit.

At the previous comprehensive inspection the systems in place to assess and monitor the quality and safety of the care provided to people were not effective. This had resulted in some people receiving poor care and being at risk of harm.

At this inspection we found that improvements had been made. The provider had extensively reviewed their quality monitoring systems and had made some changes to increase its effectiveness. New auditing schedules had been introduced and a number of audits had regularly taken place to identify if any shortfalls had occurred in relation to the quality of the care being provided. Where shortfalls had been found, action had been taken to improve the care people received.

The warning notice we issued had been complied with.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

We found that action had been taken since our last inspection. There were effective systems in place to monitor the quality and safety of the care provided and to mitigate risks to people's safety.

We could not improve the rating for the leadership of the service from requires improvement because to do so requires consistent good practice over time. We will check this during our next planned comprehensive inspection.

Inspected but not rated

Bilney Hall

Detailed findings

Background to this 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 was planned to check 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.

We undertook an unannounced focused inspection of Bilney Hall on 23 November 2016. This inspection was done to check that requirements of a warning notice, issued after our inspection in June 2016, had been met. The team inspected the service against one of the five key questions we ask about services: is the service well led? This is because the service was not meeting some legal requirements.

The inspection was undertaken by two inspectors.

During our visit we spoke with nine staff members and a representative of the provider. We looked at a number of systems and audits in regard to monitoring the quality and safety of the care provided and reviewed four people's care records.

Is the service well-led?

Our findings

At our previous inspection in June 2016, we found that systems to monitor the quality and safety of the care provided or to mitigate risks to people's safety were not effective. This had resulted in some people experiencing poor care. This was a breach of regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) 2014. We subsequently warned the provider about this and told them that they had to meet this regulation by 1 September 2016. At this inspection, we found that the necessary improvements had been made and the provider was no longer in breach of this regulation. Effective systems were now in place to monitor the quality and safety of the care that people received.

In response to our warning notice, the provider had reviewed the systems they had in place to monitor the quality and safety of the care provided. Subsequently, a new comprehensive schedule of audits had been introduced. The senior staff had completed a number of these since our last inspection. The provider's representative told us the registered manager monitored that these had been completed. They said the registered manager also monitored that any required improvements identified during the audits had been implemented.

The provider had introduced a new dependency tool to help them calculate how many staff they required each day to meet people's needs. The registered manager had reviewed this on a regular basis such as when new people came to live at Bilney Hall or when their care needs changed. When this occurred, we saw evidence that the staffing levels had been adjusted to reflect these changes. The staff we spoke with told us there were enough of them to meet people's needs and preferences. Most of them said they had seen a significant improvement within this area and that they were now able to spend more time with people.

The senior staff had completed audits regularly in relation to the safety of the premises. These covered a number of different areas including the safety of the kitchen, fire safety and legionella checks. When needed, we saw that actions had been taken to mitigate any risks to people's safety.

The provider had a system in place to monitor the environment to ensure it was suitable to meet people's needs. Some improvements had been made in relation to their findings. For example, new signage had been put in place to help guide people around the home. Rummage boxes of interesting items had been put in place for people to touch and explore. Further improvements were being made to the environment as had been identified as being required by the provider.

A new recruitment audit had been put in place to ensure that new staff had been subject to all the necessary checks prior to them commencing employment at the home. The registered manager had completed these audits. A new staff member we spoke with told us about the documentation they had needed to provide before they started working at the home. They confirmed they had been asked for three references, their previous employment history and identification.

A staff supervision matrix had been introduced. The registered manager used this to track the completion of staff supervision. The staff we spoke with all told us they had recently attended a supervision meeting with

their line manager. This had enabled them to discuss any issues in relation to their work.

An effective system was in place to make sure that the information within people's care records was accurate and that it reflected their needs and preferences. The senior staff and the provider had completed audits regularly in relation to this subject. We reviewed some people's care records following the audits that had taken place in October 2016. We found that any inaccuracies within the care records that had been discovered during the audit had been corrected.