

Lillibet Healthcare2 Limited Belgravia Care Home

Inspection report

406 North Promenade Blackpool Lancashire FY1 2LB

Tel: 01253595567 Website: www.belgraviacarehome.co.uk Date of inspection visit: 11 August 2021 16 August 2021

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Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?	Requires Improvement	
Is the service well-led?	Requires Improvement	

Summary of findings

Overall summary

About the service

Belgravia Care Home is a care home providing personal care and assistance. It is registered to provide 24hour care and support to up to 25 people who are living with dementia and /or physical disability and mental health challenges. At the time of the inspection 23 people were receiving support. The home is set over six floors and there is a lift for people to access if this is needed.

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

People told us they felt safe and they were supported by staff who helped them quickly if they needed this. Staffing had recently been increased after feedback from Lancashire Fire and Rescue Service. We have made a recommendation about the way in which staffing numbers can be calculated.

Checks were completed to help ensure prospective staff were suitable to work with vulnerable people. Risk assessments were carried out to help minimise the risk of avoidable harm and staff knew the help and support people needed. Medicines were managed safely. Two relatives told us they had no concerns with the care and support their family member's received.

Staff wore personal protective equipment to help minimise the risk and spread of infection and people were enabled to access appropriate vaccinations to help maintain their well-being. Cleaning took place to help ensure the environment remain hygienic.

Staff told us they felt supported by the registered manager and they were able to approach them if they needed support and guidance. People told us the registered manager was approachable. One person described the registered manager as, "chatty."

People were consulted and asked their views on the service provided. Surveys had been completed by people who lived at the home. People told us they were happy at the home and were confident any comments or complaints they made would be listened to. One person said of the home, "It's very relaxed."

People could not be assured governance systems were consistently effective to drive improvements at 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 and update: This service was registered with us on 15/03/2021 and this is the first inspection. The last rating for the service under the previous provider was requires improvement, published on 20/03/2021.

Why we inspected

We received concerns in relation to the management of staffing and fire safety. A decision was made for us

to inspect and examine those risks. As a result, we undertook a focused inspection to review the key questions of safe 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.

We have not provided an overall rating for the service. This was because we looked at only the key questions of safe and well-led.

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 have found evidence that the provider needs to make improvements. Please see the safe, and well-led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Belgravia Care Home on our website at www.cqc.org.uk.

Follow up

We will work alongside the provider and Lancashire Fire and Rescue Service to monitor progress. We will 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?	Requires Improvement 😑
The service was not always safe.	
Details are in the safe section of the report.	
Is the service well-led?	Requires Improvement 😑
Is the service well-led? The service was not always well-led.	Requires Improvement 🤎



Belgravia 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 two inspectors.

Service and service type

Belgravia 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. 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 first day of the inspection was unannounced. The second day was announced.

What we did before the inspection

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. We also looked at information we had received and held on our system about the service, this included notifications sent to us by the provider and information passed to us

by members of the public and the fire service. We used all this information to plan our inspection.

During the inspection

We spoke with nine people who used the service. We also spoke with the registered manager, five care staff, two maintenance people and one domestic staff. We spoke with five relatives over the telephone.

After the inspection

We continued to seek clarification from the manager to validate evidence found. We looked at records and information sent to us from the manager and contacted the home to speak with the registered manager.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. This is the first inspection for this newly registered service. This key question has been rated as requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Assessing risk, safety monitoring and management;

• The provider was taking action to ensure improvements were made to fire safety. An inspection carried out by Lancashire Fire and Rescue Service had identified concerns with fire safety at the service. The provider had a plan of how all actions would be completed. External companies were planning to install specialised lighting and equipment, and structural work was being arranged to improve the fire safety of the home.

This work had not been completed at the time of the inspection, we will check with Lancashire Fire and Rescue Service and the provider, that all required work is carried out within the specified timescales.

• The provider had arranged for an independent fire risk assessment of the service to be carried out and was acting on the recommendations made. For example, staffing had been increased and additional fire safety signage had been displayed. Staff had been trained in fire safety and knew the actions to take if people needed to evacuate the home in an emergency. New equipment was being purchased to support safe evacuation and staff had received instruction in the techniques needed to use it safely.

• The provider had processes to follow to ensure the risk of avoidable harm was minimised. Risk assessments of nutrition, skin health and mobility were carried out. Staff could explain the help people needed to support their safety.

• Equipment was serviced and checked to help ensure it remained safe for use.

Staffing and recruitment

• The provider deployed sufficient staff to enable people's needs to be met promptly. People told us they received help when they needed it and staff raised no concerns with the staffing arrangements. During the inspection call bells were answered quickly and staff were responsive to people's needs. The manager told us staffing had been increased after feedback from the Lancashire Fire and Rescue Service.

We recommend the provider seeks and implements an effective staffing tool, which will help identify the number of staff required to support people who live at the home.

• The provider followed procedures to help ensure prospective employees were suitable to work with people who may be vulnerable. References and criminal record checks were carried out prior to prospective employees starting to work at the home. We noted one recruitment record did not fully explore a person's reason for leaving their former employer. This was addressed prior to the inspection concluding.

Systems and processes to safeguard people from the risk of abuse

• The provider ensured staff were trained in safeguarding. Staff we spoke with could explain examples of abuse and said they would raise any concerns with the registered manager or the local safeguarding authority to ensure people were protected.

• People told us they felt safe and they trusted staff. People said they felt comfortable at the home and they would speak to staff or the management team if they wanted to do so. One person commented that staff were, "Nice and kind."

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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Using medicines safely

• Medicines were managed by staff who were trained in the management of medicines and their competency assessed.

- Medicines were stored securely, and access was limited to those staff trained to administer them.
- Arrangements were in place to store medicines that required refrigeration.

Learning lessons when things go wrong

• Staff completed accident records which were reviewed by the registered manager to identify trends. For example, if people expressed behaviours which may challenge, these were reviewed to see if any trends or themes could be identified.

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. This is the first inspection for this newly registered service. This key question has been rated as requires improvement.

This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of 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; 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 provider had not ensured an effective governance system was in place to consistently identify shortfalls and drive improvements. Areas of concerns identified by Lancashire Fire and Rescue Service had not been identified through audits. For example, fire doors had been identified as being wedged open and some fire doors did not fit correctly in their frames.

We recommend the provider seeks and implements best practice guidance in audit and improvement processes designed to drive improvement.

- The registered manager shared they were able to contact the provider and the provider was supportive. They said additional training was being arranged for them to increase their knowledge on fire safety matters.
- The registered manager worked openly and transparently, and supported people and staff to raise compliments, concerns and their views with them.
- People told us they felt confident in the management team at the home and they were able to share their views with them.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people;

- The service engaged with people and others acting on their behalf to enable them to influence the service provided. Surveys were provided to gain people's views and action taken. For example, additional evening activities had been arranged when requested by people at the service.
- People told us they felt confident in the management team at the home and they were able to share their views with them. One person said, "It's all good here."

• Staff said they felt there was good teamwork and morale and they could approach the registered manager if they wanted to do so.