

Dr Christopher John Allen

Brockhampton Court Care Home with Nursing

Inspection report

Brockhampton
Hereford
Herefordshire
HR1 4TQ

Tel: 01989740239
Website: www.brockhamptoncourt.co.uk

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Ratings

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

Summary of findings

Overall summary

About the service

Brockhampton Court Care Home with Nursing is care home providing personal and nursing care to a maximum of 58 older people and younger adults with physical disabilities within a large adapted building. At the time of our inspection, 41 people lived at the home.

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

The registered manager had made the necessary improvements since our last inspection to ensure people had their assessed needs met and were safe. Risks to people were now managed safely and systems to ensure people were protected from abuse were now effective.

The provider had implemented effective governance systems since our last inspection to identify shortfalls in the quality and safety of the service. Actions identified were addressed allowing continuous learning and improving the quality of care provided. These improvements meant the provider was no longer in breach of Regulation 17 HSCA RA Regulations 2014 Good governance.

People and staff felt the home was well-led by a supportive registered manager.

People were supported by staff who knew them well and felt safe. People reported there were sufficient staff to meet their needs.

People received their medicines from staff who were trained to administer medicines safely. Staff followed good infection control practices to reduce the risk of infection.

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.

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 09 September 2020). At that inspection three breaches in regulation were identified to Regulation 12 Safe Care and treatment of the Health and Social Care Act 2008 (Regulated Activities) Regulations, Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and 2014 and Regulation 18 Staffing of the Health and Social Care Act 2008 (Regulated Activities) Regulations.

The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At this inspection we found improvements had been made and the provider was no longer in breach of regulation.

Why we inspected

This was a planned inspection based on the previous rating. This inspection was carried out to follow up on action we told the provider to take at the last inspection.

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.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. 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 comprehensive inspection, by selecting the 'all reports' link for Brockhampton Court 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Brockhampton Court Care Home with Nursing

Detailed findings

Background to this inspection

The inspection

This was a focussed inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 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 team consisted of four inspectors and a Specialist Nurse Advisor. Two inspectors visited the site and the other two inspectors contacted relatives and reviewed information sent by the provider.

Service and service type

Brockhampton Court 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

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 looked at information we had received about the service since the last inspection. This included information about incidents the provider must notify us of, such as any allegations of abuse. We sought feedback on the service from the local authority and local Healthwatch. 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 all of this information to plan our inspection.

During the inspection

We spoke with five people who lived at the home. We also spoke with nine members of staff, including the provider, nurse, head of care, infection prevention control lead, team leader, chef, two care assistants and the activity coordinator.

We looked at a range of records. These included two people's care records, multiple medicines records, staff rotas, staff training records, and staff recruitment records. We also looked at incident and accident records, complaints, selected policies and records relating to the safety of the premises and management of the service.

After the inspection

We spoke to the registered manager via telephone and continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with three professionals who visit the service. We also spoke to six relatives by telephone and email.

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.

At the last inspection the provider was found to be in breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was because of shortfalls in care planning, risk management, infection control and prevention practices. At this inspection we found the necessary improvements had been made and the provider was no longer in breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Systems and processes to safeguard people from the risk of abuse

- Staff had completed training in how to safeguard people from the risk of abuse. They were knowledgeable about the different types of abuse and knew what to do if they had concerns. One staff member told us, "I am confident the registered manager would act upon any issues we raised with them if we had concerns".
- The manager understood their role and responsibilities to notify the Care Quality Commission [CQC] and other organisations of any concerns about people's safety.

Assessing risk, safety monitoring and management

- Risks to people's health, safety and well-being were identified and regularly reviewed to manage people's changing needs. Staff knew how these risks affected people's safety or well-being and were aware of how to respond safely.
- People told us the care they received met their needs and were confident that staff supported them in a safe manner. One person said, "The actual care and attitude of the [staff] I find are marvellous".
- The provider has implemented a new electronic care record system when enables the management team to easily see when risk assessments were last reviewed.
- Regular safety checks and servicing was carried out in areas such as fire and electrical safety, the environment, water quality and a variety of health and safety checks. People had personal emergency evacuation plans [PEEPs] in place that directed staff how to respond in the event of an emergency.

Staffing and recruitment

- People told us they felt supported by enough, suitably trained staff. One person said, "There is a large group of staff who are varied, and the medical staff are very, very good". A relative was complimentary about the staff employed they said, "I have every confidence in them".
- The provider had a safe recruitment system and full employment checks were completed before staff started to work in the service.
- There were sufficient members of staff to meet people's needs safely. There was a range of ancillary staff including domestic and activities staff, which meant care staff could focus their attention on delivering care to people.

Using medicines safely

- People received their medicines as prescribed. There were systems in place for the safe management of medicines including the storage, ordering, administration and return of medicines.
- A relative told us, "Staff are very good with encouraging [person's name] with medication as [person's name] is reluctant to take them".

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

- Accidents and incidents were noted in the care records and referred to the manager. These records were completed and demonstrated appropriate action by staff. These were then formally reviewed for any themes or trends emerging by the manager and any required action taken.

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 Requires Improvement. At this inspection this key question has now improved to Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

At the last inspection the provider was found to be in breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was due to the failure of the provider to ensure staff were trained to competently perform their roles. This had placed people at risk. At this inspection we found the necessary improvements had been made and the provider was no longer in breach of regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Staff support: induction, training, skills and experience

- There was an induction programme in place for new staff to prepare them for their role.
- Staff received ongoing training in a wide range of health and social care topics. One staff member told us, "training is excellent now and it has really helped. The dementia training helps you recognise situations and how to reassure people".
- Staff were provided with opportunities to review their work and development needs through regular supervisions with their line manager.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- A detailed assessment of people's needs was carried out before they came to live at Brockhampton Court to ensure the service could provide the necessary care and support.
- People were cared for by staff who knew their needs well.
- A relative told us "[staff] always keep me up to date with changes in [person's] needs and we all agree the next steps together".

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

- People's individual dietary needs were catered for, including people's individual cultural needs.
- Food served was of a good standard and people were offered choice.
- One person told us, "The food is extremely good".

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People were supported to maintain their health needs with access to a range of health and social care services. For example, dietician, optician, and GP. As a result of the pandemic, GP rounds are currently completed remotely on a weekly basis and whenever an urgent issue arises.

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

- People had personalised their bedrooms and a variety of communal areas offered people a choice of where to spend their time. Accessible landscaped gardens and outdoor terraces were available for people to enjoy.

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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- A relative told us "I don't think there is any more they [staff] could do to help [person] be more independent".
- Care plans evidenced that people, and where appropriate, their families / representatives, had been involved in decisions about the care provided.
- Decisions to administer medicines covertly [hidden], had been made in the person's best interests with involvement of relevant persons.

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.

At the last inspection, the provider failed to operate effective systems and processes to assess, monitor and improve the quality and safety of the service. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found the necessary improvements had been made and the provider was no longer in breach of regulation 17.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Quality audits had been improved to ensure the health and safety of people were addressed promptly. For example, all incidents were now reviewed by the registered manager and where necessary root, cause, analysis investigations took place so lessons could be learnt, to help prevent a further occurrence.
- The registered manager and staff team engaged with the inspection process throughout, readily supplying all of the information requested by the inspection team.
- Staff spoken with were knowledgeable, clear about their role and the leadership structure.
- The management team completed a wide range of audits to assess, monitor and improve the quality of the service.
- The service had been working towards completing an action plan with support from the local authority. We could see that good progress had been made.

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

- Staff and the management team promoted a person-centred and open culture. Outcomes for people were positive. One person told us "I love it here, they really do care and treat me like family".
- Meetings were held for staff and people living at Brockhampton Court including daily Head of Department meetings were held to share important information. The provider is hoping to be able to restart face to face meetings with relatives soon, once it is safe to do so following government guidelines.

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 clear about their responsibilities for reporting to the CQC and the regulatory requirements. We had received notifications about events that occurred within the service and the rating from the last CQC inspection was displayed as required.
- Audits were detailed and showed lessons had been learnt to prevent recurrences.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- People told us they were regularly consulted about their care and any improvements the service could make.
- Staff told us, there were regular supervisions and staff meetings, where they could discuss matters relating to the management of the service.
- The registered manager understood the importance of people being able to stay in contact with their families and friends throughout the Covid-19 pandemic. People were supported by staff to contact their loved ones using electronic devices to ensure they could stay in contact.

Working in partnership with others

- The management team worked in partnership with other agencies to achieve good outcomes for people including healthcare professionals and commissioners of services.