

Larchwood Care Homes (North) Limited

Bryan Wood

Inspection report

1 Bryan Road
Edgerton
Huddersfield
West Yorkshire
HD2 2AL

Tel: 01484453366

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08 June 2021

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Bryan Wood is residential care home providing personal and nursing care to 27 people aged 65 and over at the time of the inspection. The service can support up to 45 people.

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

People received their medicines as prescribed. Systems were in place to maintain people's safety and protect them from abuse. Risks were identified, appropriate control measures were implemented, and the safety and cleanliness of the environment was maintained. Systems were in place to recruit staff safely and there were adequate staffing levels in place to meet people's needs.

Systems were in place to monitor the quality and safety of the service and drive improvement. However, oversight of staff training had not been effectively managed. We have made a recommendation about this. There was no registered manager. The service was run by a manager and supported by a regional manager. The provider had oversight of the service. Staff morale had not always been positive; steps were taken to improve this.

People's feedback was used to make decisions about the running of the service. Links were developed with organisations to ensure outcomes were achieved for people.

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 4 September 2018).

Why we inspected

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 COVID-19 and other infection outbreaks effectively.

The inspection was prompted in part due to concerns received about the management of the service. 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. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We have found evidence that the provider needs to make improvement. Please see the well-led section of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Bryan Wood 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.

Is the service well-led?

Requires Improvement ●

The service was not always well-led.

Bryan Wood

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.

Inspection team

This inspection was carried out by one inspector.

Service and service type

Bryan Wood 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 did not have 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 announced on the day of the visit. We did this to discuss the safety of people, staff and inspectors with reference to COVID-19.

Inspection activity started on 08 June 2021 and ended on 14 July 2021. We visited the care home on 08 June 2021.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, professionals who work with the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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 used all of this information to plan our inspection.

During the inspection

We spoke with three members of staff including the manager, deputy manager and a senior care assistant. We spoke with four relatives.

We reviewed a range of records. This included two people's care records and two people's medication records. We looked at two staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We attempted to source feedback from further staff members, however we did not receive a response.

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 good. At this inspection this key question has remained the same.

This meant people were safe and protected from avoidable harm.

Using medicines safely

- People received their medicines as prescribed. Medicines were received, stored, administered and disposed of safely. However, we found a recording shortfall for one person's pain patch. Action was taken to prevent this reoccurring.
- Staff involved in handling medicines had their competency assessed to ensure they had the correct skills to safely administer them.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- The environment and equipment had been assessed for safety.
- Care plans contained explanations of the control measures for staff to follow to help to keep people safe.
- Accidents and incidents were recorded appropriately. The manager had oversight of these, so any patterns and trends could be identified to reduce the likelihood or impact of these reoccurring.

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to protect people from harm. Safeguarding referrals were made to the local authority when required and local procedures followed.
- Staff had received safeguarding training to identify and raise concerns appropriately. Staff were aware of whistleblowing.

Staffing and recruitment

- Staffing levels met people's needs and were monitored appropriately.
- Systems were in place to recruit staff safely. Pre-employment checks were carried out to check people's suitability before they worked at the service.

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.

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 now deteriorated to 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

- Effective systems were in place to monitor the quality and safety of the service. However, oversight of staff training had not always been effectively managed. Staff training was not up to date for all staff including falls prevention and practical moving and handling.
- The provider had not completed an outstanding action on the fire risk assessment for suitable evacuation arrangements as fire simulated evacuation training was also out of date for multiple staff.

We recommended the provider implement a training plan to ensure training is kept up to date.

- There was no registered manager at the time of our inspection. The service was being supported by a peripatetic manager and regional manager. The provider had oversight of the service and carried out regular quality monitoring visits.
- Since the registered manager left their post relatives told us they felt unclear about who was running the service and communication had not always been effective. A relative said, "I have no idea who the manager is." Another told us, "[There is] no communication."

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

- For some staff morale had not been positive in recent months, but management were working to resolve any issues. A member of staff said, "[I] can go to [managers] with any concerns" and "issues were being resolved".

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

- People's feedback was gathered and used to drive improvement within the service. For example, people's feedback was gained on meals and used to improve the menu.
- Staff were encouraged to share their views and contribute to decisions about changes. Regular staff meetings were held.

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; Working in partnership with others

- The manager was aware of the duty of candour and their responsibilities in relation to this.
- Links had been developed with other services and organisations; staff worked in partnership with them to achieve outcomes for people. For example, health professionals. A relative said, "[Staff] seem to be very attentive looking after [relative's name] when things go wrong." They went on to explain how their needs had been met and medical professionals had been contacted.
- The manager was keen to drive improvement within the service. Learning had been identified and action taken to drive improvement.