

Maria Mallaband Properties (5) Limited

The Belvedere

Inspection report

Horseshoe Lane
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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

The Belvedere is registered to provide accommodation, nursing and personal care for up to 41 people. At the time of the inspection 41 people were using the service.

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

People living at The Belvedere told us they felt safe. Safeguarding systems, policies and procedures ensured people were safe and protected from abuse. Risks to people's health safety and welfare were identified and managed safely with the involvement of the person or their representatives. There were sufficient numbers of suitably trained and experienced staff on duty and safe recruitment procedures were followed. Medicines were safely managed, and systems were in place for reporting accidents and incidents and learning from them.

People's care, treatment and support achieved good outcomes and promoted a good quality of life. People and their visiting relatives told us they were involved in discussions about their care and their outcomes were good. Comments included: "The home is excellent, (relatives) needs were assessed and we were involved in developing care plans, so staff know how to respond to (relative) and keep them safe" and, "I have seen (relatives) care plans they are very good. They reflect (relatives) needs." 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.

People were treated well, and their privacy, dignity and independence was promoted and respected. People and family members were given opportunities to openly express their views and opinions and they felt listened to. Their comments included: "The staff are fantastic. They work as a team, you can see them communicate to make sure people are safe," and "We are very happy and confident (relative) is safe". The atmosphere in the home was warm and welcoming. A range of activities and opportunities for social interaction were on offer and we could see people had enough to do. Staff had developed good relationships with people. Care plans were personalised and reflected people's individual needs, their history and preferences. People supported by their relatives told us staff knew them well and provided them with the right care and support.

The registered manager was clear about their role and responsibilities and they promoted a positive and person-centred culture. Staff worked well together as a team, and there was good partnership working with others to meet people's needs. Staff morale was good, and staff felt well supported. Effective systems were in place for checking on the quality and safety of the service and making improvements where needed.

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 good (published 28 July 2017).

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 ●

Details are in our safe findings below.

Is the service effective?

Good ●

Details are in our effective findings below.

Is the service caring?

Good ●

Details are in our caring findings below.

Is the service responsive?

Good ●

Details are in our responsive findings below.

Is the service well-led?

Good ●

Details are in our well led findings below.

The Belvedere

Detailed findings

Background to this inspection

Background

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

The inspection was carried out by one inspector.

Service and service type

The Belvedere 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

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. This information helps support our inspections. We used all this information to plan our 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.

During the inspection

We spoke with eight people who used the service and three family members about their experience of the care provided. We spoke with 16 staff members including the registered manager, deputy manager, regional director, quality manager, four nurses, seven care assistants, a kitchen assistant and a house keeper. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included four people's care records, multiple medication records and records of two staff in relation to their recruitment and supervision. A variety of records relating to the management of the service were also reviewed.

After the inspection.

We continued to seek clarification from the provider to validate evidence found. We spoke with two professionals who regularly visited the service to gather their views on the quality of care provided.

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.

Systems and processes to safeguard people from the risk of abuse

- There were effective systems in place to safeguard people from the risk of abuse.
- Staff had completed safeguarding training and were confident in recognising and reporting abuse.
- Most of the people who lived at the home were unable to answer our questions about the quality of care, but two people did say they felt safe. However, they all presented as content, relaxed and at ease and visiting relatives told us they were confident their loved ones were safe and well cared for. Their comments included; "The staff are fantastic. They work as a team, you can see them communicate to make sure people are safe," and "We are very happy and confident (relative) is safe".

Assessing risk, safety monitoring and management

- Risks to people's health and safety were identified and well managed.
- The service had contingency plans in place to manage unforeseen emergencies and each person had an up to date personal emergency evacuation plan (PEEP).
- Regular safety checks were carried out on the environment, equipment and utilities.

Using medicines safely

- Medicines were received, stored, administered and disposed of safely.
- Staff involved in handling medicines had received training around medicines and had access to relevant guidance regarding the administration of medicines required on an as and when required basis.

Staffing and recruitment

- There were enough suitably, skilled and experienced staff on duty to safely meet people's needs. People and family members told us; "The staff meet our requirements favourably, it suits us well" and "They are never short staffed, always enough staff on duty".
- The provider followed safe procedures for the recruitment of staff and all appropriate checks had been completed before new staff were employed in the home.

Learning lessons when things go wrong

- A system was in place to monitor any incidents or accidents which occurred which was monitored by the homes designated quality manager.
- When something went wrong learning was shared across the team with "Flash meetings" convened at a moment's notice.

Preventing and controlling infection

- The environment was clean and hygienic throughout.
- Staff had completed training and followed good practice guidance to minimise the risk of the spread of infection.

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

- People's needs and choices were assessed, and care plans were developed with the involvement of the person.
- Care plans reflected people's needs and preferences and included guidance for staff on oral care.
- People and where appropriate their relatives were involved in discussions about their care and they experienced good outcomes. Visiting relatives' comments included: "The home is excellent. (relatives) needs were assessed and we were involved in developing care plans, so staff know how to respond to (relative) and keep them safe,"
- Monitoring charts were in place and used effectively to monitor and evaluate aspects of people's care. We found some inconsistencies in what staff were recording. However, the manager responded effectively, and recording systems were improved during the inspection.

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.

- Staff had completed training around the MCA and they understood the principles of the act and associated DoLS.
- Staff knew which people had a DoLS in place and what it meant for the person. DoLS authorisations for people were being effectively monitored.
- Staff obtained people's consent before providing any care and support.

Staff support: induction, training, skills and experience

- New staff received an induction training which consisted of training in key areas, and shadowing more experienced staff, to ensure they were competent before they could work unsupervised.

- Staff were skilled and knowledgeable about meeting people's needs. Staff received training in a variety of appropriate and specialist topics to help guide them in their role.
- Staff told us that they were well supported and appreciated the support and direction from the management team.
- Staff received regular group and individual supervision. People told us they thought the staff were knowledgeable and well trained. A visiting relative said: "The home is fantastic" the staff are well trained.

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

- People's nutritional needs were assessed and planned for using a nationally recognised tool.
- Records showed that people were offered and, where necessary, supported with sensitivity and care to eat a balanced and nutritious diet.
- The dining experience was relaxed, pleasant and sociable, and people enjoyed their meal.
- Visiting relatives made positive comments about the standard of catering. Their comments included; "Food is good, being here has been good for (relative) who is doing so well" and "(relative) has pureed food and thickener in drinks because they are at risk of choking. They (staff) give them cream and other high calorie food and (relative) is maintaining a good weight."

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

- Visiting relatives told us that their relatives health care needs were met.
- People had routine access to healthcare professionals and had been referred to specialists when required.
- Visiting healthcare professionals told us that staff worked closely with them to ensure people's health care needs were met.
- Information regarding people's changing health needs was shared between staff during shift handovers, and people's care needs were adjusted as required.

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

- The design and layout of the environment met the needs of people living at the home.
- Technology and equipment including sensor mats and air flow mattresses was available to meet people's care and support needs. A sensory room had been created since our last inspection which provided opportunities for stimulation, distraction and relaxation
- The home was suitably decorated throughout. Some bedroom doors had been decorated with individualised wraps (vinyl door coverings) which improved the aesthetics of the home and aided orientation for people, including those living with dementia. The registered manager told us that wraps were to be applied to all bedroom doors in near future.

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.

Respecting and promoting people's privacy, dignity and independence; Ensuring people are well treated and supported; respecting equality and diversity.

- Staff continued to be consistently caring. They treated people with kindness and respect and, promoted people's choice. Staff sought people's consent and offered emotional support when needed.
- The atmosphere in the home was warm, welcoming and at times vibrant with laughter and people socialising. Staff knew people well and had developed good relationships with them.
- People and their visiting relatives praised the standard of care provided. Their comments included, "Very nice home it meets our needs" and "I'm perfectly looked after and perfectly happy."
- People's personal information was kept confidentially and securely.

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

- People, along with family members, were encouraged to share their views about the care provided during care plan reviews, and at residents' relatives meetings.
- People were provided with Information about services they could access if they needed independent advice and support.

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 requires improvement. At this inspection this key question has now improved to good. 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 plans had been improved since our last inspection. They were personalised and reflected people's individual needs, history and preferences.
- Visiting relatives told us staff knew their relatives well and provided them with the right care and support.
- Care and nursing staff knew people's likes, dislikes and preferences and used this knowledge to care and support people in the way they preferred.

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.

- Care plans contained information about how to support people's communication needs.
- Staff were familiar with each person's communication needs and encouraged and enabled people to express their needs and wishes using their preferred method of communication.
- Information was provided to people in different formats where this was required.

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

- The atmosphere in the home was always sociable, welcoming and friendly. People were supported to maintain relationships and relatives were welcomed into the home.
- An activities coordinator provided a range of engaging activities on a group or individual basis and people's hobbies and interests were supported. Representatives from a local church visit the home twice monthly to help meet people's spiritual needs.
- We could see that people thoroughly enjoyed the activities on offer which stimulated social interaction and provided opportunity for physical exercise.

End of life care and support

- Staff received training in end of life care and afforded people opportunity to discuss and plan their end of life wishes with support of others such as family members and the person's doctor were appropriate.
- Where required, end of life care plans were in place. These reflected the person's expressed needs and wishes and made provision for a comfortable, dignified and pain free death. A visiting relative told us how they had appreciated discussing their relatives end of life needs with nursing staff.

- The appropriate documentation, authorised by their doctor, was in place where people had expressed a wish to not be resuscitated.
- The home was equipped with "End of life comfort care boxes" which contained, lip balms, a scent aromatherapy diffuser, comfy soft bed socks and hand creams. These provided staff with ready access to some of the things they might need when providing end of life care.

Improving care quality in response to complaints or concerns

- There was a complaints policy in place and people knew how to raise any concerns they had.
- Arrangements were in place to ensure complaints were recorded, investigated and responded to appropriately. However, the home had not received any formal complaints in the last 12 months.
- Visiting relatives told us that they were aware of the complaints procedure but had never needed to use it because the registered manager and staff always listened and acted on any issues raised.
- The complaints procedure was posted in the foyer and was available in an easy read format.

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.

Continuous learning and improving care Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- Effective systems for checking on the quality and safety of the service and for making improvements were in place and were being followed.
- The registered manager understood their responsibilities to act in an open and transparent way when things went wrong. Incidents and accidents were analysed, and learning shared with the staff team, to help ensure people received safe and effective care.
- The manager and staff completed training and kept up to date with the law and current good practice guidance to update their knowledge and learning.
- The CQC had been notified about incidents and events which occurred at the service, in accordance with the regulations.

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

- The management team promoted a culture of person-centred care by engaging with staff, everyone using the service and relevant others such as family members.
- Visiting relatives spoke highly of the home and the standard of care provided. Their comments included; "There are no better staff than here, they are professional caring and well trained" and "Staff are perfect. They are very, very good. Never miss opportunity to engage with or speak to people make them feel better."
- Morale amongst the staff team was good. Staff told us that they appreciated support, guidance and direction of the registered manager.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service continued to involve people and family members in discussions about the quality of care provided.
- Relatives and other visitors were welcomed and there were no restrictions for visitors creating a warm and inclusive environment.
- Staff told us that they felt involved in decisions made about the service; and were confident sharing their ideas and views and felt they were listened to.
- Managers and staff worked in partnership with other agencies to ensure good care. A visiting healthcare professional said; "The manager is very good; the staff are professional and maintain effective communication. They work with us to make sure that the needs of people are met in the best possible way".

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 provider met the regulatory requirements to be open and transparent with people using the service when things went wrong.
- The ratings from the last inspection were clearly displayed at the service and on the providers website.