

Crystal Croftdene Limited

# Blossom Hill Care Home

## Inspection report

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### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Blossom Hill Care Centre is a residential care home providing personal and nursing care to up to 40 people. The service provides support to older people, some of whom are living with dementia. At the time of our inspection there were 40 people using the service.

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

People and relatives gave positive feedback about the care provided at Blossom Hill Care Centre. People also said they felt safe. Staff knew how to report concerns and felt confident to do so.

Safeguarding referrals, as well as incidents and accidents, were investigated. Health and safety related checks were completed to maintain a safe environment and the home was clean throughout. There were enough staff to meet people's needs and new staff were recruited safely. People received the medicines they needed when they were due.

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.

There was a structured approach to quality assurance which was used to identify areas for improvement. People, relatives and staff had opportunities to give feedback about the home.

### Rating at last inspection

The last rating for the service under the previous provider was good, published on 22 November 2018.

### Why we inspected

We had concerns about the length of time since we last inspected the home. We undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good based on the findings of this inspection.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk).

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Blossom Hill Care Centre on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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.

Details are in our safe findings below.

### **Is the service well-led?**

**Good** ●

The service was well-led.

Details are in our well-led findings below.

# Blossom Hill 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 Health and Social Care Act 2008.

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

An inspector and an Expert by Experience carried out this inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Blossom Hill Care Centre is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Blossom Hill Care Centre is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was not a registered manager in post. There was a manager employed, who was intending to apply for registration.

#### Notice of inspection

This inspection was unannounced.

#### 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. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used this information to plan our inspection.

#### During the inspection

We spoke with 5 people who lived at the service and 4 relatives. We spoke with 6 staff; the nominated individual, the manager, 1 nurse, 1 senior care worker and 2 care workers. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We reviewed a range of documents relating to the safety and management of the home.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective systems to help keep people safe from the risk of abuse. Safeguarding concerns had been referred to the local authority, investigated and recommendations acted on.
- People and relatives confirmed the home was safe. One person commented, "The staff pop in and out and make sure I'm okay. They come quickly if I press my alarm."
- Staff understood the whistle blowing procedure and were confident to raise concerns, if required. One staff member told us, "I would definitely raise concerns [if required]. They would deal with it correctly."

Assessing risk, safety monitoring and management

- The provider effectively managed risks and acted to help keep people safe
- Health and safety checks were completed regularly, to keep the environment and equipment safe.
- Risk assessments identified measures to reduce risks, to help keep people safe from harm.
- The provider had procedures for dealing with emergency situations. This included personalised plans to support people safely in an emergency.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.

Staffing and recruitment

- There were enough staff to meet people's needs. The registered manager regularly monitored staffing levels to ensure they remained appropriate.
- People told us staff responded in a timely manner when they needed assistance. One person told us, "All the staff are amazing. If I press my bell, even during the night, they come straight away."
- New staff were recruited safely. The provider carried out pre-employment checks to ensure prospective

staff were suitable to be employed at the home.

#### Using medicines safely

- Medicines were managed safely. People confirmed they received their medicines when they were due.
- Records showed people received their medicines on time. The manager checked regularly to ensure staff followed the correct medicines procedures.

#### 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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- 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.
- The provider followed Government guidance regarding visiting the home, there were currently no restrictions.

#### Learning lessons when things go wrong

- The provider investigated accidents and incidents and acted to keep people safe.
- The provider had systems for monitoring and analysing incidents and used the findings to improve the care provided at the home.



# 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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider aimed to develop a positive culture and plan care around people's individual needs. People, relatives and staff were positive about the home and the care provided. One relative commented, "The staff are all very helpful, and residents appear happy and content."
- People, relatives and staff described the registered manager as approachable. One staff member said, "I am fully supported by colleagues and management. I know I can go to [manager] about anything."

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 understood the duty of candour and acted appropriately. They were proactive in submitting the required statutory notifications for significant events to the Commission.

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

- There were opportunities for people, relatives and staff to share their views about the home. Staff and relatives had completed surveys during 2022. Where issues were identified, an action plan was developed and the concerns addressed. New questionnaires were being sent to people, relatives and staff.
- Staff and residents' meetings took place regularly. Staff told us they were able to provide feedback openly.

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

- The provider had a structured approach to quality assurance. Senior staff completed regular checks across a range of topics, such as medicines administration, IPC and nutrition. The findings were analysed to identify areas for improvement.
- The home had an improvement plan which linked to the quality assurance systems, this was updated regularly to show progress made.

Working in partnership with others

- The provider was working with commissioners and other health services to work towards promoting good outcomes for people.