

Barchester Healthcare Homes Limited

Mulberry Court

Inspection report

Clifton Park Shipton Road York North Yorkshire YO30 5PD

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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

Mulberry Court is a residential care home providing personal and nursing care to 41 people aged 65 and over across three floors, each with their own communal areas and bathing facilities. The service can support up to 64 people.

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

People living at Mulberry Court benefitted from safe and person-centred care, delivered by a team of skilled and co-ordinated staff.

People were kept safe from abuse and avoidable harm and received their medicines on time and as prescribed. Staff were recruited safely, and enough staff were deployed throughout the home to meet people's needs.

The home was well-run, and staff were clear about their roles and responsibilities. The registered manager was a visible presence in the home promoted an open, learning culture. People, staff and relatives were encouraged to feedback and contribute to the ongoing development of the service.

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

The last rating for this service was good (published 12 November 2018).

Why we inspected

The inspection was prompted in part due to concerns received about the home. 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 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 overall rating for the service has remained the same. This is based on the findings at this inspection. We found no evidence during this inspection that people were at risk of harm. 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 Mulberry 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 reinspection 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.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good



Mulberry Court

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

Mulberry 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

The inspection was announced one hour prior to arriving on site.

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 and professionals working with the service. We used all of this information to plan our inspection.

During the inspection

We spoke with eight people who used the service and two relatives about their experience of the care provided. We spoke with seven members of staff including the registered manager, receptionist, nurses, care worker, domestic and maintenance staff members. We also observed interactions between people and staff in the home.

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

After the inspection

We reviewed written feedback received from relatives of people using the service. We looked at meeting minutes, training data and other quality assurance records.



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

- Staff kept people safe from the risk of abuse and ill-treatment.
- Staff received training in this area and were clear about their responsibilities to report any concerns. One staff member told us, "I am confident people are safe in our care."
- The registered manager responded to safeguarding concerns promptly and openly, using local safeguarding procedures. A relative told us, "We strongly feel that [Name] is in safest place possible."

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

- Risks to people's health and welfare were well-managed and staff had the information they needed to care for people safely.
- Staff regularly reviewed people's care and support needs. Changes were communicated consistently though staff hand-overs and updated in people's care plans.
- The home was well-maintained, and people had access to the equipment they needed to move safely around the home.
- There was a culture of openness and staff were comfortable reporting any safety concerns.
- The registered manager investigated when things went wrong, and lessons learned were shared with staff.

Staffing and recruitment

- The registered manager followed safe recruitment processes to ensure only appropriate people were employed at the home.
- We observed enough staff on duty and deployed throughout the home to meet people's needs.
- The registered manager used a dependency tool to calculate the number of staff needed to keep people safe.
- Staff had clear roles and were not rushed. They had time to engage with people in a meaningful way and people told us they had everything they needed.
- The registered manager screened agency staff to ensure they were suitably experienced to work in the home.

Using medicines safely

- Staff administered people's medicines on time and as prescribed and followed clear guidance for how people' preferred to take their medicines.
- Staff were clear about what process to follow should an error occur, and any incidents were thoroughly investigated to prevent reoccurrence.

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.



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.

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

- The registered manager promoted an open, inclusive and person-centred culture.
- They were visible in the home and available to people, relatives and staff. One staff member told us, "I've never felt more supported".
- We found staff to be kind and caring and passionate about providing high-quality care. One relative told us staff had supported their family member to pursue their passion for playing the piano which promoted their health and well-being.
- Staff encouraged and supported people to provide feedback and acted to improve people's experience of care. For example, staff had adopted suggestions made by the people to improve the dining experience.

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

- The service was well run with a clear management structure in place. Staff had clear lines of accountability and understood their roles and responsibilities.
- The registered manager acted promptly and transparently in response to complaints, accidents and incidents and took action to drive improvement. One relative told us, "We felt that [The registered manager] treated our concern with the gravity and respect that we expected."
- Learning from incidents was communicated effectively with staff and where necessary additional support and training was provided.
- The registered manager and provider carried out regular checks of the quality and safety of the service and identified areas for improvement.
- The registered manager was aware of their legal requirement to notify Care Quality Commission (CQC) about certain events and submitted notifications when required.

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

- The provider promoted an including and collaborative learning culture.
- In addition to mandatory training, staff were afforded further opportunities for continuous professional development.

- Staff attended regular meetings and contributed to learning from accidents and incidents.
- People were invited to attend residents' meetings and the registered manager communicated regularly with relatives.
- Managers and staff worked closely with health and social care professionals to ensure people were provided with the right care and support.
- Prior to the COVID-19 pandemic, staff were organising a fund-raising event with people from the local community.