

Brabyns House Limited

# Brabyns House

## 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

Brabyns House is a residential care home providing personal and nursing care to 33 people aged 65 and over at the time of the inspection. The service can support up to 39 people.

Brabyns House accommodates people over two floors in one large adapted building.

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

We identified some low-level concerns with medicines and environmental safety that were rectified during and after the inspection. The home was very clean, and personal protective equipment (PPE) was readily available and used. There was a safe system in place for visitors to the home. Staffing levels were appropriate for the needs of the people living at the home. Staff we spoke with were knowledgeable around how to identify people at risk and knew how to report any concerns. Safe recruitment checks were in place.

The registered manager had good links with other organisations and built relationships with key people such as the local authority and health protection teams. Statutory notifications were submitted as required. We received positive feedback from people, staff and families about the management team. Staff felt supported and involved in the service. The registered manager was visible around the home and kept oversight of operations through good channels of communication.

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

### Rating at last inspection

The last rating for this service was good (published 12 July 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.

We received concerns in relation to the management of medicines, staffing levels and infection control. 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 found no evidence during this inspection that people were at risk of harm from this concern. 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 Brabyns House 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 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?**

**Good** ●

The service was Well-led.

# Brabyns House

## 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

This inspection was carried out by two inspectors on days one and two. Day three was carried out by one inspector and one medicines inspector.

#### Service and service type

Brabyns House 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 on day one and day three.

#### 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 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 the

information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

#### During the inspection

We spoke with twelve people who used the service and four relatives about their experience of the care provided. We spoke with eleven members of staff including the registered manager, senior care workers and care workers.

We reviewed a range of records. This included three people's care records and eight people's medication records. We looked at three staff files in relation to safe 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 looked at training data and 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

- The registered manager was aware of local arrangements and their obligations to report concerns to the local authority and safeguarding teams.
- Staff had received up-to-date training about how to protect people from harm and abuse and this was refreshed every two years. Staff were able to recognise signs of abuse and were knowledgeable about how to report any concerns.
- People and their relatives told us they felt they were safe living at the home. One person told us, "I'm very happy here. I'm looked after and feel safe. They would get a doctor if I need one, the staff know what they are doing." One relative told us, "Safety is most important, and I feel [name] is very safe."

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

- Individual risks to people had been assessed and personalised risk management plans were in place and recorded on the electronic care system.
- Risk assessments had been reviewed to ensure staff were aware of people's current care needs. Staff had hand-held devices which contained people's care needs and flagged up to staff any individual risks to people to ensure staff had the information on how to safely provide care.
- Accidents and incidents were recorded and managed. People's risk assessments were reviewed after an incident, and information recorded in care plans of actions taken to minimise any further risks to people. The registered manager demonstrated their monthly audit check which showed analysis of incidents at the home.
- The registered manager worked closely with the local authority when incidents had occurred to reduce the risks of a repeat incident.

Staffing and recruitment

- Safe recruitment practices had been followed to ensure that suitable staff had been employed to care for people who may be vulnerable. Staff had undergone the required safety checks before starting work. These checks included police checks and references from previous employers.
- We reviewed staffing levels and found suitable numbers of staff were on duty to provide appropriate support. We saw staff were visible around the home. People told us the staff made them feel safe. One person told us, "I feel very safe here. I can't find any fault; the staff can't do enough for you. It's like one big holiday."
- Staff we spoke with felt there were enough staff to meet people's needs. They told us additional staff were put on duty to provide extra care when a person was unwell. One staff member told us staffing levels were

stretched during the height of the pandemic and everyone had to work hard to cover the shifts. They told us, "I'm very proud of my job and what we [staff] did to keep these people safe."

#### Using medicines safely

- Medicines were mostly managed and administered safely. However, we found a small number of improvements were needed. The registered manager acted to resolve the concerns, and these improvements were implemented quickly during and after the inspection.
- Thickener was not always stored in a safe way or recorded accurately when thickener powder was added to drinks for one person at risk of choking or aspiration. This was addressed immediately by the registered manager, and we saw evidence of storage and a safe recording system implemented after the inspection.
- Medicines that were required to be given at specific times of day were managed appropriately. However, we identified on the electronic system it was recorded that the recommended gaps between doses of medicines were not always followed. The registered manager told us this was due to the timing of the electronic system updating on the home's Wi-Fi system. Staff did not always follow the manufacturer's instructions for administering medicines. We saw medicines that should be given before food and not with other medicines were not always given correctly. We were told after the inspection that this had been rectified.
- The service did not audit their own management of medicines so could not be assured on how medicines were used safely. The manager provided evidence after the inspection that this had been put in place. The local NHS Commissioning group had carried out a medicines audit in June 2021 and did not identify any concerns.
- Checks on staff to ensure they were competent to handle medicines had not been completed recently due to the pandemic. However, this was rectified by the home during the inspection.
- Medicines were administered by senior staff who knew people well and met their medicines support needs. People we spoke with told us they get their medicines on time and when needed. One person told us, "They are really good with my medicines, they make sure I 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 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.
- We were somewhat assured that the provider was promoting safety through the layout and hygiene practices of the premises.



We signposted the registered manager to NHS IPC Guidance on the safe disposal of waste.

# 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.

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

- Systems were in place to monitor the safety and effectiveness of the service and the registered manager was knowledgeable about their regulatory requirements and wider legal responsibilities.
- The registered manager demonstrated an oversight of the overall service. Regular audits and safety checks were carried out to monitor the safety and effectiveness of the service. These included environmental and equipment checks. However, we found a small number of concerns with the safety of the environment. For example, we found one window without a safety restrictor and we noted a hot radiator without a safety cover. We fed back our concerns on the safety of the environment and we requested confirmation all actions from the last fire risk assessment were completed. The registered manager acted during and after the inspection to rectify the concerns identified.
- Accidents and incidents were monitored and analysed. Any lessons from incidents were shared with staff and appropriate action taken to minimise any future risk.

Working in partnership with others; 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 demonstrated compliance with relevant legislation and ensured they sent statutory notifications when required. A notification is a report required by law when certain events occur.
- The management team worked closely with the local authority and health care teams to share information when incidents occurred. Where safeguarding and other investigations took place, the management team were transparent and worked alongside the local authority. Feedback from the local authority was positive.
- During the Covid-19 pandemic the management team had worked very closely with the local authority, infection control teams and public health departments to ensure Government and local guidance on safety was adhered to.
- The registered manager had close working relationships with the local GP service, district nurse team and other medical professionals to ensure people received prompt and appropriate medical care.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- Staff provided person-centred care. People and their relatives had been involved in decisions about their

care on a day-to-day basis. People's differing needs and preferences had been considered.

- A communication book was used effectively to keep staff up to date and regular staff meetings were held to inform staff with information about the service and people's care needs were shared.
- Staff told us they felt very supported in their role and were very complimentary about the registered manager. They told us they would be able to raise anything and would be listened to. One staff member told us, "They are definitely approachable, supportive and fair. I can raise issues and make suggestions and feel listened to." People and their relatives also spoke very highly of the registered manager. One person told us, "[Name] makes me laugh and very approachable. She is smashing and knows what she is doing. I call her the font of all knowledge." One relative told us, "We have built a relationship and I am confident they would contact me. I am able to express opinions and we have been involved in care planning."
- The service had good systems in place to allow safe visiting of loved ones. Extra care had been taken to ensure people's safety, whilst considering the needs of individual people and their visitors. Arrangements had been made to facilitate indoor, outdoor and pod visits dependent upon people's preferences.
- The registered manager had established links with the local community and schools where people and children wrote letters and sent pictures. Some people enjoyed being involved in the running of the home, for example, some people helped with setting tables, taking around the tea trolley and preparing craft activities for others.
- The registered manager told us they were supported in their role by staff and the area manager and provider. They told us they were very proud of the service and their aspirations were to provide a five-star service for each person living at the home and make them feel they are the most important person in the world. They told us, "I want to make the last years of people's life special, comfortable and everything that I would want."