

Bhandal Care Group (BSB Care) Ltd

The Cottage Residential Home

Inspection report

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Is the service well-led?

Good 

Summary of findings

Overall summary

About the service

The Cottage Residential Home is a residential care home providing personal care for up to 40 people. The service provides support to older people some of whom may be living with dementia or have a physical disability. At the time of our inspection there were 33 people using the service. The home is also registered to provide personal care to people in their own homes, but no one was using the service at the time of the inspection.

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

Risks to people were assessed and care was planned to keep people safe. Information was updated and shared with staff as people's needs changed.

There were enough staff to provide safe care for people. Recruitment processes ensured staff were safe to work with the people living at the home.

Medicines were safely stored and administered and people received their medicines as prescribed and in a timely manner.

The home was clean and hygienic, and systems were in place to keep people safe from the risk of infection.

People were supported to keep in contact with their relatives and visits were taking place in line with government guidance.

Systems were in place to monitor the quality of the care provided and to drive improvements.

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 home had a targeted inspection on 29 September 2020 but was not rated at that inspection. The last rating for this service was requires improvement (26 February 2019).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

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 staffing levels and the management of the home. As a result, 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 stayed the same.

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 The Cottage Residential Home on our website at 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.

The Cottage Residential 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

The inspection was completed by one inspector.

Service and service type

The Cottage Residential Home 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. The Cottage Residential Home is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

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 and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We telephoned three relatives to gather their views of the care provided. We also spoke with the registered manager, deputy manager and two care workers.

We looked at six people's care plans and records relating to the administration of medicines. We also looked at records relating to the management of the service including personnel records to ensure staff had been recruited safely.

After the inspection

We reviewed the information sent to us by the registered manager about the auditing 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 requires Improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

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

At our last inspection the provider had failed to robustly assess the risks relating to the health safety and welfare of people. This was a breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Risks to people had been identified in their care plan. Care was planned to keep people safe. Records showed care such as repositioning to prevent pressure areas developing and monitoring of fluids had taken place. These systems ensured people received safe care.
- Staff were kept up to date with any changes in the support people needed. One member of staff told us, "We get time to read the care plans and risk assessments are updated when people's needs change and the equipment they need is recorded. When people's needs change we get a handover at the start of the shift."
- Incidents were recorded and action was taken to keep people safe from similar incidents. For example, a member of staff told us how they were aware of people who did not get on and so would ensure they were not seated together.

Systems and processes to safeguard people from the risk of abuse

- People felt safe living at the home. One relative told us, "I feel confident [Name] is safe and it was their decision to stay there. They had a months respite care then decided to stay at the home as they felt it was better and safer for them."
- People had been protected from avoidable harm. The provider had ensured that staff had the skills and knowledge to keep people safe. Staff had received training in how to keep people safe from abuse.
- Staff were aware of how to raise concerns with the registered manager and how to escalate them to the provider if needed. Staff also knew how to raise concerns with external agencies.

Staffing and recruitment

- There were enough staff available to meet people's needs. People benefited from a stable workforce who knew them and their needs well. Relatives commented on how kind and caring staff were.
- Staff were happy that there were enough staff available and they were supported in the case of last-minute absences. One member of staff told us, "Staffing levels are fine, there are no concerns today we have six staff on. If we are short staffed we have a whole list of staff to ring and someone will pick it up."
- The provider had completed appropriate checks, such as DBS checks and obtaining references for staff before they started working at the home. Disclosure and Barring Service (DBS) checks provide information

including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- Staff had received training in how to safely administer medicines and had their competency checked to ensure they followed the provider's policies. One member of staff told us, "My competency is checked every month or so. I will have someone watch over me and I can request further training in supervision if I feel I need it."
- Relatives were happy that people were supported to take their medicines safely. One relative told us, "I am happy that [Name] is being supported with their medicine. I trust staff's judgement and they have a weekly ward round when mum is assessed."
- Medicines were safely stored in accordance with the provider's policy and legal requirements. Where needed medicines were stored in a fridge which was monitored to ensure it worked correctly.
- Medicines were safely administered and staff knew people's needs well. If people refused their medicines staff would try at different times to gain their cooperation. When needed concerns were raised with the GP to ensure people's health was not affected by missed medicines.

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.

Visiting in care homes

- The provider and registered manager supported people to spend time with their families in the least restrictive way possible and used COVID-19 testing to keep people safe. One relative told us, "I phone [Name] every day and I have a visit booked on Saturday."

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency. We checked to make sure the service was meeting this requirement.

- The Government has announced its intention to change the legal requirement for vaccination in care homes, but the service was meeting the current requirement to ensure non-exempt staff and visiting professionals were vaccinated against COVID-19 at the time of inspection.

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 requires improvement. At this inspection the rating has changed to good. 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

At our last inspection the provider had failed to adequately monitor the safety and quality of the care provided. This was a breach of regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Audits had been completed to monitor the quality of the care provided to people. For example, medicines and infection prevention and control audits had been completed. These were effective in identifying concerns and driving improvements in the home.

At our inspection on 22 May 2019 the provider had failed tell us about events which happened in the service. This was a breach of regulation 18 of the Health and Social Care Act 2008 (Registration) Regulations 2009.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- The provider and registered manager had taken action to comply with the regulatory requirements. They had notified us about events which happened in the home and had their previous inspection report on display in the home.

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

- Relatives spoke about how open the staff team were with them regarding their relatives and told us they were contacted immediately if there were any issues. One relative told us, "[Name] has a frame and has a couple of falls with the home and has ended up in hospital. They were straight on the phone and letting me know. I feel that they are open and honest." Another relative said, "If I ever wanted any information all I would have to do is ring."

- Relatives felt that their loved ones were treated well and the care revolved around people's needs. One

relative said, "Staffing levels have always been good and they keep staff as well. {Name} is treated as part of the family." Another relative said, "It's the best decision we made for [Name] they do look after them and they are far happier and healthier than when they were in their own home. Would recommend the cottage to anyone."

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

- People and their relatives had been asked about their thoughts on the service and were confident that action would be taken if things were not right. One relative told us, "Staff are really lovely and are very up to speed with what is happening. They will let me know if there are any issues. The staff will tell me about [Name's] day."
- Staff were kept up to date with changes in the home through team meetings and individual supervision meetings. Staff told us that they were happy to raise any concerns that they had and were aware of the provider's whistleblowing policy which enabled them to raise concerns anonymously. One member of staff said, "If you have an issue you can go in the office and ask to speak to [Registered manager] privately. I feel supported and I enjoy coming to work."

Continuous learning and improving care; Working in partnership with others

- The registered manager had investigated accidents and incidents and had identified areas where improvements could be made. They ensured that this learning was shared with staff and used to improve the quality of care provided.
- The registered manager worked collaboratively with health and social care professionals to ensure that people received care which met their needs. They told us they had a good relationship with healthcare professionals who came in on a weekly basis to review people's needs.