

The Holmes Care Limited

Baytree Court

Inspection report

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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

About the service

Baytree Court is residential care home providing personal care to up to 34 people. The service provides support to older people and people with dementia. At the time of our inspection there were 27 people using the service.

Baytree court accommodates people in one adapted building across two floors, each of which has separate adapted facilities. One of the floors specialises in providing care to people living with dementia.

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

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.

The service had effective safeguarding, systems and policies in place and managed safeguarding concerns effectively and promptly. Lessons are learned and communicated to improve care.

Risk assessments were person centred and reviewed regularly. People were given choices and had as much control and independence as possible. Staff understood their responsibility to raise concerns and report incidents and near misses and felt supported to do so.

There was always enough competent staff on duty to care for people. Staffing levels were reviewed as people's needs changed. Recruitment systems were robust and ensured the right staff were recruited to support people safely.

Staff had the right qualifications, competence and skills to carry out their role. All staff completed a comprehensive induction.

Medicines were managed safely. Medicines were stored correctly and disposed of safely.

Assessments of people's needs were comprehensive, and outcomes were identified, care and support was regularly reviewed and updated. Appropriate referrals were made to make sure people's needs were met. One professional told us "The staff and registered manager are very responsive, and people's needs are always addressed."

People had access to sufficient food and drink. The dining environment was pleasant and there were enough members of staff to provide personal support. One relative said "[Persons name] enjoys her food, she is very picky, but I have never heard her say a bad word about the food."

People were treated with dignity, respect and kindness. Relationships with staff were positive and people

felt supported by staff that care about them. People have as much choice and control of their lives as possible.

People were encouraged to access activities that were meaningful to them. People and their families were supported in a meaningful way and were encouraged to attend meetings to give feedback about the service.

The service was consistently well led and had a positive culture that was person centred, open, inclusive and empowering. Staff understood their role and responsibilities, were motivated and had confidence in the registered manager. Staff told us the registered manager was very approachable and fair.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

This service was registered with us on 28 August 2020 and this is the first comprehensive inspection where we have rated all key questions.

The last rating for the service under the previous provider was good (published 17 September 2019.)

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 Baytree Court on our website at www.cqc.org.uk.

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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Baytree 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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one inspector and a medicines inspector. An Expert by Experience spoke to relatives and people who live at the service by telephone following the site visit. 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

Baytree Court 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. Baytree Court 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 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 a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we 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 spoke with seven people who used the service and eight relatives to ask about their experience of care provided. We spoke with the registered manager and deputy manager, six members of staff and one healthcare professional. We looked at three care files along with a range of medication records (MARs). We looked at records relating to the management of the service including recruitment, staff training, supervision and systems for monitoring quality.

Is the service safe?

Our findings

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

This is the first comprehensive inspection of this newly registered service. This key question has been rated 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 systems in place that helped reduce the risk of abuse.
- People told us the service was safe. Comments included "I feel safe and I am well looked after and cared for," and "People are kind and make sure we are always safe."
- Staff received safeguarding training and were clear about their responsibilities in responding to and reporting an safeguarding concerns.

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

- Risks to people safety and welfare were assessed appropriately.
- Risks associated with people's care had been identified and plans were in place to minimise risks occurring. Staff told us they had access to risk assessments, and they provided the right information to support people safely.
- Personal Emergency Evacuation Plans (PEEPS) were in place, they were informative and gave staff guidance in evacuating people from the service.
- The registered manager had processes in place to review all accidents and incidents, they were responded to appropriately and lessons were learnt to drive improvements in the service.

Staffing and recruitment

- There were enough staff to ensure people received safe care. We observed staff providing support and engaging with people in a meaningful and positive way. Comments from staff included "If someone's needs changed then staffing would be increased," and "We are a good team we work really well together."
- Staff were recruited safely; appropriate checks were carried out to protect people. This meant only suitable people were recruited by the provider.

Using medicines safely

- Peoples medicines were managed safely.
- People who were prescribed 'as and when' medication had a protocol in place and staff had written why it was required and how much was administered.
- Staff who supported people with their medicines were appropriately trained. Regular checks of practice were carried out to ensure they were following current 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.

Visiting in care homes

The provider supported people to have visits from family and friends and provided the appropriate PPE. Relatives told us they can visit whenever they want.

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.

This is the first comprehensive inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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 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 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The registered manager was knowledgeable about MCA and DoLS and had taken appropriate steps to ensure they were working within the principles of the MCA.
- People were supported to be involved in decisions about their care. Where people lacked capacity, decisions had been made in people's best interests and involved relevant professionals and carers.
- Staff had a good understanding of the principles of the MCA and asked for people's consent before they gave care and support.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care

- Systems were in place to assess people's needs and preferences so staff knew how to support them. Pre-admission assessments were completed along with a dependency assessment on admission.
- Care plans and risk assessments were regularly reviewed to ensure people were receiving care that met their needs. One relative said, "I feel involved in [Persons name] care, staff always contact me if there has been any changes to her care plan."
- People were referred to other agencies when required. Comments from people included "I was very ill once and staff contacted the GP and I was referred to the specialist," and "A slight hint of anything wrong and they are straight onto the doctors."

Staff support: induction, training, skills and experience

- People received care from staff who had the right mix of skills, knowledge, and support to deliver it safely

and effectively. Staff received all the training they required to meet the needs of people they supported.

- The provider had an induction programme in place which consisted of an orientation checklist, training, competency assessments and shadowing experienced staff.
- Staff told us they received supervision and appraisals with their supervisor and felt supported by the registered manager and the team.

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support

- People were supported to access food and drink that met their dietary needs and wishes and were offered a choice for each meal.
- People told us the food was nice and there was plenty of choice. We observed staff providing people with regular snacks and drinks throughout the day.
- Catering staff were knowledgeable about people's dietary requirements and engaged with people to ensure their choices were incorporated into menu planning.
- People's health care needs were met. Records show the service communicated with other healthcare professionals such as GP's, physiotherapists, occupational therapists, dieticians and speech and language therapists (SALT) to provide continuity of care.

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

- The environment was homely and suitably adapted to meet people's needs.
- People were supported to personalise their own bedrooms and had items with them that were important to them.

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.

This is the first comprehensive inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People received care from staff who knew them well, they were kind and caring and treated people as individuals. People and their relatives said "Staff are good and kind and we could not hope for more" and "[Persons name] always looks well cared for and the staff are friendly and very helpful."
- Staff knew people and their needs well. We observed kind and positive interactions between staff and people. One staff member said "We look after people the way we would want to be looked after."

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

- People and their relatives told us they were involved in making decisions about their care and were able to express their views and opinions. One relative said "They [staff] would always act in [Persons name] best interests, they always give her a choice."
- We observed staff interacting with people and found they involved people and respected people's decisions.

Respecting and promoting people's privacy, dignity and independence

- Staff were respectful of people's privacy and ensured bathroom, toilet and bedroom doors were closed to preserve people's dignity. One relative said, "They treat [Persons name] with dignity and respect, she only likes female carers and they [staff] respect that."
- People were encouraged to do as much as possible for themselves. People said "They [Staff] never force us to do anything and if we can do it on our own, they let us."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first comprehensive inspection for this newly registered service. This key question has been rated 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

- People were happy with the support they received. Staff knew people well and were keen to ensure care was delivered in a person-centred way. Staff told us they deliver care how the person wants it and meet the needs of that individual."
- People were encouraged to make their own decisions and choices. People chose when and how they wanted to spend their time.
- People and their relatives were involved in developing care plans. One relative said "We are involved in the care planning and can have access to it if we want."

Meeting people's communication needs; Improving care quality in response to complaints or concerns
Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The registered manager understood their responsibility to comply with the Accessible Information Standards [AIS].
- Staff provided information in a way people could understand and in their preferred way.
- The provider had a system in place to ensure complaints were dealt with in a timely and effective way.
- People and their relatives felt comfortable about raising concerns and felt appropriate actions would be taken if they were unhappy about something. People and relatives gave positive comments about the service.

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

- A programme of activities was in place to meet people's interests. Events were arranged such as church service, drum therapy, play your cards right and flower arranging. People told us that staff will paint their nails for them if they ask.
- People and their relatives were supported to maintain their relationships. Relatives regularly visited the service and people were encouraged to maintain regular communication.

End of life care and support

- The provider had appropriate processes in place to make sure people could be supported in a pain free, dignified and sensitive way at the end of their life.

- Staff received training about providing people with end of life care.
- People's care plans were designed to include their end of life wishes and preferences.

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.

This is the first comprehensive inspection for this newly registered service. This key question has been rated 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; 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 service had an open, honest culture. Staff told us they felt part of a team that was committed to providing good quality care. Comments included "We have got a good team here," and "We all pull together and support each other."
- People and their relatives were complimentary about the home. Comments included "It's a home not a work place," "They [staff] are absolutely brilliant, you just warm to the place" and "It has a nice feel about it, it's not like other care homes."
- The provider and registered manager understood their responsibilities to be open and transparent with people and their families when something went wrong.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider had several effective quality monitoring systems in place. Action plans were produced from audits and they were used to continually review and improve the service.
- The registered manager and staff had a clear understanding of their roles and how this contributed to the good level of care people received. Staff told us they felt confident speaking to their managers.
- The registered manager understood their role in terms of regulatory requirements and ensured CQC were notified of significant incidents that had occurred.

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

- The home held regular meetings with people and their families to gain feedback to improve the service. One relative said, "We get kept up to date with everything, you are free to speak and it seems to be effective."
- Staff meetings were held, which gave staff the opportunity to raise issues and make suggestions. Staff told us they could make suggestions and they felt listened to.

Continuous learning and improving care: Working in partnership with others

- The provider had a quality assurance system in place regarding reporting, investigating and learning from incidents when things went wrong, any actions were fed into the service and provider governance meetings.
- The service regularly worked in partnership with other health and social care professionals to ensure people received ongoing support to meet their needs.

