

Byron Lodge (West Melton) Limited

Byron Lodge Care Home

Inspection report

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27 November 2020

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Byron Lodge is a care providing personal and nursing care, including people living with dementia. There were 48 people using the service at the time of the inspection. The service can support up to 61 people.

People's experience and what we found

The home was predominantly clean and there were PPE stations situated at several points throughout the home. However, we identified some areas were not well maintained therefore, were not able to be effectively cleaned. The provider, since our inspection had addressed these areas.

We spoke with people who used the service and their relatives, and they were complimentary about the care and support they or their relatives received. However, many told us the communication could be improved and at times they did not feel listened to. The registered manager informed us how they would address this to improve communication.

People were safeguarded from the risks of abuse. The registered manager had improved systems to ensure staff reported any concerns immediately. Staff received training in this area and knew how to recognise and report abuse. Staff were confident that appropriate action would be taken to keep people safe.

Risks associated with people's care were identified and risk assessments were in place to minimise the risk. Staff were knowledgeable about risks associated with people's care. However, some risk when reviewed had missed information. The registered manager rectified this immediately.

Accidents and incidents were monitored, and trends and patterns identified. Lessons were learned when things went wrong.

People received their medicines as prescribed. Competency checks were carried out and staff were knowledgeable about medicine management. The provider had a robust recruitment procedure which ensured new starters were recruited safely.

We observed there were sufficient staff available to meet people's needs and to socially engage with them whilst adhering to the current restrictions due to the COVID-19 pandemic. Staff we spoke with felt there were enough staff available and were able to meet people's needs.

A range of audits took place to ensure the service was monitored and quality maintained. However, although the registered manager had identified shortfalls these were not always addressed in a timely way. Since our inspection this has been addressed.

The registered manager and the management team supported staff to deliver person centred care to people. The provider was improving engagement with people who used the service and their relatives.

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 11 January 2019)

Why we inspected

We undertook this focused inspection to check the service had addressed the safeguarding and whistleblowing concerns that had been received by CQC and the Local Authority. The concerns were in relation to risks not being managed. This report only covers our findings in relation to the Key Questions Safe and Well-led.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has not changed based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Byron Lodge' 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 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.

Details are in our safe findings below.

Is the service well-led?

Requires Improvement ●

The service was well-led, however, systems required embedding into practice.

Details are in our well-led findings below.

Byron Lodge 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 Care Act 2014.

Inspection team

The inspection was carried out by two inspectors and an assistant inspector.

Service and service type

Byron Lodge 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 unannounced

Inspection activity commenced on 23 November 2020 and ended on 27 November 2020. We visited the service on 23 November 2020 and then spent time analysing information sent to us by the registered manager, telephoned staff and relatives to gain their feedback and also contacted health care professionals.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the

judgements in this report.

During the inspection

We spoke with three people who used the service and seven relatives about their experience of the care provided. We spoke with eight members of staff including the registered manager, nurses, senior care workers, care workers and ancillary staff. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included people's care records, medication records, staff files in relation to recruitment and staff supervision and quality monitoring records.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at a variety of records relating to the management of the service and spoke with three health care professionals who regularly visit the service.

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 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 provider had effective systems in place to safeguard people from the risk of abuse.
- Staff had received training in safeguarding and those we spoke with demonstrated an understanding of what required reporting.
- Records of safeguarding concerns were complete and appropriate actions had been followed up where required. The registered manager had improved systems to ensure any issues were identified promptly and reported.

Assessing risk, safety monitoring and management

- Risks associated with people's care and treatment had been identified and risk assessments were in place to minimise risks occurring.
- Staff we spoke with were fully aware of the risks to people and took appropriate actions. Staff followed people's care plans to ensure people were kept safe. However, some risk when reviewed had missed information. The registered manager rectified this immediately.
- Relatives we spoke with were very happy with the care and support provided. One relative explained how their relative required a special diet as they were at risk of choking, they said, "Staff look after [relative] very well." Another relative explained how the staff picked up when people were unwell and contacted the GP and sought advice. They told us they were confident their relative was well looked after.

Staffing and recruitment

- People were supported by sufficient numbers of suitably qualified and competent staff who were effectively deployed.
- We found there were enough staff available to respond to people's needs and to socially engage with them.
- Staff we spoke with felt there were enough staff available and were able to meet people's needs.

Using medicines safely

- Effective systems were in place to ensure people received their prescribed medicines in a safe way.
- Protocols were in place to support people who were prescribed medicines on an 'as required' basis. These were informative and provided a clear guide in how to support people.
- Staff received training in the safe handling of medicines and had a competency check completed on an annual basis, or before if required.

Preventing and controlling infection

- We saw the home was predominantly clean. PPE stations and hand sanitisers were strategically placed throughout the home. This ensured staff and any visitors adhered to the current guideline during the COVID-19 pandemic.
- Some areas of the home were not well maintained which meant it was not possible to effectively clean these areas. For example, store rooms, kitchenettes and sluices. The registered manager had identified these as part of the quality monitoring, but there had been no clear timescale for actions. Since our site visit these areas have been addressed.

Learning lessons when things go wrong

- The management team ensured lessons were learned when things went wrong.
- Accidents and incidents were analysed, and trends and patterns were identified to ensure future incidents were minimised.

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 is requires improvement.

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

- Relatives did not feel listened to and told us communication could improve. They spoke highly of the registered manager and regional manager. However, when they contacted the service they struggled to get to speak to the appropriate person. One relative said, "When they say they will ring back they don't, they don't return calls."
- The recent relative's quality monitoring questionnaire sent out by the provider, identified a lack of effective communication with relatives. The registered manager has devised an action plan to address this. They were looking at different ways to engage with relatives and ensure regular contact with their loved ones maintaining safety during the pandemic. They also intended to complete a newsletter to send to people who used the service and relatives to keep them informed and up to date of what was happening in the home.

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

- The registered manager and provider have a clear vision to deliver high quality care. This was evident from feedback received. However, there was no management structure, the service was struggling to recruit a suitable deputy or clinical lead. This had impacted on the service delivery. The registered manager was working with the provider to develop a management structure and empower staff.
- Staff we spoke with felt able to raise issues with the registered manager and the regional manager and felt listened to. Staff told us recently things had much improved. One member of staff told us, "The manager is very approachable, if she isn't in we can talk to the regional manager, they are always available."
- Staff we spoke with fully understood their roles and responsibilities and were keen to ensure a good quality service was provided.

Continuous learning and improving care

- Quality monitoring was carried out and the audits identified areas for improvement. However, there were not always clear timescales for works to be completed. For example, it had been identified that carpets required replacing and store rooms required work, but there were no specific dates for this to be completed. Since our inspection the provider has initiated works and these should be completed within four weeks.
- We viewed a selection of care plans and supporting documentation and found people's needs and preferences were included. However, we identified care plans had not always been appropriately updated by staff. This was addressed immediately by the registered manager. The new systems required embedding into practice to ensure consistency.

- The service was continuously learning to improve. The registered manager had made many changes that were positive and feedback from staff was that the service was in a much better place, more open and transparent they felt listened to and supported.
- The registered manager was extremely passionate about ensuring people achieved good outcomes. They promoted a positive culture within the home where people felt included.

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 management team understood their responsibility in relation to the duty of candour and were open and honest when needed.

Working in partnership with others

- The provider worked in partnership with other professionals and took on board their recommendations and advice.
- We spoke with three health care professional, they all spoke highly of the registered manager and regional manager. One professional told us, "The manager can't do enough for you, is passionate about ensuring people receive the best possible care."