

Bupa Care Homes (GL) Limited

# Hazelmere House Care Home

## Inspection report

Pinewood Road  
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Wilmslow  
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Tel: 01625536400

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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

Hazelmere House a nursing and residential care home providing personal and nursing care to 40 people at the time of the inspection. The service can support up to 56 people in purpose-built accommodation over two floors.

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

Care and nursing plans were comprehensive, detailed and up to date that detailed people's current care needs and included how to safely manage any identified risks. Medicines were managed safely by trained staff and people received their medicines as prescribed. The home was very clean and used stringent infection control measures to reduce the risk of COVID-19. Staff were aware of individual risks to people and were knowledgeable about how to safeguard people from abuse. Staff had undergone comprehensive induction, training and safe recruitment checks before providing care.

The home had a manager and clinical lead who were both dynamic, knowledgeable and aspired to provide the best care possible. Feedback from staff, people and relatives about the quality of the service was sought out and valued by the manager and used to drive improvements. Staff told us they felt very supported by an approachable management team and were kept up to date through regular meetings and supervisions. Staff felt they could raise any concerns or ideas for improvement and their comments would be listened to and acted upon. Effective quality assurance and clinical governance systems were in place to ensure oversight of the operations of the home. The manager carried out a comprehensive set of audits and checks to ensure the safety and quality of the service.

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 29 May 2019).

### 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 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.

The overall rating for the service has remained good. This is based on the findings 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 Hazelmere 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.

# Hazelmere House 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.

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 one inspector and one nurse specialist advisor.

#### Service and service type

Hazelmere 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 who was in the process of registering 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.

#### What we did before the inspection

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 of this information to plan our inspection.

#### During the inspection

We spoke with four people who used the service about their experience of the care provided. We spoke with eight members of staff including the manager, the clinical lead, maintenance and care workers.

We reviewed a range of records. This included three people's care records and a sample of medication records. We looked at two staff files 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 continued to review evidence that was sent remotely as well as seeking clarification from the provider to validate evidence found. We looked at audit and governance data, as well as infection prevention and control policies and procedures.

# 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: Learning lessons when things go wrong

- The service had taken steps to ensure the safety of people. Staff were trained and demonstrated a good understanding of potential abuse and neglect and were confident to report any concerns. Staff were confident any reports of concerns would be acted upon. They were aware of whistle-blowing procedures.
- A safeguarding policy was in place. The manager was knowledgeable about local authority safeguarding procedures and fully co-operated when required to ensure the safety of people.
- Any concerns or lessons learned were regularly shared with staff and staff were involved in any reviews or actions taken to safeguard people.
- Safety incidents were recorded, logged and analysed. Any concerns were investigated and actions to mitigate any future risks were taken where necessary
- Staff told us they thought people were safe at the home as they had access to information, good training in place and very good support from management. People we spoke with told us they felt safe being cared for at the home.

Assessing risk, safety monitoring and management

- The service managed risks to people effectively and appropriately. Care records and associated risk assessments were comprehensive and up to date to ensure staff managed individual risks and provide safe care.
- People's risk assessments and care plans were reviewed regularly. Staff were aware of individual risks to people and informed on how to manage those risks. Staff they told us they were kept up to date with people's current care needs. People were involved in decisions about their care through the 'resident of the day scheme' where risks and care needs were discussed.
- Environmental, fire and health and safety checks were in place and regularly carried out.

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 the necessary safety checks in place and underwent a thorough induction and competency checks before starting work.
- We found staff were visible around the home. The manager told us they used a tool to calculate how many staff were needed to provide a safe level of care. Staff we spoke with told us they could provide safe care with the number of staff on duty. They told us they felt action would be taken if they reported any concerns about staffing levels. One staff member told us, "We will express our concerns if we feel there's not enough staff and we would be listened to."

### Using medicines safely

- Medicines were administered and managed safely. A medicines policy was in place and staff had undergone training along with regular competency checks.
- Medicines, body maps and medicine administration records (MARs) were detailed, audited regularly, and any identified errors were managed appropriately.
- Clinical rooms were clean and secure, and medicines were stored and disposed of safely.

### 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.



# 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.

Continuous learning and improving care; 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 home manager promoted a clear culture of excellence and high quality, person-centred care throughout the home and staff teams. They kept a high level of operational oversight of the service through comprehensive monitoring systems and robust quality assurance. Where any shortfalls had been identified, they were used to drive improvements in the quality of care at the home.
- The provider had ensured safe and effective day to day governance of the service. Staff were kept up to date with current Government guidance and people's care needs through a series of meetings, such as daily 'huddles', shift handover and clinical risk meetings.
- Accidents and incidents were monitored and analysed closely. Any lessons from incidents were shared with staff and appropriate action taken to minimise any future risk.

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

- There was a clear management and accountability structure in place that included a nurse clinical lead to provide managerial oversight of the nursing operations of the home.
- The nurse clinical lead had introduced regular nursing and medicines competency checks to ensure the safety and effectiveness of nursing care
- The manager understood their regulatory requirements and wider legal obligations. Statutory notifications were submitted as required.
- The management team had implemented a new suite of periodic, comprehensive audits to monitor the safety and effectiveness of the home and care provided. Any issues identified during audits were addressed and managed through action plans.

Working in partnership with others

- The management team worked with other organisations and stakeholders, such as the local authority and Public Health England to ensure the safety of people at the home.
- During the Covid-19 pandemic the management team had worked very closely with health care organisations and public health departments to ensure Government and local guidance on safety was adhered to.
- The management team were involved in working on a number of pilot projects with local health services to improve health services for people living at the home.

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

- The manager actively sought feedback from people, relatives or staff and used this to improve the service and ensure a person-centred service. They held a series of meetings with staff, people and their relatives to ensure their involvement in the way the home was run.
- The home had good, personalised systems in place to allow safe visiting of relatives. 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 hand holding visits dependent upon people's preferences.
- Staff told us the manager was very approachable, always had an open door and they felt supported in their role. The manager told us how much they appreciated the hard work of the staff.
- The manager told us their aspirations for the service were to ensure people had the best experience living at the home; for people to be comfortable and to be safe.