

Marbrook Limited

The Marbrook Centre

Inspection report

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17 December 2020

23 December 2020

24 December 2020

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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

The Marbrook Centre is a care home with nursing. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection. The Marbrook Centre delivers a service to up to 81 people.

The home is built on three floors: each floor can be divided into two separate units or used as one unit. Each unit has single bedrooms with ensuite facilities and shared lounge/dining/kitchenette areas. Each floor provides a service to people with specific issues. Mayfield (top floor) accommodates people living with dementia; Bray (middle floor) accommodates people with long-term rehabilitation and complex nursing needs; and Eden (ground floor) accommodates people with acquired brain injury, including stroke, who are funded for a short period of intensive rehabilitation.

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

People were safeguarded from harm by staff who were trained and knowledgeable about identifying and reporting any potential abuse. One relative told us how much difference it had made to their family member having enough skilled staff. Medicines were administered and managed safely.

Risks to people were identified and managed well. There were enough staff, who had been safely recruited and met people's needs. Lessons were learned when things went wrong.

Medicines were managed safely, and the service had improved the processes for monitoring the administration of medicines. Care records were accurate and reflected the needs of people. Risk assessments were in place to help keep people safe.

Staff followed infection prevention and control policies. Due to the pandemic, additional processes and steps were taken by staff to keep people safe. Relatives told us that the service had actively engaged with them and they were assured that people were well looked after.

There were quality and assurance systems in place. The registered manager worked with the provider to monitor the safety and quality of care provided to people. Staff worked with other healthcare professionals to make sure people had the correct support they needed.

Staffing levels were appropriate to support people. There continued to be a robust recruitment process in place.

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 provider had ensured we were notified about events such as safeguarding. Audits in place were effective in identifying and driving improvements. People were involved in how the service was run. The provider worked well with others involved in people's care and support.

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 23 June 2018).

Why we inspected

We undertook a focused inspection to review the key questions of safe and well-led. This was because we received concerns in relation to the safety of people living in the service. Several safeguarding concerns had been raised with the local authority in relation to poor care. A decision was made for us to inspect and examine those risks. This report only covers our findings in relation to the key questions safe and well-led which contain those requirements.

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 these concerns. The provider had acted on safeguarding allegations and other concerns to help prevent the potential harm and risk of occurrences.

Please see the safe and well-led sections of this full report. The overall rating for the service has not changed from good overall but the safe domain has improved to good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Marbrook Centre 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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our safe findings below.

Good ●

The Marbrook Centre

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide 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 three inspectors. One inspector did not attend the site visit but undertook telephone calls to relatives and staff.

Service and service type

The Marbrook Centre is a care home. People in care homes receive accommodation and personal care as a single package under one contractual agreement. The Care Quality Commission (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. The previous registered manager left in March 2020. This means the registered manager 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 announced prior to us entering the home, so we could ensure that measures were in place to support an inspection and manage any infection control risks. The provider was not aware of our inspection prior to our visit on 17 December 2020.

What we did before the inspection

Prior to our inspection we reviewed and analysed the information we held about this service. This included

reviewing statutory notifications the service had sent us. A notification is information about important events which the provider is required to send us by law. We also viewed the information sent to us by stakeholders. Feedback was requested from the local authority quality assurance and safeguarding teams.

We did not request a PIR for this inspection. A Provider Information Return (PIR) is key information providers are requested to send us on their service, what they do well and improvements they plan to make. This information helps support our inspections.

During the inspection

We spoke with six people who used the service, the registered manager, a service manager and spoke with five staff. We reviewed the medicines administration records (MARs).

After our inspection

We asked the provider for further documents and these were received within the requested timescale. We looked at three people's care plans and associated risk assessments. We also reviewed, infection prevention and control policies and other records associated with the management of the service. We spoke with eight relatives and we sought information from three professionals. In addition, we spoke with ten staff including, nursing staff, senior care staff, care staff and members of the IT and housekeeping teams.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At the last inspection we identified improvements were required to ensure medicines were administered safely. At this inspection we found there had been improvements in relation to medicines management.

- Medicines were managed safely. People's records were accurate and regularly reviewed.
- Staff followed national best practice guidance with regards to medicines management. A member of staff told us, "I have received regular competency assessments to ensure I am still following good practice guidelines especially since we moved to the electronic system. It is so much better and less errors are made with it."
- Quality and assurance systems in place allowed the registered manager to effectively monitor medicines safely.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Safeguarding policies were in place which were accessible to staff, people and relatives.
- Staff were knowledgeable about what action they would take if abuse were suspected. One staff member told us, "There is lots of support from the team and information on safeguarding is available. I would always speak with the (registered) manager if I had got any concerns and if I'm still not happy with the action taken I'd go through whistleblowing."

Assessing risk, safety monitoring and management

- Risks were clearly identified, assessed, mitigated and monitored. Care records showed risk assessments were regularly reviewed and included steps staff should follow to keep people safe.
- Environment risk assessments were in place to keep people, relatives, staff and visitors safe. The premises were safe and there was regular testing of equipment and utilities.

Staffing and recruitment

- There were enough staff available to meet people's needs. Care was provided by a consistent staff team. One person told us, "It's like a silver service, the staff are kind and thoughtful." One member of staff said, "It has been difficult at times with staffing due to Covid-19, but as a team we pull together. We can't always respond to residents as quickly as we would like, but they are usually understanding."
- Staff continued to be recruited safely, and appropriate checks were carried out to ensure staff were suitable for their role.

Preventing and controlling infection

- The service was clean and odour free. During the inspection staff were observed cleaning and sanitising surfaces on a regular basis.
- Staff wore appropriate personal protective equipment (PPE) and had received infection prevention and control training and Covid-19 specific training.
- The provider had an infection control policy in place and had assessed the risks related to Covid-19 and put measures in place to reduce these risks.
- Visitors to the service had their temperature checked and asked to confirm they had not been unwell. PPE was provided.
- The provider had created areas within the service with a screen to enable people to see their relatives safely.

Learning lessons when things go wrong

- All accidents and incidents were reviewed to identify any trends and learning points.
- Lessons learned were shared with staff as part of their development.

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.

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

- There was a positive staff culture within the service and the registered manager worked with staff to drive forward improvement. One relative said, "Staff are absolutely brilliant." A member of staff told us, "[Name of registered manager] is very open and approachable, keeps us updated on changes."
- Quality and assurance systems in place, had been reviewed and embedded throughout the service and were used to continuously improve the service and quality of care provided to people.
- The registered manager was fully aware of their legal responsibilities and was open and transparent. They submitted notifications to us for significant events that had occurred at the service, for example accidents and incidents. Staff said the registered manager was approachable and supportive. One staff member said, "The manager has been very supportive, she's very approachable." A relative told us, "The (registered) manager is excellent at keeping us (family) well informed about what is happening."

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; Continuous learning and improving care

- The registered manager understood the duty of candour and had passed their learning to staff. Staff told us it was important to apologise when things had gone wrong but to also use incidents to learn, reflect and improve.
- Staff felt able to approach the registered manager when things went wrong. Staff said, "If I made a mistake, I would go straight to the manager, and then we would fill in an incident form and the manager would investigate from there."
- The registered manager was committed to continuously improving the service. Since the last inspection improvements to risk assessing and medications had been made.
- All members of the staff team were open and responsive to our inspection feedback.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The service worked in partnership with health and social care professionals who were involved in people's care.
- People and their relatives had their views taken into account through care reviews. When there were significant changes in a person's health the registered manager reviewed their plan of care with those important to them.
- People, relatives and staff were asked for their views of the service. Staff told us they were listened to by

management and their ideas were used to improve the overall service.