

Signature of Hertford (Operations) Limited

Bentley House

Inspection report

Bentley House
Pegs Lane
Hertford
Hertfordshire
SG13 8EG

Tel: 01992515600

Date of inspection visit:
19 September 2017

Date of publication:
12 October 2017

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

Bentley House is registered to provide accommodation, nursing and personal care to a maximum of 90 people. At the time of the inspection 67 people were using the service.

Previously when we carried out a comprehensive inspection at Bentley House we found that some areas in Safe and Well-led required improvements. We followed up these areas in a focused inspection on 14 December 2016 and found that the service was Good. At this inspection we found that they remained Good. This inspection was carried out on the 19 September 2017 by one inspector.

The home had a manager in post who was in the process of registering with the Care Quality Commission (CQC). A registered manager is a person who has registered with the CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People told us they were safe and staff met their needs in a safe way. Staff were aware of safeguarding processes and how to report any concerns to the manager or local safeguarding authorities. Staff were enthusiastic and knowledgeable about people's needs, likes, dislikes and preferences.

People were supported by sufficient numbers of staff who responded to people when they required assistance. Staff were knowledgeable about risk management and how to mitigate risks to keep people safe.

People's choices, likes, dislikes and preferences were well known to staff who delivered care and support in a personalised way.

The provider had a robust recruitment process in place which ensured that qualified and experienced staff were employed at the home. Staff received training and support and were aware of their responsibilities when providing care and support to people at the service.

People and their relatives where appropriate were involved in the development and the review of their care and support plans. Support plans were kept electronically and automatically updated when staff recorded on their handheld devices the support people received. People were supported to take decisions about their care and to be independent.

People were supported to have sufficient food and drinks. People had access to healthcare professionals such as their GP as and when required. People received appropriate support from staff to take their medicines safely.

The manager and the provider carried out a regular programme of audits to assess the quality of the service,

and we saw that these were capable of identifying shortfalls which needed to be addressed. Where shortfalls were identified, records demonstrated that these were acted upon promptly.

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 remained Good.

Is the service effective?

Good ●

The service remained Good.

Is the service caring?

Good ●

The service remained Good.

Is the service responsive?

Good ●

The service remained Good.

Is the service well-led?

Good ●

The service remained Good.

Bentley House

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on the 19 September 2017 and was carried out by one inspector.

Before the inspection we reviewed information we held about the service including statutory notifications. Statutory notifications include information about important events which the provider is required to send us.

We carried out observations in communal lounges and dining rooms and used the Short Observational Framework for Inspection (SOFI). SOFI is a specific way of observing care to help us understand the experience of people who could not talk with us due to their complex health needs.

During the inspection we spoke with five people who lived at the home, one relative, seven staff members including nursing staff, unit managers and the manager. We also talked to a visiting health care professional. We looked at records relating to five people together with other records relating to the management of the home.

Is the service safe?

Our findings

People told us that they felt safe living at Bentley House. A person who used the service told us, "Of course I feel safe. I am very happy and very impressed how staff looks after people here." Another person said, "I think everyone is safe here. We have our bell to ring if we need help."

Staff we spoke with were able to describe to us how to identify possible abuse, and were clear in how they would report this. Staff told us that they received safeguarding adults from abuse training and were also aware of external organisations they could report their concerns to.

Risks associated with people`s daily living were recognised and responded to when they occurred and staff demonstrated to us their knowledge on how to effectively manage these risks. For example, staff were aware of people who were at risk of skin breakdown or high risk of falls. They were able to tell us how they mitigated these risks effectively.

People told us there were enough staff at all times to meet their needs. One person said, "Since I came here I am observing everything and I can say there are enough staff. I can tell because staff will stop and talk to people often and they are not in a rush." Another person said, "I can get help when I need help so I think there are enough of them [staff]."

We found that safe and effective recruitment practices were followed to help ensure that all staff were of good character, physically and mentally fit for the roles they performed. All staff had been through recruitment procedures which involved obtaining satisfactory references and background checks with the Disclosure and Barring Service (DBS) before they were employed by the service.

People received their medicines safely by trained staff who had their competencies checked regularly. We found that medicine administration records (MAR) were completed accurately and signed by staff each time after they administered people`s medicines. We counted a selection of medicines for people and found that the amount corresponded with the records kept.

Is the service effective?

Our findings

People told us staff were very good in supporting them if and when they needed help and support. One person said, "I am amazed how knowledgeable they [staff] are." Another person said, "I think they [staff] all know what they are doing. They can assist everybody and they know who needs what."

Newly employed staff told us they had induction training before they started working with people. They had shadowed more experienced staff until they felt confident and familiar with the job requirements and only provided care to people once assessed as competent to do so. Staff told us their training included, manual handling, safeguarding, dementia training, infection control, medication and health and safety.

Staff told us they had regular supervisions where they discussed training needs, development needs and they received feedback about their performance. One staff member said, "I am very happy here. Since I came I developed a lot."

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). Appropriate DoLS applications had been submitted and were pending authorisation at the time of this inspection. People were asked for their consent before care was given and were involved in decisions about their care.

People told us that they liked the food and had plenty of choices. One person said, "The food is lovely. I can tell they have a good chef. I know a lot about good cooking so if I tell you [inspector] the food is good it means it is good." Another person said, "No problem with the food here. It is lovely and plenty of choice." We found that staff regularly monitored people`s weight and where they identified a weight loss people were seen by the GP or dietician.

We saw evidence in people`s care plans of regular GP visits, dieticians, mental health teams and speech and language therapists involvement in people`s care. People had regular visits from a chiropodist, dentist and optician to ensure their health needs were met.

Is the service caring?

Our findings

People told us that staff were kind, caring and had a respectful approach towards them. One person said, "I cannot say a bad word about staff. They are all kind and caring." Another person said, "I am very impressed how nice and caring staff are, not just with me but I can see them talking and interacting with people who are less able and they are so kind." One person's relative told us, "The staff are kind and friendly, and there is a relaxed and happy atmosphere."

People told us that staff respected their privacy and dignity. One person said, "They are very mindful of my privacy and dignity. I can lock my room, but they always knock and I am not disturbed if I don't want to be." Another person said, "I can have my private time and I can do what I like. I do feel there is dignity and respect here." A relative told us, "They also respect [person`s] privacy, which is very important to [person]."

People told us they felt involved in discussing their care needs and that they were active in making important decisions. One person said, "I can decide what I want and when I want it. I really feel involved." Staff we spoke with about people's needs had a good understanding of what was important to people and how to provide personalised care to them. We saw staff interacting and respond to people in a positive manner and spent time with them. There was a happy and relaxed atmosphere in the home where people were seen smiling and socialising together.

Staff promoted people`s independence and adapted the level of support to people's needs. For example, we observed a person who went out for a walk outside the home. They told us they liked to have a walk by themselves, however staff were vigilant and watched them from a distance in case they needed help.

Confidentiality was well maintained by staff and information held about people's health, support needs and medical histories were held securely. Staff understood the importance of confidentiality and respected people's privacy.

Is the service responsive?

Our findings

People told us they were happy with the service they received. One person told us, "I am very happy here. I have everything I need and I can do everything I want. Staff are very good and listens to me." Another person said, "I enjoy the interaction with staff. They are very good. I have no complaints."

Care plans were specific to people as individuals and provided staff with information on how to manage people's individual needs. Care plans were reviewed on a regular basis and updated as and when people's needs changed so that they remained reflective of people's current needs.

People told us they had plenty to do in the home and they were not bored. One person said, "I am never bored. There is always something going on and we can all join in." We found that there was a dedicated activities person in the home who was responsible for planning activities, however care staff joined in and helped people do what they liked. We found that activities were tailored to people's needs and likes and included as much group activities and individual activities as well. For example people were supported to go out and about in the local town, shopping or just for a walk. Staff had also organised a group trip to the seaside where 24 people and 24 staff enjoyed a day out.

People were also helped to continue their hobbies and interest and maintain their skills. For example, a person who used to be a health care professional was involved in training staff in first aid. Another person enjoyed doing presentations on various subjects and they were given an opportunity to share their presentation with other people and staff at the home.

People we spoke with told us they felt comfortable to approach the manager to raise a concern. One person said, "I have no concerns, but would certainly raise them if I had any." A second person said, "If I had any concerns I'd raise them. There are also residents' forums here, I've never been to them, but I know they happen."

People told us they felt able to feedback their views on the service and were encouraged to do so. One person said, "I can raise any issues with staff and manager. We also have meetings here." People we spoke with told us that they had not had cause to complain but knew they could raise any concerns with the manager of the home and were confident that their concerns would be addressed quickly. Relatives told us they had opportunities to raise any issues in relatives meetings or directly with the staff or the manager.

Is the service well-led?

Our findings

People told us they were happy how the home was managed. One person said, "I am very pleased how its run [the home]. Everything seems to be in order." Another person said, "I know the manager. He is doing a great job."

Staff were complimentary about the management of the home and they felt supported and listened to. One staff member said, "[Name of manager] is very good and they listen to us. I really feel supported and I can say we achieved so much since [manager] came." Another staff member said, "It is so much better. Staff`s morale is better and the managers are listening. We are all part of a big team which is nice."

The manager and the provider promoted a positive, transparent and inclusive culture within the service. The manager was visible within the service and people and staff told us they were approachable and listened to them.

There were various meetings organised at the home. These included residents, relatives and staff meetings. These meetings gave people an opportunity to give feedback on the service and contribute to the running of the home. We observed a daily '10 at 10' meeting where the heads of each department in the home and care managers discussed important aspects of the home and what happened in the previous 24 hours and plans for the day. This helped to ensure that all aspects of people's care and support was reviewed and information was shared between departments.

There were robust and effective systems in place to assess, monitor and review the quality of service provided. Governance audits were effective in identifying issues or concerns and these were solved promptly. We found that incidents and accidents were effectively recorded and reviewed by the manager to ensure that measures were implemented to reduce the likelihood of reoccurrence.

The manager and the provider actively sought the feedback of people using the service, staff and external social and health professionals. This information was used to directly shape the future of the service. For example we saw that the results of the survey the provider had conducted in 2017 were more positive then the results achieved in 2016. People, relatives and staff praised the service for being safe, effective, caring, responsive and well-led.