

Mrs Doreen Parkes

Beechdene Care Home

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

Beechdene Care Home is a large home, bigger than most domestic style properties, providing support to people living with a learning disability and/or autism. It was registered to support up to 17 people. 17 people were using the service at the time of inspection. The accommodation comprised of 17 bedrooms across three floors. This is larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the three lounges, computer room and other communal spaces where people could choose to spend time alone or in company.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

Staff knew people well and supported people in line with the person's preferences and wishes. Staff encouraged people to retain their independence, but we discussed with the assistant managers that the younger adults at the home could have plans and support that were more geared to them achieving skills to move on from the service if they so wished.

Medicines were managed safely, there were enough staff on duty and staff were recruited safely.

People were supported to access healthcare services if needed. People were supported to have enough to eat and drink and staff were trained to support people who had different dietary needs.

Interactions we saw between people and the staff team were positive and relatives also said they were made very welcome at the home.

Care and support plans were person centred and people were involved in their reviews.

People were supported to engage in activities they enjoyed and we saw the service promoted people accessing local community facilities and supporting them to go on trips and holidays. People and their relatives told us they knew how to make a complaint.

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.

Systems to monitor the quality of the care provided were effective. The service was going through a change of provider, but we saw the assistant managers had a clear vision about the quality of care they wanted to provide. The service worked well with other community partners.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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 September 2015).

Why we inspected

This was a planned inspection based on the previous rating.

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.

Beechdene 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 as part of our regulatory functions. This inspection checked 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.

Inspection team

One inspector carried out this inspection.

Service and service type

The service is a 'care home'. People in care homes receive accommodation and nursing or personal care. 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. 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 reviewed information available to us about this service. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from commissioners and professionals who work with the service. We assessed the information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection we spoke with the two assistant managers, and two staff members. We also spoke with six people and spent time observing other people completing their daily activities.

We looked at three people's care records including medication administration records (MARs). We looked at

two staff members records. We looked at records relating to the management of the service. These included accident and incident records, meeting minutes and quality assurance records.

During our visit we also spoke with three close relatives and two healthcare professionals via telephone.

Is the service safe?

Our findings

Safe – this means 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 good.

People were safe and protected from avoidable harm. Legal requirements were met.

Safeguarding systems and processes, including recruitment

- People we spoke with said they felt safe. Our observations for people who could not communicate with us were that they were comfortable with the staff members supporting them.
- All relatives we spoke with said they were kept informed in relation to any concerns regarding safety.
- The provider had effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm or abuse. They had received appropriate and effective training and records we viewed confirmed this.

Assessing risk, safety monitoring and management

- Risk assessment were in place to reduce the risks to people. These included environmental and individual risk assessments and provided staff guidance on actions to take to reduce the risk.
- The service assessed people prior to them moving to the service to ensure that the service could safely meet the person's individual needs.
- The environment and equipment were safe and well maintained. Emergency plans were in place to ensure people were supported in the event of a fire.

Staffing and recruitment

- There were enough staff to meet people's needs. People were able to access the community and were supported to carry out activities of their choice.
- Our observations during the inspection indicated that staff were quick to respond to people's needs.
- Staff files showed that appropriate records including checks from the disclosure and barring service (DBS) and references were in place. The service had a very consistent staff team, many of whom had worked at the service for over 10 years.

Using medicines safely

- Medicines were safely received, stored, administered and destroyed.
- We saw checks on the competency of staff to administer medicines was undertaken regularly.

Preventing and controlling infection

- Staff had received infection control training and said they had plenty of gloves and aprons available to them.
- The environment was clean and people were supported to help maintain cleanliness in their own personal space.

Learning lessons when things go wrong

- The service was committed to driving improvement and learning from accidents and incidents.

Information was analysed and investigated. Action was taken to identify suitable solutions to address any risks identified.

- The assistant managers told us they had recently completed a safeguarding course with the local authority as they had changed their procedures and they shared this learning with the staff team.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained good.

This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- The service didn't meet the full range of principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence. The service is not a small scale in terms of size, but we did see care and support was person centred.
- When required, staff reported faults with actions taken to ensure the house was safe and comfortable. Appropriate safety checks were undertaken.
- The home had three separate living rooms and a computer area which allowed people quiet areas.
- Bedrooms were personalised and decorated to each person's individual choice.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Before anyone moved into the service their needs were assessed and introductory visits arranged to ensure compatibility with all other people living in the house.

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 Act 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 and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff understood their responsibilities regarding MCA and best interest decisions. We observed staff continually seeking people's permission whilst supporting them.
- Staff had a good understanding of people's communication needs and were observed supporting people

to make day to day decisions and choices.

Supporting people to eat and drink enough to maintain a balanced diet

- Staff promoted a healthy, balanced diet and all meals were freshly homemade. One person told us of their weight loss with the support of the service and a local slimming club. The assistant manager also said this had meant the person had now ceased to require medicines to manage their diabetes.
- Support plans outlined people's preferences and the support they required with their food and drinks.
- Where there were concerns about people's eating, drinking or their weight, appropriate referrals had been made to health professionals in a timely manner and monitoring systems put in place.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Records showed people had regular health and wellbeing check-ups. When required, investigations were sought in a timely manner for any concerns. Health action plans were in place which identified people's health and care needs.
- All people regularly attended a dentist and opticians. We spoke with one professional told us, "They follow any suggestions I make, and they are very responsive."

Staff support: induction, training, skills and experience

- People were supported by staff who had the skills and knowledge to effectively and safely support them. One relative said, "The staff know exactly how to support [Name]."
- Staff we spoke with said they felt very supported by management and peers. Staff had received regular training.
- Staff received regular supervision and the service had regular meetings to ensure staff were kept informed about developments at the service.

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.

At the last inspection this key question was rated as good. At this inspection this key question has remained 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

- We saw the service had begun work to ensure people had a greater understanding of relationships and of respecting people with different backgrounds. The service had sourced easy read information and had spoken about people who were transgender and the issues they may experience. The assistant managers said they would develop this work further to ensure care plans fully recorded the support people may need around their sexuality.
- We observed staff treating people with warmth, compassion and kindness. One staff member said, "We are like a family here."
- Staff had created a relaxed and friendly home. People's body language indicated they were at ease. When people became anxious, staff offered reassurances.

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

- Staff supported people to be involved in tasks and activities they liked and had chosen.
- Information was available for people in accessible formats. For example, easy read documents had been produced for people who could not understand written words.
- People attended meetings monthly. One person told us, "We talk about arguments and things we shouldn't do or say to each other."

Respecting and promoting people's privacy, dignity and independence

- We spoke with staff who gave us examples of how they upheld people's privacy and dignity.
- People's independence was maintained. Some people at the service were older and their independence was promoted by ensuring their mobility and physical health was a priority.
- For some younger people, the assistant managers agreed their care plans and the staff team could ensure skills were promoted so they may be supported to consider less dependant environments in the future.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained good.

This meant people's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Support was based on people's assessed needs and preferences and was person-centred. Person-centred planning is a way of helping someone to plan their life and support, focusing on what is important to the person.
- Care plans were in place covering a range of people's health and social needs. They contained detailed guidance for staff on how these needs could be met to ensure people received the care and support they wanted and needed.

We recommend that the provider arranges the care plans so that old information, that is not relevant, is removed and archived.

- Care plans were regularly reviewed with people to ensure they reflected people's current support needs and preferences.
- One person told us, "My care plan is big, it tells you how good I am, and it tells you I find it hard about my money and I find it hard to get on with some people sometimes."

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

- People were supported to access activities they enjoyed. People accessed the community regularly to join activities such as social clubs, slimming classes, trips to the cinema and shopping.
- During the inspection we saw people taking part in group activities with one person attending a local resource centre. People were also keen to tell us about their regular trips to Skegness and holidays they had taken in the UK and abroad supported by staff.
- One relative we spoke with said, "[Name] has a much better social life than we do," and another said "[Name] is so happy there and really enjoys life."

Meeting people's communication needs Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff were knowledgeable about people's communication support needs and people were given information in accessible ways. When staff spoke with people we saw them adapting their voice and language to support someone with a hearing impairment.

Improving care quality in response to complaints or concerns

- Policies and procedures were in place to investigate and respond to complaints. The complaints policy was promoted to people and relatives.

End of life care and support

- At the time of our inspection nobody at the service was receiving end of life care, but policies and procedures were in place to provide this where needed.
- The service was working proactively with one person in this area to support them to access a solicitor and to make their own end of life plan.

Is the service well-led?

Our findings

Well-Led – this means 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 good.

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Leadership by the provider of person centred, high quality care; Engaging and involving people using the service, the public and staff

- The registered manager, who was also the provider, was in the process of stepping down from their roles. There were two assistant managers in post, and one had already begun the process of registering with CQC as part of the transition plan. This showed good planning for the future.
- The service involved people and their families in day to day discussions about their care and support. Family members told us that they felt reassured and very comfortable with the management at team at the service.
- Staff told us they felt listened to and that the management team were approachable. Staff told us, "Everyone is so helpful and approachable, we are on big team," and "I have always felt very supported and everyone knows their roles."

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements; Continuous learning and improving care

- The service had a welcoming atmosphere.
- The culture of the service was open and fully focused on people's individual needs.
- Our observations during our visit were that the service was well run and people were treated with respect and in a professional manner.
- Regular checks were carried out by staff and the management team to ensure people were safe and happy with the service they received.
- A robust quality assurance system was in place to review the service and drive improvement. The registered manager had responsibility for ensuring quality monitoring standards within the service were continually developed and improved outcomes for people.
- All appropriate reporting had been carried out to alert the CQC and local authorities when incidents occurred.

Working in partnership with others

- The service had good links with the local community and worked in partnership with other agencies to improve people's opportunities and wellbeing.