

Prylor Properties Limited

Beech House

Inspection report

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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

Beech House is a residential care home providing accommodation and personal care to up to 27 people. The service provides support to older people. At the time of our inspection there were 27 people using the service.

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

People told us they felt safe. Risks to them were identified and well managed. Where required, people were supported safely with their medicines. Infection control measures were in place to prevent cross infection and staff wore appropriate PPE. The home was clean throughout although parts of the décor required some improvement. This was part of the provider's ongoing improvement plan for the service.

The provider had robust recruitment systems to ensure staff were safely recruited. Staff spoke knowledgeably about the systems in place to safeguard people from abuse.

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 management of the home promoted a person-centred service. There was an open and transparent culture and good partnership working with others. The quality and safety of the service was monitored through regular checks. Audits were in place and the provider had oversight of the service and the ongoing improvements.

Necessary referrals were being made and the provider spoke about being open and honest when things go wrong. Staff worked in partnership with other agencies to support people and enhance their quality of life. Staff spoke highly of the registered manager and people using the service and their relatives spoke positively of the care they received.

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 10 January 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has remained good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Beech House on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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?

Good ●

The service was well-led.

Details are in our well-led findings below.

Beech House

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 Health and Social Care Act 2008.

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 2 inspectors and 1 Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Beech House is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Beech House is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 9 people who used the service and 3 relatives about their experience of the care provided. We spoke with 8 members of staff including the registered manager, deputy manager, care workers, cook and housekeeper.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Individual risks were managed safely, and staff were aware of people's specific care needs. However, we found some areas of the service that required upgrading.
- Parts of the décor were tired and in need of refreshing. However, we did not find anything to be unsafe and did not feel anyone was at risk of harm. The provider had an action plan and we witnessed on-going maintenance work during the inspection.
- Equipment was maintained, and the required health and safety checks had been completed. The service had recently hired a maintenance person who worked on site.
- Emergency evacuation plans were in place which included the level of support each person needed in the event of a fire. All staff we spoke to had knowledge of what to do in the event of a fire.
- Accidents and incidents were recorded, and we saw evidence of analysis and lessons learnt. A member of staff had in depth training in Moving and Handling Procedures and ensured all staff were competent in this to minimise the risk of harm.

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse.
- Staff were aware of their safeguarding responsibilities. They knew how to raise concerns and were confident that if they raised concerns they would be dealt with promptly by the registered manager. One said, "I am comfortable raising concerns and I know [registered manager] will act on them."
- People told us they felt safe living at the home. One person said, "I feel comfortable and very safe."

Staffing and recruitment

- There were safe systems of staff recruitment in place. All required checks had been undertaken prior to people commencing employment. This included Disclosure and Barring Service (DBS) checks which provided information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- During the inspection we witnessed positive interactions between staff and people who use the service and staff were available to meet people's needs.
- Staff told us there were enough staff deployed to safely care for people. One said, "I feel there is enough staff to care for people and meet their needs."
- People told us that staff responded to requests. One person said, "The carers are very helpful. They will do anything for me."

Using medicines safely

- Medicines were stored and administered safely and there were systems and processes in place for disposing of medicines securely. There was maintenance work on-going to transform a downstairs room into a large medication room for safer storage.
- Time specific medicines were documented so staff knew what time the last dose was administered.
- Protocols were available to guide staff when to administer 'as required' medicines and contained detailed information.
- Staff were trained to administer medicines and had their competency checked regularly to ensure they were safe to do so. A relative said of the medicines process, "It is very well organised."

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 supporting people living at the service to minimise the spread of infection.
- 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 responding effectively to risks and signs of infection.
- We were mostly assured that the provider was promoting safety through the layout and hygiene practices of the premises. Some improvements were needed to the home environment and were being addressed.
- 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.

Visiting in care homes

- People were supported to receive visits from their loved ones in line with current guidance. During our inspection we saw visitors coming and going.

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 our last inspection we rated this key question as good. At this inspection the rating has remained good. 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

- Staff were positive about working at the home and spoke in a caring and empathetic way about the service. Staff said, "The residents here are well cared for and they're safe. I would be happy for my own family member to come here.'
- An activities coordinator had just been employed and was waiting to start. We witnessed staff undertaking activities during the inspection to enhance the quality of life for the people living at Beech House.
- We saw evidence of life history books where people's choices and preferences were recorded, and staff had good knowledge of people's likes/dislikes.

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

- The registered manager and the team understood their roles and responsibilities. Statutory notifications are reports of certain changes, events and incidents that the registered providers must notify of us about that affect the service or the people who use it, such as safeguarding's. The provider had notified CQC as required although we did find one incident that was not reported. This was rectified during the inspection.
- The service was well managed. The registered manager and the deputy manager had good knowledge and oversight of the service. There was a range of quality monitoring, auditing and oversight in place.
- Audits were thorough, and we saw evidence of provider oversight and monitoring in place.
- Staff spoke positively of the registered manager. One said, "If there are any issues, she [registered manager] will chat with you, all senior members of staff are nice."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- People were engaged and involved. The feedback we received from people and their relatives was positive. Feedback forms sent out to people echoed these comments.
- The registered manager conducted regular meetings with people so that they were kept updated of improvements to the service and any upcoming events.
- There were regular supervisions and meetings for information sharing with staff or for staff to discuss any concerns. Staff told us they felt supported and found the meetings useful. They said, "We have regular team meetings and it gives us a chance to express our views. Management take our concerns on board."
- The provider had an ongoing improvement plan for the home to address areas which we noted required updating. We observed work was ongoing during the inspection. This would ensure the environment was

safe and inviting.

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; Working in partnership with others

- Records confirmed the registered manager and the provider understood and acted on the duty of candour.
- The registered manager worked closely with other professionals to improve the service.
- The district nursing team visited the service to offer additional training to staff to ensure good quality care.