

HC-One Limited

# The Beeches (Doncaster)

## Inspection report

Armthorpe  
Doncaster  
South Yorkshire  
DN3 2DZ

Tel: 01302300312

Website: [www.hc-one.co.uk/homes/the-beeches-armthorpe/](http://www.hc-one.co.uk/homes/the-beeches-armthorpe/)

Date of inspection visit:  
16 December 2019

Date of publication:  
08 January 2020

## 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

The Beeches (Doncaster) is a residential care home providing personal to 31 people aged 65 and over at the time of the inspection. The service can support up to 32 people. Some people using the service were living with dementia.

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

The provider had a system in place to ensure people were safeguarded from the risk of abuse. Staff knew how recognise and report abuse. Medicines were managed in a safe way. Risks associated with people's care had been identified and appropriately managed to ensure risks were minimised.

Lessons were learned when things went wrong. The registered manager kept a record of accidents and monitored the outcome. The home was clean and fresh. However, we saw some areas of the home required attention. The registered manager told us these areas had been identified and action was ongoing. Some actions from the last fire officer visit had not been completed. The registered manager told us they would address this and email the lead inspector following our inspection.

People's needs were assessed and care and support was delivered appropriately. The home was working in line with the principles of the Mental Capacity Act. Best interest decisions had been made when required and in the least restrictive way. 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.

People received a balanced and varied diet which met their needs and suited their preferences. Staff we spoke with told us they felt supported by the registered manager and received training.

We observed staff interacting with people and found them to be caring and friendly. Privacy and dignity was maintained. There was a focus on people making choices and staff ensured preferences were adhered to. Positive feedback received from relatives and people living at the home.

Care plans we saw were person centred and were in line with people's assessed needs. Staff knew people very well. The provider employed a well-being co-ordinator who arranged activities and social stimulation. We observed people had access to varied activities. The provider had a system in place to monitor and deal with complaints. End of life care was documented in people's care plans.

The provider had a system in place to monitor the service. Several audits took place and any issues arising were addressed. Relatives and people who used the service had opportunities to feedback their experience. Staff felt listened to and included in 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 28 April 2017).

### Why we inspected

This was a planned inspection based on the previous rating.

### 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 effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well led.

Details are in our well led findings below.

Good ●

# The Beeches (Doncaster)

## 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.

#### Inspection team

The inspection was carried out by two inspectors.

#### Service and service type

The Beeches (Doncaster) is a 'care home.' People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### 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 and professionals who work with the service. We asked Healthwatch for feedback. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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 and four relatives about their experience of care provided. We spoke with nine members of staff including the registered manager, area director, care workers, the well-being co-ordinator and cook. We also spoke with a visiting professional. We used the Short Observational

Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included two people's care records and multiple 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 seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

# 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

- The provider had a system in place to ensure people were protected from the risk of abuse.
- Staff we spoke with were aware of their role in safeguarding people and would report any concerns immediately.
- Everyone we spoke with told us they felt safe living at the home. One person said, "They [staff] are really good. I feel safe."

Assessing risk, safety monitoring and management

- Risks associated with people's care had been identified and care had been planned to minimise risks occurring.
- We looked at people's care records and found risk assessments were in place which clearly guided staff in caring for people in a safe way.
- People had personal emergency evacuation plans in place to ensure they could be safely evacuated from the premises in an emergency.
- Equipment used was maintained and kept in good working order and services regularly.

Staffing and recruitment

- The provider employed sufficient staff to meet people's assessed needs.
- Staff we spoke with told us they were safely recruited, and appropriate pre-employment checks had been completed prior to them commencing their employment with the provider.

Using medicines safely

- Medicines were managed in a safe way which ensured people received them as prescribed.
- People prescribed medicines on an 'as and when' basis, were administered them when appropriate.
- Medicines were stored safely. Temperatures were taken of the medicine fridge and store room to ensure medicines were stored within the recommended temperature.

Preventing and controlling infection

- We completed a tour of the home and found some toilets and bathrooms were in need of refurbishment. The registered manager told us this had been identified and an action plan was in place to address these concerns.
- The service was clean and there were no malodours.
- We saw staff had access to and used personal protective clothing (PPE).

### Learning lessons when things go wrong

- The provider had a system in place to learn when things went wrong.
- The registered manager kept a record of accidents and incidents and took appropriate actions to minimise the reoccurrence of them.



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

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

- Prior to people using the service a full assessment of their needs was completed. This ensured the provider could meet people's needs.
- People's needs were kept under review and any changes to their care and support was acted on.

Staff support: induction, training, skills and experience

- Staff we spoke with told us they completed training which gave them the skills to carry out their roles.
- The registered manager kept a record of training staff had completed so they knew when training required updating.

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

- People received a balanced diet which met their needs and preferences.
- We observed lunch being served and found this was a pleasant experience. People were assisted to make choices and people who required support were assisted in a sensitive way.
- People told us they enjoyed their meals. One relative said, "The food is excellent the cooks do a terrific job, my [relative] has a special diet and they put themselves out to make sure [relative] has a good experience."

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

- Care plans we looked at showed people had been referred to appropriate professionals when required.
- Staff followed any advice and guidance given from healthcare professionals to ensure people received the right support. One visiting healthcare professional said, "They're [staff] on the ball, I come daily. It's definitely kind and caring, no concerns at all."
- We spoke with people and their relatives who gave positive feedback about healthcare. One relative said, "They [staff] get in touch with us and they [staff] are very prompt to get medical help."

Adapting service, design, decoration to meet people's

- The service was decorated to meet the needs and preferences of people living at the home.
- The provider had made some changes, in consultation with people. These changes had made a better sitting area and the dining room had improved.
- People had access to outside space. There was a garden area to the rear of the home which was well maintained.

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.

- The service was working within the guidelines of the MCA. Where people lacked capacity to make decisions, these were made in the person's best interests.

# 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 the same. 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 observed staff interacting with people and found they were kind, caring and approachable. People were treated well, and staff were friendly.
- We saw staff respected people and had taken time to get to know people well.
- People were involved as partners in their care and their equality and diversity was respected.
- We spoke with people and their relatives and they were complimentary about the care they received. One relative said, "The carers are kind and go above and beyond, even the cleaners pop in to see [relative]. We spend a lot of time here, we hear a lot what's going on behind the scenes and we are pleasantly surprised. Staff are so friendly and on the ball."

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

- People had opportunities to express their views and were involved in making decisions about their care. Staff respected people's views and opinions.
- Each time staff interacted with people, they explained what they wanted to do and listened carefully to the response. Staff acted on what people chose to do.

Respecting and promoting people's privacy, dignity and independence

- We saw staff promoted people's independence and ensured privacy and dignity was respected.
- Staff knocked on doors and waited for a response prior to entering.

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

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received person centred care which they were involved in and consulted about.
- We looked at some people's care plans and found these had been agreed with people and included people's preferences.

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.

- Information around the home was displayed in a format which people understood.

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

- The home employed a well-being co-ordinator who was responsible for arranging activities and social stimulation for people.
- During our inspection we saw people were engaged in an activity of Christmas wreath making, which was enjoyed by all participants.
- The home operated a 'stop the clock' session where all staff took part in whatever people wanted to do. People who used the service enjoyed a range of activities. One person said, "They [staff] keep me occupied, I will join in with anything. I like the quiz it keeps my mind active."

Improving care quality in response to complaints or concerns

- The registered manager kept a record of complaints and dealt with them in accordance with the providers complaints procedure.
- People we spoke with were complimentary about the home and felt there was no reason to complain.

End of life care and support

- The service respected people and met their needs during end of life care. Staff were committed to providing person centred care at this stage of people's lives.
- Care plans we looked at considered people's end of life care needs and preferences.

# 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 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

- The provider and registered manager were keen to promote a service where everyone had an opportunity to be involved.
- There was a very welcoming and friendly atmosphere in the home throughout our inspection. All staff were seen to promote an open and inclusive environment where people's outcomes were a priority.

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

- Both the provider and registered manager were aware of their legal responsibilities.
- The registered manager ensured CQC were aware of any statutory notification. We saw appropriate actions had been taken when necessary.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People were supported to be involved in the service and their opinions mattered.
- Residents and relatives meeting took place frequently and people were asked for their input about the service.
- Annual questionnaires were sent to people for completion. This was to gain people's views and opinions about the service.

Continuous learning and improving care

- The provider had a system in place which ensured the service was kept under review.
- A series of quality audits were completed, and any actions raised were resolved.

Working in partnership with others

- The service worked in partnership with others. For example, the provider ensured that issues raised by the local authority or CQC had been addressed.