

Mrs S Lartey

Beecholme House

Inspection report

2-4 Beecholme Avenue
Beecholme Avenue
Mitcham
Surrey
CR4 2HT

Tel: 02086486681

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29 June 2016

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Ratings

Overall rating for this service

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

The last inspection of this service was carried out on 05 January 2016 when we found the provider was in breach of the regulations. This was because the provider did not always maintain accurate and accessible records relating to the overall management of the service. Specifically, we found no recorded evidence to show the provider routinely quality monitored the service or sought and valued people's views about how Beecholme House was run. This meant it was difficult to determine whether or not the provider's own checks or feedback from people using the service were used to drive improvement at the home.

After the service's last inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to this breach of the regulations. We undertook this focused inspection of Beecholme House on the 29 June 2016 to check the provider had followed their action plan and now met legal requirements.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Beecholme House' on our website at www.cqc.org.uk

Beecholme House is a rehabilitation service that can accommodate and provide support for up to fifteen younger males with a past or present experience of mental ill health. The service specialises in helping people to develop the necessary skills to move onto more independent living. The service is divided into a main hostel located at 2-4 Beecholme Avenue where up to 12 people can live and a nearby three bedded 'step down' unit. The step down house is not permanently staffed and people who stay there live more independently than the people living at the main house. When we inspected the service there were 12 people living in the main house and two people staying at the step down facility.

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

During our focused inspection, we found that the registered provider had followed their action plan. We saw legal requirements had been met because the provider now maintained accurate and accessible records relating to the overall management of the home. For example, we were able to look at recorded evidence in relation to the quality monitoring audits management regularly carried out at the service, feedback received from people using the service and action taken in response to issues identified or raised through these processes.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service well-led?

We found that appropriate action had been taken by the provider to ensure the service was well-led.

The provider regularly monitored the quality of the care, facilities and support people using the service received. People's views were welcomed and valued by the provider. On-going audits and feedback from people were used to drive improvement. The registered manager demonstrated good leadership and they were proactive in making changes when they were needed.

Good ●

Beecholme 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 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.

This focused inspection was undertaken by one inspector on 29 June 2016 and was announced. The provider was given 48 hours' notice because we needed to be sure that someone would be available in the office so we could look at records relating to the management of the service. This inspection was carried out to check all the improvements the provider said they would take to ensure they met their legal requirements had been implemented. We inspected the service against one of the five questions we ask about services: Is the service well led?

Prior to the visit we reviewed the information we held about the service, which included the action plan we had asked the provider to send us. The action plan set out how the provider intended to meet the regulations they had breached.

During our visit we spoke with two people using the service, the registered manager and the deputy manager. We also looked at a range records that related to the overall management of the service, which included various quality monitoring audits and satisfaction surveys carried out by the provider in the last six months.

Is the service well-led?

Our findings

We last inspected the service on 05 January 2016 and identified the provider was in breach of the regulations. This was because the provider did not always maintain accurate records relating to the overall management of the service. Specifically, we found no recorded evidence to show the provider routinely quality monitored the service or sought and valued people's views about how Beecholme House was run. This meant it was difficult to determine whether or not the provider's own checks or feedback from people using the service were used to drive improvement at Beecholme House.

At this focused inspection we found the provider had taken appropriate steps to follow their action plan and improve their quality monitoring arrangements.

The provider promoted an open and inclusive culture which welcomed and took into account people's views about the running of the service and what they could do better. The provider used a range of methods to gather people's views and/or suggestions which included regular house meetings and satisfaction surveys. It was clear from the results of a satisfaction survey undertaken by the provider in the last few months that people were 'happy' with the overall standard of care and support they received at Beecholme House. The registered manager gave us some good examples of how staff had helped people who had expressed a wish to improve their independent living skills to get jobs in the local community.

The provider operated effective governance systems to routinely assess monitor and improve the quality and safety of the service people received at Beecholme House. Records indicated the service's management and senior staff team were all responsible for regular audits at Beecholme House, which included the step down unit. They routinely checked the accuracy of people's care plans and other records maintained by staff, and the effectiveness of the service's arrangements for managing medicines, infection control, health and safety, building maintenance and staff recruitment and training. These checks were well documented along with any actions taken by the registered manager to remedy any shortfalls or issues they identified through these checks. The registered manager told us progress against these actions were discussed at monthly management meetings held at Beecholme House.

Records indicated the provider used learning from incidents and audits to identify opportunities to continuously improve the service they provided. For example, it was clear from records we looked at that the increase in medicines recording errors had been analysed and appropriate action taken to mitigate the risk of similar incidents reoccurring. This included assessing staff's competency to handle medicines safely, discussing these errors at team meetings and the introduction of daily checks of medicines administration records.