

Beech Tree Care Home

Beech Tree Care Home Limited

Inspection report

38 Plough Lane
Purley
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CR8 3QA

Tel: 02084075199

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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 Tree Care Home is a residential care home providing personal care for people with mental health needs. The service is registered to support up to nine people. At the time of our inspection six people lived in the one adapted building.

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

People were protected from the risk and spread of infection by the hygiene practices of staff and the new enhanced cleaning programme they had implemented. The risks of people experiencing avoidable harm were reduced because known risks were assessed and plans were in place to mitigate them. The registered manager and staff were trained to identify and take action if they suspected people were at risk of abuse.

Staff supported people to take their medicines safely. The registered manager ensured that medicines records were in good order. Health professionals reviewed people's medicines and worked in partnership with staff to support people's mental and physical health needs.

Recruitment practices were robust. This meant the registered manager had assured themselves that all staff were safe and suitable to provide care and support.

The environment of the care home was safe. Window restrictors were in place to prevent people falling out of them. Potentially harmful cleaning products were secured and inaccessible to people and visitors. There were fire doors throughout the building along with smoke detectors and a fire alarm.

A new overarching auditing process was being implemented by the registered manager. This enabled an at-a-glance check of individual audits and the completion of actions arising from them. The views of people, staff, relatives and healthcare professionals were sought and used to shape the service.

The registered manager and care staff worked collaboratively with health and social care professionals to meet people's changing needs.

Rating at last inspection (and update)

The last rating for this service was requires improvement (published 29 July 2019) and there were two breaches of regulation. The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

This was a planned inspection based on the previous rating.

We looked at infection prevention and control measures under the Safe key question. We look at this in all

care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

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

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?

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 Tree Care Home Limited

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.

This was a focused inspection to check whether the provider had met the requirements of the Requirement Notices in relation to Regulation 15 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Premises and equipment and Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Good governance.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Beech Tree Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. 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. Inspection activity started on 25 June 2021 and ended on 30 June 2021. We visited the office location on 25 June 2021.

What we did before the inspection

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 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 used all this information to plan our inspection.

During the inspection

During the inspection we spoke with one person who used the service, one member of staff and the registered manager. We reviewed a range of records including four people's care records and medicines records. We looked at four staff files in relation to recruitment. We reviewed the provider's quality audits and undertook a visual inspection of hygiene throughout the care home.

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 Requires Improvement. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

Preventing and controlling infection

At our last inspection we found that people were not protected from the risk of infection because of poor hygiene standards at the service. This included heavily stained carpets, dirty shower trays, cracked tiles and unpleasant smells. We also found some windows did not have window restrictors, which meant people were at risk of falling from them. This was a breach of Regulation 15 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Premises and equipment.

At this inspection we found sufficient improvement had been made and the provider was no longer in breach of Regulation 15.

- Carpet in the communal areas of the service had been replaced with wood-effect vinyl flooring. This was easier to clean and meant there were no stains or unpleasant smells.
- People's en-suite bathrooms were regularly cleaned and there was no staining in or around shower trays, sinks or toilets. One person told us they liked their room and were happy with how clean it was.
- Cracked tiles in the kitchen floor had been replaced with new matching ones.
- Restrictors were in place on all windows, protecting people from the risk of injury resulting from a fall from height.
- An improved cleaning schedule had been implemented following our last inspection. This was further enhanced to protect people from the risk of COVID-19.
- Staff ensured that people were protected from risks associated with poor hygiene practices around the storage and preparation of food. The service received a five out of five star rating when inspected by the Food Standards Agency.

Systems and processes to safeguard people from the risk of abuse

- The provider had safeguarding procedures in place to provide guidance on the actions to take should abuse be suspected. These actions included reporting safeguarding concerns to social workers within the local authority and notifying CQC.
- All staff received safeguarding training to identify signs of abuse and the actions they should take to keep people safe.

Assessing risk, safety monitoring and management

- People's needs were assessed and staff put measures in place to protect people from foreseeable harm. For example, where people were at risk of self-neglect, care plans were in place to ensure their personal hygiene needs were met.

- Care records were clear about people's mental health needs and the support they required to remain safe.

Staffing and recruitment.

- The registered manager ensured that staff were safe and suitable to provide care and support.
- Before they joined the service staff provided satisfactory employment references and proof of identification. Criminal record checks were carried out to ensure staff were of good character.

Using medicines safely

- People received their medicines safely and in line with the prescriber's instructions.
- Medicines were safely stored in a locked medicines trolley in a locked medicines room. The keys to the medicines trolley and the medicines room were kept on the person of a member of staff designated 'shift leader'. This meant people were protected from the risks associated with unauthorised access to medicines.
- Staff were trained to administer medicines to people.
- Accurate medicines records were maintained and audited. Where people did not receive their medicines as prescribed the reason for this was appropriately stated on the back of people's medicines administration records.

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 meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Learning lessons when things go wrong

- The registered manager and team sought to learn and improve when things had gone wrong. For example, where failings were identified at the service during our last inspection, the provider took action to prevent a reoccurrence of those issues.

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 as Requires Improvement. At this inspection this key question has now improved to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

At our last inspection we found that the provider's quality audit checks did not always result in improvements when failings were found. This was a breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Good governance.

At this inspection we found sufficient improvement had been made and the provider was no longer in breach of Regulation 17.

- The quality of care people received was positively impacted by the checks that were carried out and the actions put in place to address shortfalls.
- Audits included checks of the environment, care records, medicines and staff training. At the time of our inspection the registered manager was implementing an overarching audit to assure themselves that all audits were robust and required action was taken.
- The registered manager ensured staff were clear about their roles and responsibilities. This was reinforced during supervision meetings and team meetings.
- The staff team used a shift leader system to ensure each team member's responsibilities were clear at all times.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The registered manager promoted an open culture within the service where the views of people, relatives and staff were welcomed.
- The registered manager arranged team meetings for staff. These were used to discuss improvements to the service and to ensure staff understood COVID-19 guidance. Minutes were retained following team meetings to enable review and to confirm actions.
- The manager used a system of memos to inform staff about people's changing needs and a mobile phone application was used to communicate non-confidential updates.
- The provider had regard for people's protected characteristics as well as people's individual choices and preferences.

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

- The registered manager understood the importance of being transparent with people, relatives, funding authorities and regulators. Where things had not gone well the registered manager ensured that all parties were informed.

Continuous learning and improving care

- The registered manager ensured that staff training was up to date and undertook some training sessions alongside their team. This meant the whole team kept their skills and knowledge up to date.
- The service attended on-line forums and workshops hosted by the local authority and health colleagues. This meant people were supported by staff with access to best practice guidance.

Working in partnership with others

- The service worked in partnership with others to achieve positive outcomes for people. For example, mental health specialists were actively involved in supporting people's rehabilitation and recovery. Other health and social care professionals involved at the service included care coordinators, physiotherapists, chiropodists and opticians.
- The registered manager ensured that timely referrals were made to health and social care professionals when required.