

## Abbeyfield The Dales Limited

# Abbeyfield - The Beeches

#### **Inspection report**

The Beeches Newfield Drive, Menston Ilkley West Yorkshire LS29 6JQ

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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

Abbeyfield The Beeches is registered to provide personal care and support to people living in the self-contained apartments within the complex. People living in the apartments have access to communal facilities including a lounge and dining facility. At the time of inspection the agency was providing care and support to 21 people.

We inspected The Beeches on the 3 May 2017 and the inspection was announced. This was the first inspection of the service since the provider changed to Abbeyfield The Dales Limited.

At the time of inspection there was a registered manager in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

There were systems in place that ensured people received their care on time and people were kept safe and their needs were met. Safeguarding adult's procedures were robust and staff understood how to safeguard the people they supported. There was a whistle blowing procedure available and staff said they would use it if they needed to. The service had systems in place to manage accidents and incidents whilst trying to reduce reoccurrence.

Medicine records showed that people were receiving their medicines as prescribed by health care professionals. There were enough staff on duty to meet people's needs and there was an out of hours on call system. The provider conducted appropriate recruitment checks before staff started work to ensure they were suitable to work in the caring profession.

Staff received supervision and training both to meet people's needs and to enable them to carry out their roles effectively. There were processes in place to ensure staff new to the service received appropriate induction training.

The registered manager demonstrated a good understanding of their responsibilities under the Mental Capacity Act 2005 (MCA) and staff demonstrated good knowledge of the people they supported and their capacity to make decisions.

People's nutritional needs and preferences were met and people had access to health and social care professionals when required.

People were involved in planning the care and support they received and staff respected their wishes and met their needs. However, we recommended the registered manager reviewed all the support plans in plans to ensure they provided accurate and up to date information.

People who used the service and their relatives knew about the complaints procedure and said they believed their complaints would be investigated and action taken if necessary. People told us they thought the service was well run and that the registered manager was supportive.

There were effective quality assurance monitoring systems in place and the registered manager recognised the importance of regularly monitoring the quality of the service provided. People and their relatives were provided with opportunities to provide feedback about the service.

The registered manager was aware of their responsibilities in relation to notifying the Commission [CQC] about reportable incidents.

We found no breaches of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

#### 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

People told us they felt safe receiving care in their own home.

There were processes in place to ensure people were protected from the risk of abuse and staff were aware of safeguarding procedures.

Safe recruitment practices were in place and there were enough staff deployed to meet people's needs safely.

People were supported to receive their medicines safely.

#### Is the service effective?

Good



The service was effective.

Staff had the skills and knowledge to meet people's needs and received regular training and support to make sure they carried out their roles effectively.

The registered manager understood the Mental Capacity Act 2005 (MCA) and acted according to this legislation. People were asked for their consent before care was given.

People were referred to relevant healthcare professionals if appropriate and their dietary needs were met.

#### Is the service caring?

Good



The service was caring

Care and support was provided in a caring and respectful way. The principles of privacy and dignity were upheld and staff spoke with compassion about the people they supported.

Wherever possible people were involved in reviewing their care needs and were able to express their views about how they wanted their care and support to be delivered.

#### Is the service responsive?

Good



The service was not consistently responsive.

People received a service that was flexible and responsive to changes in their needs.

Support plans were in place to ensure staff provided care and support in line with people's preferences. However, we recommended the registered manager reviewed the support plans in plans to ensure they provided accurate and up to date information.

People felt confident they could raise concerns and these would be listened to and dealt with promptly.

#### Is the service well-led?

Good



The service was well led.

People benefitted from a service that had a registered manager in post and a culture that was open, friendly and welcoming.

Staff enjoyed their work and told us the senior management team were always available for guidance and support.

Systems were effective in assessing and monitoring the quality of care provided to people. The service encouraged feedback and used this to drive improvements.



# Abbeyfield - The Beeches

**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 was planned to check 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.

We visited The Beeches on 3 May 2017. The inspection was announced. The provider was given 48 hours' notice because the location provides a domiciliary care service and we needed to be sure the manager was available. The inspection was carried out by two inspectors.

Before the inspection we reviewed the information we held about the service. This included looking at information we had received about the service and statutory notifications the registered manager had sent us.

We also asked the provider to complete a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. The registered provider returned the PIR and we took this into account when we made judgements in this report.

During the inspection we looked at the care records of three people who used the service, staff training and recruitment records and other records relating to the day to day running of the service and the care and support people received.

We also spoke with the registered manager, four staff members, eight people who used the service and four relatives.



#### Is the service safe?

## Our findings

People told us they felt safe. One person said, "I feel very safe living here, all the staff are great and they help you any way they can." Another person said, "All the staff are good and I have no concerns about my safety. If I did I would let the manager know straight away and I am confident they would sort it out."

We saw the provider had a policy in place for safeguarding people from abuse which provided guidance for staff on how to identify different types of abuse and the reporting procedures. The service also had a whistle blowing policy which provided guidance to staff on how to report matters of concern. In addition, the registered manager told us they operated an open door policy and people who used the service, their relatives and staff were aware they could contact them at any time if they had any concerns.

The staff we spoke with told us they were aware of how to detect signs of abuse and were aware of external agencies they could contact. They told us they knew how to contact the local authority's Adult Protection Unit and the Care Quality Commission if they had any concerns. They also told us they were aware of the whistle blowing policy and felt able to raise any concerns with the manager knowing that they would be taken seriously. These safety measures meant the likelihood of abuse occurring or going unnoticed was reduced.

Policies and procedures relating to the safe administration of medicines were in place and the staff we spoke with told us they had completed medication training. We saw medication administration records (MAR) were in place and had been completed by staff correctly. We saw medicines were securely stored in a locked cabinet in people's apartments and suitable arrangements were in place to ensure people took their medicines safely.

People told us they received their medicines as prescribed. One person said, "I need my medicines at a given time and the staff always made sure I have them." We had discussion with the registered manager about one person who could self-medicate but was unable to because the cabinet in their bedroom was too high for them to reach. The registered manager said they would look at placing medicines in a lower cabinet to help promote the person's independence.

The registered manager confirmed the agency employed sufficient staff for operational purposes and both they and eight staff care staff had been employed at The Beeches since it opened in 2010. This helped to ensure people received continuity of care.

Through discussions with people who used the service and staff we found there was enough staff with the right skills, knowledge and experience to meet people's needs. People we spoke with told us they felt there was enough staff available to give them the support they required. One person talked about staff spending time talking and supporting them when they were not feeling well. Another person talked about the support they received they said, "I really like to have a good bath and the staff support me to make sure I'm safe."

We saw recruitment and selection procedures were in place to ensure only staff suitable to work in the

caring profession were employed. This included ensuring a Disclosure and Barring Service (DBS) check was made and at least two written references were obtained before new employees started work. We were told by the registered manager that they were supported in recruiting new staff members by the human resource staff based at the organisations main office at the Abbeyfield Grove House complex in Ilkley.

Risk assessments were in place where areas of potential risk to people's general health, safety and welfare had been identified. We saw the care plans and risk assessments provided staff with clear guidance on how to meet people's needs and were reviewed on a regular basis. This ensured they provided accurate and up to date information and people received the appropriate care and support.

Staff told us if they noticed any new areas of risk they took immediate action to minimise the risk. They then informed the registered manager who arranged for a thorough risk assessment to be carried out and the support plan updated. We saw risk assessments covered such areas as mobility, medication, infection control and the environment.

We saw incidents and accidents were accurately recorded and included a description of the incident and any injury, action taken by staff or management and recommendations to prevent reoccurrence. We saw that these records were reviewed as part of the internal audit system. Monitoring accidents and incidents can assist management to recognise any recurring themes and then take appropriate action; helping to ensure people are kept safe.

We saw personal emergency evacuation plans (PEEPS) were in place for people who used the service. PEEP's provide staff with information on how they could ensure an individual's safe evacuation from the premises in the event of an emergency. We saw evidence of PEEPS based on people's physical abilities, ability to understand verbal instructions and willingness to follow instruction.



#### Is the service effective?

## Our findings

People told us they were supported to make their own decisions and felt they could influence what support they received. People told us staff always asked them for their consent before assisting them with personal care and were always given choices regarding how they wished to be supported. One person said, "They always ask what I want and if it is alright to do things." "Staff are very kind they always listen to me. When I don't want to go downstairs they bring my meal to me." We observed staff asked for people's consent before any support was provided such as assistance with medication and mobility.

We looked at the staff training matrix and found staff received appropriate training to meet people's assessed needs. The registered manager told us the organisation had recently moved away from distance learning and wherever possible provided staff with more classroom based training. This was so that staff could interact with their peers and the trainer could be confident individual staff members had fully understood the course content. The registered manager told us they had received training from a recognised training agency and were now responsible for delivering training using power point presentations and other training aids.

We saw all new staff members completed induction training and staff with no previous experience in the caring profession had to complete the Care Certificate. The Care Certificate is an identified set of standards that health and social care workers adhere to in their daily working life.

The registered manager told us some training continued to be facilitated by an external trainer and training required to meet an individual persons needs was at times provided by other healthcare professionals. We saw there was a training plan in place which showed the training already planned for 2017. The staff we spoke with told us they had completed several training courses including health and nutrition, safeguarding, moving and handling, health and safety and medication.

We saw individual staff training and personal development needs were identified during their formal one to one supervision meetings. Supervision meetings are important as they support staff to carry out their roles effectively, plan for their future professional and personal development and give them the opportunity to discuss areas of concern. The staff also told us there was always a manager on call outside of normal office hours who they could contact any time for guidance, advice and support.

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 the case of Domiciliary Care applications must be made to the Court of Protection. We found the service was working within the principles of the MCA and managers had

an understanding of how these principals applied to their role and the care the agency provided.

We saw evidence of consent in people's care records. For example, the support plans we looked at showed wherever possible people had been involved in planning their care and support and had consented for staff to assist them. Staff confirmed they had received training on the MCA and showed a good understanding of protecting people's rights to refuse care and support. They said they would always explain the risks from refusing care or support and try to discuss alternative options to give people more choice and control over their daily life. This demonstrated to us that before people received any care or treatment they were asked for their consent and the provider acted in accordance with their wishes.

We saw if people who used the service required staff to assist or support them to prepare food and drink information was present within their support plan. However, we were told both the lunch and evening meals were provided in the on-site restaurant as part of their rental agreement. People told us they were supported to choose meals that took account of their preferences and nutritional needs. They also told us they were supported to have sufficient to eat and drink and encouraged to maintain a balanced diet.

People told us they had the ability to influence the food served. For example, people were involved in menu planning. The people we spoke with told us the food provided was good and their dietary needs were met. One person said "The food is really tasty and I enjoy every meal." Another person said "There is always a good choice and the food is always well cooked."

We saw evidence people were supported to maintain good health. Information on people's medical history and existing medical conditions was present within their support plans to help staff be aware of people's healthcare needs. The registered manager confirmed if staff noted a change in people's needs or were concerned about someone's health they would refer them to other healthcare professionals if appropriate.

People we spoke with also told us the staff were very pro-active in calling healthcare professionals such as general practitioners or the district nursing service if they felt people were unwell. One person said, "I just inform the staff I am unwell and they contact the doctor or nurse for me." Another person said, "I asked the staff to contact my GP to make an appointment and they did it straight away, they are very good at looking after us." This showed us that the policies and procedures in place to support people in such emergencies were effective and the service and staff acted in people's best interest.



## Is the service caring?

## Our findings

People who used the service told us staff were kind and caring. One person said, "The staff are really good and do everything I ask of them and more." Another person said, "I am happy with the care and support I receive. It is great living here I have lots of friends and people that care about me."

All the people we spoke with told us that staff were friendly and respectful. They told us staff respected their privacy and dignity and they had a support plan in place which they had been involved in developing. We saw people were relaxed and comfortable in the presence of staff and staff were patient and focused on the person they were assisting.

People told us staff listened to them and they felt comfortable discussing their needs with staff. One person said, "When you asked for assistance staff always responded positively you only need to ask them once." We saw people were happy and living within a pleasant, comfortable and caring atmosphere.

The relatives we spoke with told us they were satisfied with the service provided. They told us staff carried out their duties in a caring and enthusiastic manner. One person said," My [Name of relative] is so well looked after and the staff have such a caring attitude and respect both them and us."

The staff we spoke with were able to describe how individual people preferred their care and support to be delivered and the importance of treating people with respect in their own homes. They knew people's likes and dislikes and things that were important to them. One staff member said, "I always treat people we care for with respect and courtesy." Another staff member said, "People are well looked after we make sure of that."

The registered manager told us at the time of inspection no one who used the service required an advocate to assist them. However, they confirmed if necessary people would be supported to access advocacy services if they had no family and friends to act on their behalf. Advocates are trained professionals who support, enable and empower people to speak up. This demonstrated that where people did not have the capacity to express their choices and wishes or found it difficult to do so, the service would ensure they had access to independent professional support.

We looked at how the service worked within the principles of the Equality Act 2010 and in particular how the service ensured people were not treated unfairly because of any characteristics that are protected under the legislation. We spoke with the registered manager about the protected characteristics of disability, race, religion and sexual orientation and they showed a good understanding of how they needed to act to ensure discrimination was not a feature of the service.

The registered manager told us staff received training on equality and diversity and the staff we spoke with told us that this meant promoting equality and opportunity for all and caring for people in a manner that was free of prejudice and discrimination.

We saw the agency had policies and procedures in relation to protecting people's confidential information which showed they placed importance on ensuring people's rights to confidentiality were respected. We saw staff had received information about handling confidential information and on keeping people's personal information safe. All confidential records and reports relating to people's care and support and the management of the service were securely stored in locked cabinets in the main office to ensure confidentiality was maintained and computers were password protected.



## Is the service responsive?

## Our findings

The people we spoke with told us the service was responsive to their changing needs and the registered manager and staff always tried to accommodate any changes they requested in relation to their care and support. One person said, "Once or twice I have had to ask for a different visit time due to unforeseen circumstances and the staff have always obliged without any fuss. They really do go the extra mile to assist you if they can."

The registered manager told us people's needs were assessed prior to them being offered a place at The Beeches and apartments were allocated based on this assessment of needs. We saw people were given an information pack when they made the initial enquiry which outlined the care, support and facilities provided by the organisation which helped them to make an informed decision about pursuing their application.

We looked at three support plans and supporting documentation during our inspection and found people who used the service and/or their relatives had been involved in planning their care and support. People told us staff reviewed and discussed their care and support with them on a regular basis to ensure that their changing needs were met. However, we found some support plans and risk assessments were dated 2014 although they had been reviewed on a monthly basis. We recommended the registered manager reviewed all the support plans in plans to ensure they provided accurate and up to date information. Following the inspection we received additional documentary evidence from the registered manager which showed at the time of inspection all care records accurately reflected people's current needs.

Daily records were completed by care staff following every visit. However, we found some daily report lacked detail about the level of care and support provided. We also found the length of time staff stayed at each visit was recorded on a separate document which meant we had to cross reference to ensure staff were providing care and support within agreed timescale. However, the registered manager showed us a copy of a new report book the organisation planned to introduce in the near future which covered all aspects of people's care and support and included an audit tool. They told us once in place the report books would be audited as part of the internal quality assurance monitoring process.

During the course of the inspection we had the opportunity to observe the handover meeting between the morning and afternoon staff. We saw the meeting was conducted in a professional manner and staff had a good understanding of people's changing needs and responded to them appropriately.

People told us they were happy living at The Beeches and in addition to the care and support provided they enjoyed the activities available within the complex. They told us activities included music sessions, bingo and art and craft. One person we spoke with said, "We have choice of activities some days I get involved in whatever activity is taking place. But I like time by myself." A family member said, "I think they provide ample activities for [Person] needs I'm so happy [Person] came to live here." On the afternoon of the inspection we saw staff joined people in sing along.

The provider had a complaints procedure in place which showed they worked on the principle that people

should be able to access the complaints procedure easily and any complaints received should be welcomed and looked upon as an opportunity to learn, adapt, improve and provide better services.

The registered manager told us they had a proactive approach to managing complaints and senior staff were always available to talk to people and deal with any concerns as soon as they arose. The provider information return (PIR) completed by the organisation showed the service had dealt with five complaints in the last 12 months under the formal complaints procedure. We found all the complaints received had been dealt with appropriately and in line with the complaints procedure.

People who used the service or their relatives said they had been provided with information on how to raise concerns and any concerns raised had been quickly addressed. They told us they felt confident the staff would listen and act on their concern. One person said, "If I have anything on my mind I speak out and things are sorted out." Another person said, "If I have a problem it is addressed quickly." A third person said, I can speak to staff about anything and I have no complaint."



## Is the service well-led?

## Our findings

We received positive feedback about the registered manager and staff. One person said, "[Name of the registered manager] is brilliant, always welcoming and always takes time to speak to us." Another person said, "The staff are lovely and make you feel at ease, I am so pleased I came to live at The Beeches."

We saw there were robust internal and external auditing and monitoring processes in place to assess and monitor the quality of service provided. The registered manager told us audit results were reviewed and analysed for themes and trends which might lead to changes in established procedures or work practices. There was evidence that learning from incidents/investigations took place and appropriate changes were implemented.

In addition, the registered manager told us they benefitted from the organisational structure in place which ensured front line managers employed by the provider were supported in their role by a strong senior management team including the Head of Care Services. They also told us they could draw on the skill and expertise of other key people within the organisation including the quality manager, business support manager and human resource staff. In addition, a board of trustees ensured the service was managed effectively and in people's best interest.

The registered manager told us they completed a monthly report which covered all aspects of the service to the provider's Chief Executive Officer and that an action plan would be implemented if shortfalls in the service were identified.

The staff we spoke with told us communication and support within the service was good. We saw staff meetings were held on a regular basis which gave opportunities for staff to contribute to the running of the service. Staff said the registered manager maintained a visible presence and often spent time with them and people who used the service. One staff member said, [Name of registered manager] is out and about all the time, chats to everyone and finds out what's going on around the place."

We saw as part of the quality assurance monitoring system people who used the service were asked to complete an annual survey questionnaire. The registered manager told us the information received was collated and an action plan formulated to address any concerns identified. We also saw the organisation held resident and family meetings on a three monthly basis and published a newsletter.

We saw an annual staff survey was carried out and the organisation held an annual staff and volunteer recognition award ceremony. The quality manager told us the ceremony recognised the contributions made by individual staff members working in all the services managed by the organisation and staff were nominated by their work colleagues or people who used the service.

Several of the staff had worked for the service since it opened in 2010. They told us they did so because they felt the service had high standards and was professional. One staff member said, "We have a duty of care to people. We are committed to the clients." Another staff member said, "I believe the service is of a very high

standard and all our clients and carers appear very happy to live or work at The Beeches. Carers enjoy their work and tend to stay a long time with the service which reflects their satisfaction with the organisation and the way it is managed."

The registered manager told us they kept up to date with current issues in the caring profession by accessing care related websites and attending external training events and meetings.

Systems were in place for the reporting of notifications to CQC and incidents that involved people had been reported to us as required.

Throughout the inspection we found the registered manager and staff we spoke with were open, honest and positive in their approach to the inspection process and where areas for improvements were identified took the appropriate action.