

Healthcare Homes Group Limited

Beaumont Park Nursing and Residential Home

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

Beaumont Park Nursing and Residential Home (Beaumont Park) is a residential care home providing personal and nursing care to 25 people at the time of the inspection. Beaumont Park accommodates up to 46 people in one adapted building across two floors.

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

People told us they felt safe and well cared for by the staff team. People's relatives were also very happy with the care and told us staff were caring and kind and did not rush their family members when providing care.

One relative told us, "The staff I cannot fault. They are lovely, any concerns, I phone up and can speak to the senior carer. It is very reassuring as it was a big step for [My family member] to go into a care home."

People were supported by staff who understood how to keep them safe. Staff had been given training in safeguarding and the specific conditions people were diagnosed with. This helped to ensure they had the correct knowledge and skills to carry out their roles.

People were given medicines correctly and on time and supported to access various health professionals as required. Relatives told us that staff kept them informed about all changes to their family member's care and medical needs.

Staff supported people to maintain regular contact with their relatives and friends by using visiting pods in the garden when the government guidance allowed. Relatives spoke very highly of how welcoming, warm and clean the pods were. When face to face visits were not possible, people were supported to use telephone and video calls to stay in touch with their relatives.

People and relatives were very happy with how the service was being managed and felt happy to make contact with the manager or staff team to raise concerns should they have any. People's views were sought through conversation and phone calls to their relatives. This was used to make any changes or improvements to the care that was needed.

People were supported by staff who had been checked for suitability work in their role by the manager and who were supported to have regular training and checks on their competency.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was requires improvement (published 10 December 2019) and there were multiple 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

We received concerns in relation to the management of the care home, staffing levels and training, infection prevention and control and people's care needs. As a result, we undertook a focused inspection to review the key questions of safe and well-led only to review these concerns and follow up on the previous breaches of regulation.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We found no evidence during this inspection that people were at risk of harm from the concerns raised. Please see the safe and well-led sections of this full report. The provider had taken action following the last inspection to make improvements where required.

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.

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 Beaumont Park Nursing and Residential Home on our website at www.cqc.org.uk.

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?

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.

Beaumont Park Nursing and Residential Home

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.

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

This inspection was carried out by two inspectors.

Service and service type

Beaumont Park 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 did not have a manager registered with the Care Quality Commission. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided. An operations manager was currently acting as the manager for the service.

The provider confirmed that a new manager had been recruited and was due to begin imminently.

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. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

During the inspection

We spoke with four people who used the service and five relatives about their experience of the care provided. We spoke with ten members of staff including the nominated individual, manager, senior care workers, care workers, catering staff and housekeeping staff. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included four people's care records and medication records. We looked at three 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.

We looked at training data and quality assurance records. We spoke with two professionals who regularly visit the service and Healthwatch England. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

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.

Staffing and recruitment

At our last inspection staff were not effectively deployed to support people to stay safe and to meet their needs in a timely way. This was a breach of Regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 18.

- People told us there were enough staff on duty to safely meet their care needs. One person told us they were happy with their care and felt their care needs were met and call bells were answered quickly. Another person told us, "The [staff] are lovely and I couldn't ask for better, they are always checking on me and I love to stay in my room with the door open."
- Rotas and shift plans showed that there were sufficient staff on duty and we observed staff taking their time to support people who needed extra support without rushing them.
- Staff were deployed in ways that enabled them to spend time with people and ensure their care needs were met. One relative told us how staff took time to chat to their family member. They said, "[My family member] says staff pop in their room and chat to them and when I come at the back of the building waiting to visit I can see [My family member] chatting with a couple of carers."
- The provider ensured all staff had full recruitment checks prior to starting employment, including checks on employment history, criminal record checks and references. This ensured staff were suitable and had the appropriate skills and experience for the role.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they had no concerns about their safety or the care. One relative said, "The care is excellent...I can't fault the carers."
- Staff told us they received training in safeguarding and abuse awareness. Staff were able to demonstrate a good understanding of how to keep people safe and how to identify, report and record any concerns. This included an awareness of reporting concerns externally to the local authority and the Care Quality Commission or police.
- The manager had reported any accidents and incidents and monitored staff practices. They took action where required to ensure people were safe.

Assessing risk, safety monitoring and management

- Staff had a good understanding of the risks associated with people's various conditions and the

equipment and resources available to reduce the risk of avoidable accidents occurring.

- Each person had detailed risk assessments and care plans in place. Staff told us the information given in care records provided them with good guidance about how to safely support people's needs. One relative explained how their family member was supported to manage their mental wellbeing due to the staff knowing them well and having built a good relationship. This enabled them to communicate with the person and act quickly when they observed signs of distress.
- Risks included falls, behavioural changes, skin care to prevent pressure damage and choking. One staff member told us how they reviewed eating and drinking risks every week and did not make any changes without referral to specialists for advice on nutritional and dietary needs. Another staff member told us how they thought it was brilliant that people who were cared for in bed had no pressure damage to their skin, which was a sign of good care.

Using medicines safely

- People received their medicines as prescribed. Staff received training on medicine administration and management regularly checked their skills and knowledge.
- Staff were able to explain the processes and safeguards in place to ensure that medicines were administered correctly and in a timely manner. They also understood what action to take in the event of any medicine errors.
- The manager conducted regular audits of medicine administration and records and took action to follow up any areas of concern.

Preventing and controlling infection

- The service was clean and odour free. During the inspection staff were observed cleaning and sanitising surfaces on a regular basis.
- Staff wore appropriate personal protective equipment (PPE) and had received infection prevention and control training and COVID-19 specific training.
- The provider had an infection control policy in place and had assessed the risks related to COVID-19 and put measures in place to reduce these risks.
- Visitors to the service had their temperature checked and asked to confirm they had not been unwell. PPE was provided.
- The provider had created an outside pod for when visits were able to start again after the national lockdown comes to an end.

Learning lessons when things go wrong

- Staff were aware of lessons learnt and how they used reflection sessions to consider ways of improving practice to minimise the reoccurrence of any incidents.
- The manager shared these lessons amongst the team to help aid learning and develop skills and knowledge. The manager was also open with external health professionals when reviewing incidents.
- Risks, incidents and accidents were closely monitored by senior staff and management and these were analysed to determine areas for change or improvement which could minimise the likelihood of repeat events.

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 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.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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

At the last inspection the service had not identified or met the needs of people living with dementia in relation to distressed behaviour. Effective analysis of factors affecting the staffing numbers required to meet people's needs had not been carried out. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- People and relatives gave positive feedback about their experience of the care received. One person said, "The staff are wonderful, I really appreciate what they do. I have been asked what I would like and I wouldn't like for my meals." A relative told us, "[Staff] are very, very caring and couldn't be nicer. They get doctors quickly and inform me every time, they are good with video calls to keep in touch."
- The manager had developed an open, person-centred approach to care and promoted these values to the staff team. They understood the requirement to be open about incidents and accidents and reported these in a timely manner. Staff had received training in dementia awareness and showed a good understanding of how this impacted people's day to day lives. Staffing levels had been reviewed and continued to be monitored to ensure there was sufficient staff for engagement and activities in addition to direct care.
- Staff were really happy in their roles and told us they enjoyed working at the service. One staff member told us, "[The manager] who has been here has been brilliant, a breath of fresh air. Boosting staff morale instantly so really nice to be able to speak to them if we did have any concerns and they would act on them instantly." Another staff member told us, "This is the loveliest place I have ever worked."

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

- The manager had a good understanding their role and how to support the staff team to develop their skills, confidence and knowledge. They used regular audits to monitor the quality of care and developed action plans for making improvements.
- Staff were supported to continue with their training which helped to keep their skills and knowledge up to

date with current best practice. One staff member said, "[The manager] has been fantastic, they have pushed me to achieve a promotion and do my qualifications and have been very supportive in my progression."

- Staff demonstrated a good understanding of their roles to ensure people were provided with safe and person-centred care while continuing to manage any associated risks.
- The manager had implemented a continuity plan with focus on managing the risks of the COVID-19 pandemic to ensure the quality of care was maintained. The submitted notifications to the CQC of all notifiable events.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The manager had sought the views of people and their relatives through means of face to face chats, phone calls and video calls. Relatives told us they would be happy to raise any concerns with the manager or staff team. Relatives who had raised a concern said their concerns were resolved quickly and to their satisfaction.
- The provider correctly displayed their rating on their website and in the home and offered up to date information regularly to people and relatives and staff about changes to COVID-19 guidance and government requirements.
- The service worked with external professionals where required such as the tissue viability nursing team and speech and language therapists, clinical commissioning groups and GP's in order to ensure people's needs were met correctly and safely.