

Dale Care Limited

Beechfield Court

Inspection report

Beresford crescent
Middlesbrough
TS3 9JW

Date of inspection visit:
27 April 2021
28 April 2021
30 April 2021

Date of publication:
17 May 2021

Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Beechfield Court is an extra care housing service which can support up to 75 people. People using this service lived in their own flat within a large building, or in a bungalow within the grounds of the main building. Beechfield Court provides a service to people with a range of needs including those living with physical health needs, mental health conditions and/or dementia type conditions.

Not everyone living at Beechfield Court received personal care. The Care Quality Commission only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of this inspection 61 people were in receipt of a personal care service.

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

Staff followed safeguarding procedures. There were enough staff on duty. People were happy with their care. Care records were person-centred. Improvements to medicine records were carried out following feedback during inspection. Guidance for infection prevention and control needed to be further embedded.

Good improvements had been made since the last inspection. Staff said they felt supported. Procedures to monitor the quality of the service were in place. We made a recommendation about monitoring systems for medicines and infection prevention and control. Surveys had been carried out and reflected the positive care which people received.

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 1 April 2020). 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 carried out an announced comprehensive inspection of this service on 18 February 2020. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment in relation to medicines.

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 required 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 Beechfield Court 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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Beechfield Court

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

An inspector and Expert by Experience carried out this inspection. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

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.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. 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 five people who used the service and one relative about their experience of the care provided. We spoke with six members of staff including the registered manager, an area manager and four care workers.

We reviewed a range of records. This included five people's care records and seven people's medication records. We looked at four staff files in relation to recruitment and the training records for all staff. 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 requires improvement. At this inspection this key question has now remained the same. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Using medicines safely

At our last inspection medicines were not safely managed. This was a breach of regulation 12 (Safe Care and Treatment) 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 12.

- The management of medicines had improved. Some areas needed continued improvement. The registered manager had arranged further training to address this.
- On a small number of occasions, two people received their medicines late. No harm had occurred. At inspection, the registered manager reviewed staffing and put additional checks of these medicines in place to resolve this issue.
- Dates of opening for topical creams and ointments for some people had not been recorded. At inspection, new procedures were put in place for staff to follow. Quality assurance checks were reviewed to include review of topical creams and ointments..
- Care plans were in place to support people with their medicines. Staff training in medicines was up to date. People said they were happy with the support they received with their medicines.

Systems and processes to safeguard people from the risk of abuse

- Staff understood and followed the procedures in place to minimise the risk of harm to people.
- Staff training in safeguarding was up to date. Handovers between staff took place every day to ensure staff were kept up to date about people's needs.
- People said they felt safe during their care. One comment included, "We are very happy living in Beechfield Court. The carers are good. We always feel safe."

Assessing risk, safety monitoring and management

- Personalised care records were in place. Risks had been regularly reviewed. Two people's care records were updated following feedback during inspection.

Staffing and recruitment

- There were enough suitably trained and skilled staff on duty to care for people safely. Good recruitment procedures were in place.

Preventing and controlling infection

- Guidance relating to infection prevention and control needed to be further embedded to reduce the risk of cross infection.
- Staff had sufficient access to PPE. Training in infection prevention and control was up to date.
- Outbreaks of infection had been effectively managed. Regular testing of staff was carried out.

Learning lessons when things go wrong

- The service had improved since the last inspection. An action plan was in place to support continued improvement across the service.
- Lessons had been learned when incidents occurred. Action had been taken to minimise the risk of reoccurrence. Regular reviews of accidents and incidents took place by the provider.

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.

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; Continuous learning and improving care

- Notifications about incidents taking place at the service had been submitted to the Commission when required. There was evidence about learning from these incidents. The registered manager was responsive to feedback, addressing any issues and putting improved practices in place.
- Quality assurance measures were largely effective in monitoring the overall quality of the service provided. There were some inconsistencies with measures in place to review medicines and infection prevention and control.

We recommend the provider reviews quality monitoring for medicines and infection prevention and control.

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

- Staff at all levels had the skills, knowledge and experience to deliver a good service. People said staff were 'lovely' and 'caring.' One comment included, "The girls [staff] are lovely. There is always someone around if you need them. They always have time to talk with me."
- People and staff said the registered manager was visible. Their feedback was listened to acted upon. Care was in line with the values of the organisation.

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

- Feedback had regularly been sought from people, staff and professionals and used to shape and improve the service.
- Recommendations from health professionals had been implemented. This had led to positive outcomes in people's care.