

Beechdale Care Limited

# Beechdale Manor Care 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

Beechdale Manor is a residential care home providing personal and nursing care to 60 people aged 50 and over at the time of the inspection. The service can support up to 65 people. The service accommodates people in one adapted building which is set out across three floors, with wheelchair accessible ramps leading onto a communal garden area with seating. The ground floor accommodates people who have a higher level of mobility and less complex needs. The first floor specialises in providing care to people living with dementia. The second floor provides care and support for people with more complex and palliative care requirements.

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

At the last inspection we had concerns about the deployment of sufficient numbers of competent staff across the service, the management of medicines and the assessment of risk for people using the service. These concerns have now been addressed. The registered manager had a clear action plan to continue to improve in these areas.

At the last inspection we found that staff were not sufficiently deployed across the service. People told us, and records showed us that this had improved. Staff were recruited safely to ensure they were of good character.

People's health and social care needs were clearly documented on a new electronic system. This allowed clear guidance for staff to follow. The registered manager had a plan in place to improve the use of this system and use more effective electronic auditing.

There were safe and suitable arrangements and protocols in place for the ordering, receiving, storing and disposal of medicines. Staff were trained in the use of and dispensing of medicines.

People felt safe using the service. Staff knew who to contact if they were concerned about abuse. Staff were confident that the management team would respond to their concerns but knew how to use whistleblowing procedures if needed.

People told us they were happy with their care. Records showed that people were supported by a competent, well trained staff team.

The registered manager understood the requirements of their role. Staff and the registered manager had a clear vision to provide good quality care.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

Rating at last inspection and update

The last rating for this service was requires improvement (published 17 October 2019) and there were two breaches of regulations. 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 previous inspection risks

At the last inspection we had concerns about the deployment of competent staff across the service, proper and safe management and administration of medicines and not ensuring the effective assessment and management of risks to the health and safety of people using the service. We identified breaches of Regulation 12 (Safe care and treatment) and Regulation 18 (Staffing).

We completed this inspection, to assess if required improvements had been made. 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 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.

#### Enforcement and follow up

At the last inspection we identified breaches of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and Regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We found sufficient improvements had been made at this inspection, so the service was no longer in breach of these regulations.

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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.

# Beechdale Manor Care 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 an inspector, a Specialist Advisor Nurse, and an Expert by Experience. 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

Beechdale Manor 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.

### 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, clinical commissioning group, Nottinghamshire Fire & Rescue Service and other professionals who work with the service. We contacted Healthwatch for feedback on the service, Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

### During the inspection

We spoke with five people who used the service and 10 relatives about their experience of the care provided. We spoke with nine members of staff including the registered manager, nurses, the service administrator, senior care workers, care workers, maintenance staff, domestic staff and the chef.

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

### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data, staffing rota's, policies and quality assurance records. We spoke with one professional who regularly visits the service to gain their opinions.

# 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 the last inspection we were concerned about the deployment of sufficient numbers of suitably qualified and trained staff across the service. This was a breach of Regulation 18 of the Health and Social Care Act (Regulated Activities) Regulations 2014. We found sufficient improvements had been made so the service was no longer in breach of this regulation.
- People were supported by enough staff to keep them safe and meet their needs. There were enough staff deployed to provide support and respond to people's needs appropriately. The registered manager provided evidence of staffing levels in the form of rota's covering the previous six weeks, which showed that the home had sufficient levels of staff.
- We observed throughout the inspection that staff were always visible and available in the communal areas and people and relatives generally gave positive feedback in relation to this. One relative said, "I think there are enough staff, whenever I have been there never seems to be a delay in answering the call bells." When we reviewed the registered managers' audit for the response times to people's call bells, we found this to be the case. Another relative told us, "Staff are always visible, there always seem to be enough around. The care of my relative is fine, so I know there are enough staff."
- Staff were recruited safely, and appropriate checks were completed to ensure they were suitable to support vulnerable people. This included references and their full employment history.
- The registered manager was actively recruiting qualified nurses for the service, which they explained was challenging, but ensured they retained a regular number of agency nurses to work in the service who knew people well.

### Using medicines safely

- At the last inspection we were concerned about the unsafe management of medicines. This was a breach of Regulation 12 of the Health and Social Care Act (Regulated Activities) Regulations 2014. We found sufficient improvements had been made so the service was no longer in breach of this regulation.
- There were safe and suitable arrangements and protocols in place for the ordering, receiving, storing and disposal of medicines, including controlled drugs and medicines to be taken 'as required'.
- Staff involved in handling medicines had received recent training around medicines. The registered manager ensured that appropriate staff were trained and assessed as competent to support people with their medicines.
- Medicines administration records were checked after each medicine round so any errors could be quickly addressed to reduce the risk of a person missing their medicine. We saw there were robust reporting systems for any incidents or errors.

## Assessing risk, safety monitoring and management

- At the last inspection we were concerned about the effective assessment and management of risks. This was a breach of Regulation 12 of the Health and Social Care Act (Regulated Activities) Regulations 2014. We found sufficient improvements had been made so the service was no longer in breach of this regulation.
- We found that risks for people were clearly identified. With the exception of one person who had been recently admitted, and two people with complex conditions, where we found some details from their paper care plans had not been completely transferred over to the new electronic care planning system. We discussed these omissions with the registered manager at the time of inspection for them to address, this was completed after the inspection.
- The provider had invested in a new electronic care planning system, which we saw and staff told us, was working more effectively. This gave staff clear guidance to support people's risk of avoidable harm. Risk assessments undertaken included diabetes, falls, nutrition and hydration and skin integrity. Where people were identified at high risk of skin breakdown, pressure relieving mattresses and seating cushions were being used. We checked these were at the correct settings for people and well maintained, and found they were.
- Where people experienced periods of distress or anxiety, staff responded effectively and with compassion. For example, we saw that some people became very anxious at periods during the day. Staff spent time gently and sensitively reassuring and comforting these people both with verbal and physical contact.
- Equipment was well maintained and personalised for people. Emergency plans were in place to ensure people were supported safely in the event of a fire.

## Preventing and controlling infection

- We saw that staff adhered to infection prevention and control procedures such as using personal protective clothing and equipment (known as PPE). Staff told us that PPE was readily available, which we observed during the inspection and we also found that bathrooms contained soap and hand towels in addition to visible instructions about correct hand washing techniques. The home appeared visibly clean.
- Comprehensive cleaning and maintenance schedules were in place to help ensure these standards were upheld.
- 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. In relation to this, one relative told us, "They are fully compliant regarding Covid-19 safety, following the guidelines, using full PPE, they couldn't have done more."
- 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. In relation to this one relative we spoke to told us, "I have been in a lot of homes, and at Beechdale Manor all you can see and smell is cleanliness".
- 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.

## Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse. The manager had ensured that all staff had received training about how to protect people from abuse.
- Staff had access to policies which provided guidance and during our conversations demonstrated an awareness of the type of concerns they would raise, who they would report them to and confirmed they would have no hesitation in doing so.



### Learning lessons when things go wrong

- The registered manager had a robust auditing system for the analysis of all events so that action could be taken to reduce the chance of the same things from happening again.
- Staff knew how to report and respond to incidents and accidents. Accidents and incidents were reviewed, and learning was shared across the staff team during daily handovers, and by the implementation of 'flash meetings' where key information was shared with the staff team. Staff told us this had been particularly helpful in times of rapid change during the Covid-19 pandemic.

# 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.

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

- The service was led by a committed registered manager, supported by a team who strived to deliver the best person-centred care they could.
- The majority of people we spoke with told us they felt the service was well managed, one person said, "Yes, I've got no complaints, they look after me well." A relative told us, "I would go to the manager with any issues. I have a lot of conversations with them. They have helped with my relative's wellbeing. They are very supportive and mindful of confidentiality, clearing things with my relative first."
- The service were proactive in their approach to people's health and wellbeing. We saw effective interventions that had resulted in positive outcomes for people. For example, we received positive feedback from a professional who works with the service who commented; "The registered manager put preventative measures in place on the same day a person had a fall, and then sent through a detailed report to me. This showed me the level of interaction with each individual person, which is rare in my experience. The staff team had also been so attentive with any changes in people and had taken appropriate actions."

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

- The registered manager had a clear governance system to ensure that good quality care and support was provided, as part of their approach to continuous improvement. This was monitored by the provider who also undertook regular quality assurance visits to the service. The registered manager understood their regulatory responsibilities to notify us of incidents at the service.
- People and their relatives told us that the registered manager and staff team were approachable. One person told us, "I'm well cared for and the staff are lovely." A relative said, "The manager runs the place well. I respect them greatly; they are honest and straightforward, and I can be very frank with them."
- Staff told us and we saw, they were enthusiastic about the plans and ambitions for the service of the provider and registered manager. One staff member told us, "It is a really good team here, very positive and supportive."
- The registered manager was aware of their duty of candour and had been open and transparent when issues had arisen.
- The service displayed their previous rating in the entrance as they are required to do.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service ensured they involved people and their relatives as partners in their care. For example, a relative told us, "We had a look round the service first, the aura and feel to me was wonderful, not contrived. The registered manager was really helpful, he explained everything, what they offered. The tearoom was lovely, the staff were very helpful, they were really good."
- There were opportunities for people who used the service and their representatives to share their views about the quality of the service provided. A complaints and concerns policy was on display in the entrance hall. People told us there were regular meetings at the home that the registered managers and staff attended, although these had been suspended due to the pandemic.
- Surveys were sent out regularly to people and relatives to gather feedback about the quality of the service being provided. People's views were listened to, and improvements made when required.

Continuous learning and improving care; Working in partnership with others

- A health professional we spoke with told us communication with staff was good, and that any direction or clinical advice given was followed. The registered manager was actively seeking to work with other organisations and individuals to improve the quality of care or find new opportunities for people and staff. We saw that the service had accessed independent advocacy support for people who had no family or friends to act on their behalf or in their best interests.
- We saw referrals made for people to a wide range of health, social care and voluntary sector teams in the local area. This showed active engagement and effective partnership working.