

Brightholme Care Services Limited

Beechside Residential Care Home

Inspection report

88 Beech Lane
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Liverpool
Merseyside
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Tel: 01517246606

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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

About the service: Beechside is a residential care home that was providing personal care to 36 people during our inspection. Some of the people required support as they were living with dementia. The home is purpose built with single bedrooms and several shared communal spaces.

People's experience of using this service:

Beechside is a family run service that promoted the ethos of providing a homely environment for people to live in. People liked living there and felt safe and cared about. One person commented, "I am happy here" Relatives told us they felt confident and happy in the care their relatives received. There was a relaxed, friendly and caring atmosphere throughout the inspection. People responded well to staff interactions and felt confident to stop and have a chat with all staff.

People were protected from abuse and the risk of harm. Staff understood their responsibilities for keeping people safe and reporting any concerns that arose. Risks for individuals were identified and action taken to minimise them. People got their medication on time and as prescribed.

Robust recruitment practices were followed to check staff were suitable to work with vulnerable people. Staff understood their roles and responsibilities and had received training to help them support people safely and well. There was enough staff available to provide the support people needed.

People received the support and care they needed from staff. Staff were responsive to people's changing needs and worked well with other professionals to support people.

Staff understood and respected people's right to make decisions. Where people had their liberty legally restricted staff took steps to minimise the impact this had on the person. Staff were respectful when supporting people and skilled at changing their approach in accordance with people's individual choices and communication styles.

The registered manager is also one of the providers of the service. The providers promoted a family atmosphere at Beechside. They were liked and trusted by people living there relatives and staff. Everyone told us that the providers were approachable and took any concerns or queries seriously. They spent time assessing the needs of the service and had a continual improvement plan in place that they were actively implementing.

Rating at last inspection: Good – 28 July 2016

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as

per our re-inspection programme. If any concerning information is received we may inspect sooner.

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

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 remained safe
Details are in our Safe findings below.

Is the service effective?

Good ●

The service remained effective
Details are in our Effective findings below.

Is the service caring?

Good ●

The service remained caring.
Details are in our Effective findings below.

Is the service responsive?

Good ●

The service remained responsive.
Details are in our Effective findings below.

Is the service well-led?

Good ●

The service remained well led.
Details are in our Effective findings below.

Beechside Residential 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Service and service type:

Beechside Residential Home is a care home. People in care homes receive accommodation and nursing or personal care. 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 carried out on 5 & 8 March 2019, the first day was unannounced and the second day was announced.

What we did:

Prior to our visit we looked at any information we had received about the service including any contact from people using the service or their relatives and any information sent to us by the provider. This included the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We also spoke to the local authority to ask them to share any relevant information they held about the service.

During the inspection we looked around the premises and met with many of the people living at the service, eight of whom we spoke individually with. We spoke with 10 relatives of people living or who had lived at there and with 12 members of staff who held different roles within the service. We spent time observing the day to day care and support provided to people; looked at a range of records including medication records, care records for four of the people living there, recruitment records for three members of staff and training records for all staff. We also looked at records relating to health and safety and quality assurance.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. People were safe and protected from avoidable harm. Legal requirements were met.

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

- People living at Beechside and their relatives said the service was safe. One relative commented, "I never walk away worrying." Another relative said, "He considers this his home, he feels safe."
- Staff received training in understanding and reporting safeguarding. They were knowledgeable and confident about reporting any concerns that may arise.
- Safeguarding concerns were reported and managed effectively by the registered manager.

Assessing risk, safety monitoring and management.

- Regular internal and external safety checks were carried out on the environment and equipment to ensure they were safe to use.
- Plans were in place for dealing with emergencies and staff knew what action to take if an emergency arose.
- Risks to people's individual's health and safety were assessed and information recorded for staff to follow to reduce risk factors.

Staffing and recruitment.

- A thorough recruitment process was followed to ensure staff were suitable to work with people who are vulnerable. Prior to commencing work a series of checks were undertaken on the applicants and an interview was undertaken.
- There were enough suitably skilled and experienced staff available to support people. People living at Beechside, their relatives and staff said there was always enough staff available to provide the support people needed. One relative said, "You can always find someone."
- People were supported by staff who knew them well. The service had a consistent staff team and did not use agency staff.

Using medicines safely.

- Medication was safely stored and administered.
- Three senior staff were responsible for administering all medication including creams. They had received training in medication and knew how to administer it safely. The consistency of staff managing medications reduced the risk of errors occurring.
- Records showed people received their medication on time and as prescribed.
- On the first day of the inspection we recommended that recording of where patches and creams were applied should be put into place and risk assessments completed for emollient creams and 'as required medication.' This would help in the event unfamiliar staff needed to support people with medication. By the second day of the inspection these had been completed to a good standard.

Preventing and controlling infection.

- Systems were in place and followed to minimise the risk of cross infection.

- People told us Beechside was kept clean and tidy. One person told us, "They are good with the cleaning and washing." Our observations confirmed this.
- Staff had access to disposable gloves and aprons and to colour coded cleaning equipment. We observed they used these appropriately.

Learning lessons when things go wrong.

- Accidents and incidents were reported, and action taken where possible to minimise the risk of them recurring.
- The providers had recently recognised that the needs of people living at Beechside were changing and this was affecting how people used the space within the service. They had taken steps to make the environment more accessible for people living with dementia.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law
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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met and found that they were.

- People's capacity to understand and make decisions had been assessed. Where the person could not consent to living at Beechside the registered manager had applied to the local authority for a DoLS. Key staff knew who had a DoLS in place and how to support people with this.
- Where people had put a lasting power of attorney (LPA) in place to give someone the ability to make decisions about their health or finances this information was clearly recorded within their care file and senior staff were aware of it.
- People said they were supported to make everyday choices for themselves. For example, how they wanted to spend their time, what they wanted to wear or eat. Throughout the inspection we observed staff offering people choices and respecting their decisions.
- People's care needs were assessed and a care plan was in place to advise staff on how to meet the person's support needs and choices.
- Care plans were reviewed regularly and changes to people's needs were recorded.
- Staff had a good understanding of individual's support needs and worked well with people to meet these.

Staff support: induction, training, skills and experience.

- Staff received the training and support they needed to carry out their role effectively. Feedback we received showed staff had the skills and experience to support people safely and well. A relative said, "I like that they are trained in dementia."
- All staff undertook training to help them understand the needs of people living at Beechside. The providers had invited one of the external activity providers to training session on understand dementia, so they could understand people's condition more.
- A training plan was in place for the forthcoming year to ensure staff received the training they needed. Staff told us they received a lot of support to further their knowledge and skills. One member of staff said, "I have never had an employer that interested." Another told us the providers had offered to support them undertake an extended external course that would benefit their work.

Supporting people to eat and drink enough to maintain a balanced diet.

- People received the support they needed to meet their nutritional needs. Everyone we spoke with was complementary about the meals. One relative said, "It's appropriate for their generation. The smells evoke memories." Another told us their relative was eating much better since moving to the service explaining, "[Relative] put on weight already. [Relative] has two breakfasts because they want to."
- People had access to facilities for making a drink at any time and we saw people having snacks throughout the day. Meals were freshly made on the premises and kitchen staff were enthusiastic about providing fresh, appealing meals for people. When needed, people received support to eat their meals and monitor their food and drink intake.
- On the first day of the inspection the lunchtime meal was noisy and chaotic. On the second day of the inspection the registered manager and staff had taken action to ensure this was a calmer more pleasant occasion for people.

Adapting service, design, decoration to meet people's needs

- Beechside provided people with a safe, secure environment that met their needs. This included plenty of safe places to walk around including space for people who used mobility aids. Adapted showering and toilet facilities were also available.
- People told us they were able to bring their own furniture if they wished and we saw that people's bedrooms were personalised to meet their needs and choices.
- The providers had recently made changes to the way lounge areas were used at the service. This was to make sure people living with dementia would have access to the garden and more space to walk around in if they chose.
- An on-going development plan was in place for adapting the environment to meet people's changing needs. This included a new call bell system and ordering new signs for people rooms.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support.

- A visiting health professional told us, "I think this is the best, I am impressed with here." They confirmed that staff knew about people's health care needs and sought and followed health advice for people."
- People told us that staff were vigilant about their health and always sought health care advice for them if needed. Relatives confirmed this. Records showed that staff worked well with other agencies to support people and followed any advice given.
- Care plans contained information about people's healthcare needs and staff were knowledgeable about how to meet these. Where needed staff monitored people's health via their care records, risk assessments and daily records.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People living at Beechside said they really liked the staff team. Their comments included, "The majority are lovely, I love them," "This is wonderful," and "I am quite happy here I wanted company. We all get on, staff are nice."
- Relatives of people living at the home consistently told us that staff were extremely caring towards people living there. Their comments included, "I like that I see staff being tender, caring towards people even when they don't know I am there. I recommend it to others." "I feel they love [my relative] it's the next best thing to home." And "It's like sending your Mum to yourself the exact care you want, warm and caring, a lot of respect."
- Beechside is a family run service and the providers promoted a family atmosphere. A relative told us, "It's the little things, a card and gift on their birthday, Christmas." We observed that staff had built positive warm relationships with people. We also saw that all staff stopped and spoke with people and on several occasions, we saw people's face light up when talking to staff.
- A member of staff said, "They become your parents or grandparents. It's like home from home. You look for things you have in common, talk about poetry, travelling." They explained how they got to know people and respected the person's personal boundaries. We saw that this was followed in practice. For example, staff consistently called people by their preferred name, addressing people as 'Mrs' or by a shorted version of their first name as preferred.
- Staff took time to get to know people's individual choice and lifestyles. One person liked to wear headphones and we saw that staff always made sure these were in place for them. Another person had a doll and the registered manager had bought a cradle for the person's room which their relatives and the person greatly appreciated.
- Peoples diverse needs were respected. The providers arranged for local churches to visit people if they wished to have communion or take part in a service.

Supporting people to express their views and be involved in making decisions about their care

- Relatives said staff were observant of people and worked hard to meet their needs and choices. One relative said, "They notice things." Another relative said, "They are like a gift from God. They (people living there) are allowed to be themselves."
- We met one person living at the service who was unable to go out alone for safety reasons. We asked staff how they supported the person with this and they all responded that "We go with [person] they explained that even if they went for a short walk outside this meant the person felt happier."
- Relatives told us that prior to moving in a senior member of staff had met with the person and family to discuss their care needs. One relative told us that the person had been invited to attend a music session and eat lunch before deciding to move in. Another relative told us the registered manager had been "Very

reassuring," and made sure all the equipment the person needed was in place.

Respecting and promoting people's privacy, dignity and independence

- People could access all shared areas of their home and we saw that some people liked to walk around visiting different living areas. A relative said, "I like that there are no restrictions," and said they liked seeing people sitting in the office with staff if they chose to do so. Another relative told us they had visited in the middle of the night and one person was sitting in their pyjamas with staff, they said, "It's not regimented."
- Staff were skilled at supporting people who became a little unsettled. We saw staff distracting people in a positive way. For example, offering a cup of tea, chocolate biscuit and a chat.
- People's privacy and right to confidentiality was respected. Staff obtained permission before supporting people, knocked on their door before entering and stored confidential records securely in the office.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- The providers were embracing technology as a way to improve the experience of people living at the service. Recent purchases had included a lift that spoke to advise people which floor they were at, smart speakers and WIFI throughout the service.
- A number of external people were employed to provide people with a variety of activities they may enjoy. This included, music therapy, chair exercises, poetry reading and hairdresser days. In addition, staff supported people with activities including gardening, baking and singing.
- We observed one of the music and movement sessions and saw that people were actively engaged and enjoying themselves. .

Improving care quality in response to complaints or concerns.

- A complaints procedure was in place and accessible to people via a notice board and the service user guide.
- Everyone we spoke to said they would feel confident to raise a concern or complaint. One relative explained the provider had told them "If there is anything at all, even if it's not a good comment I want to hear it."
- One written complaint had been received by the provider since our last inspection and had been thoroughly investigated. This had included acknowledging the complaint, carrying out a thorough investigation, putting an action plan into place to resolve the issue and ensuring it was followed. Throughout the process the provider had kept in touch with the complainant to update them. This had included writing and sending photographs to them. This robust response showed that the provider takes complaints seriously, learns from them and takes action to improve.

End of life care and support

- A relative of a person that had received end of life care at the service told us, "They [staff] carried on with dignity and respect. Calm and considered the needs of the relatives."
- Staff had received training in providing end of life care and took a compassionate approach to providing this.
- Nobody living at the service was receiving end of life care during our inspection.

Is the service well-led?

Our findings

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- Beechside has a registered manager who is also one of the providers of the service. Both the registered manager and provider spend a lot of time at the service and led by example. It was evident that people living there, staff and visitors knew them well and found them open, trustworthy and approachable.
- Staff all took a person-centred approach to supporting people. This came from the providers who encouraged staff via discussions and their development plan to regularly ask themselves if the care they provided would be safe, effective and responsive enough for their own Mum.
- Several relatives we spoke with told us that they had recommended Beechside to other people and felt that the values within the service meant their relative was safe and cared about as well as cared for.

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

- Beechside was well led by experienced providers and an experienced senior team. They spent time assessing their service and planning future improvements to benefit people living there.
- The registered manager was clear about her responsibilities to notify authorities of incidents that may occur. Risks to people were taken seriously, discussed and acted upon.
- Staff were committed to the ethos of the service. The development plan stated, 'They are now our extended family'. It was evident in our observations and discussions that this ethos was adopted within the service.
- In addition to meeting people's care needs it was important to staff that people felt happy and safe. Staff in all roles felt valued and knew how their role impacted on the quality of service people received.

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

- One person described the providers as, "Just lovely" a relative told us, "Nothing is too much trouble, they are kind.". Everyone we spoke with told us they found senior staff, open and supportive.
- Senior staff spent a lot of time engaging with people living, working and visiting the service. People's views were gathered on an informal basis and acted upon.
- An equality and diversity policy was in place and staff had received training. This was translated into practice within the service. Care plans reflected people's individual needs and choices and staff were aware of people's needs, choices and lifestyles. This included people being supported to have visits from religious groups. Consideration was given to how people's disability or condition affected them, and action taken to support them. For example, one person had signs placed near to their bedroom to help them find their way around independently.

Continuous learning and improving care

- The providers had an on-going development plan in place. This demonstrated that they assessed the needs of their service and actively looked for improvements they could make.
- Recent assessments of the service had highlighted a need to make the service easier for people living with

dementia to use and navigate. The providers had been pro-active in making a number of changes and had a clear plan in place for continuing to improve their service.

- Checks on the quality of the service were undertaken, however these were not always formal or recorded. Whilst they had resulted in a number of improvements to the service other areas had not been noted and addressed. This included areas we highlighted on day one such as mealtime arrangements and medication recording. Both providers were pro-active at taking positive action to improve these areas immediately. A more formal auditing process would benefit the service in highlighting smaller areas for improvement.

Working in partnership with others

- There was an open and transparent culture within the service. Everyone's views were welcomed and listened to. Where improvements were identified these were acted upon.
- The providers attended external meetings to meet with providers of other services in the local area and share good practice and knowledge.
- Visiting professionals told us that senior staff listened to them, worked well with them and acted upon any advice they gave.