

# HC-One Limited

# The Beeches

### **Inspection report**

Yew Tree Lane Dukinfield SK16 5BJ

Tel: 01613384922

Website: www.hc-one.co.uk

Date of inspection visit: 30 August 2023 31 August 2023

Date of publication: 07 November 2023

### 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

The Beeches is a residential care home providing personal care to up to 32 people. The service provides support to adults with physical disabilities. At the time of our inspection there were 32 people using the service.

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

People felt safe and were supported by a consistent staff team. Appropriate risk assessment and checks were in place to help keep people safe. The service was clean throughout and there was a regular cleaning schedule in place. People were supported and encouraged to have visitors at any time.

People's needs were fully assessed during the admissions process. Staff took time to get to know people and their preferences.

Staff were kind and caring and supported people to be involved in their care. Staff supported people to maintain their independence and encouraged them to do tasks independently. Staff treated people with dignity and respect.

People were supported to take part in activities which they enjoyed. Staff supported people on regular trips within the local area. The registered manager responded appropriately to complaints and took action to address any issues. Staff had received training in end of life care to support people at the end of their lives.

People and staff had the opportunity to give feedback through regular meetings. The registered manager understood their responsibilities and regular audits were completed at the service.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

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

### Rating at last inspection

This service was registered with us on 27 August 2021 and this is the first inspection.

The last rating for the service under the previous provider was good, published on 11 March 2021.

### Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 COVID-19 and other infection outbreaks effectively.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

# 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 effective?	Good •
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Good •
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our well-led findings below.	



# The Beeches

### **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 Health and Social Care Act 2008.

### Inspection team

The inspection team consisted of 2 inspectors 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

The Beeches is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. The Beeches is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

### Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

#### 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 (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and

improvements they plan to make. We reviewed information we had received about the service since their registration. We used all this information to plan our inspection.

### During the inspection

We reviewed 4 care plans, medication records, health and safety records and audits of the service. We spoke with 8 staff including care assistants, an activity coordinator, the deputy manager and the registered manager. We spoke with 10 people living at the service and 3 relatives.



### Is the service safe?

# Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm. This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from the risk of abuse. Staff had received training in safeguarding and the signs of abuse.
- Staff appropriately reported any safeguarding concerns to the local authority.
- People told us they felt safe at the service. One person told us, "It's very safe, they (staff) are very nice people. This is my life. It's 100% good. This is my family and they are really good to me. I have 100% confidence and I'm delighted to be able to tell you how good it is and I mean that from the bottom of my heart."

Assessing risk, safety monitoring and management

- Appropriate risks assessments were in place regarding people's care and the environment. Additional risk assessments were in place regarding hazards in the service. Some people required their risk assessments to be updated, this was brought to the attention of the registered manager during the inspection.
- Staff conducted regular health and safety checks to ensure the safety of the service and the equipment within it.
- Staff conducted regular fire drills at the service. These were done at different times of the day to test staff responses during the day and night.
- The service was well-maintained throughout and any required improvements were addressed promptly.

### Staffing and recruitment

- Staff were recruited safely. All necessary pre-employment checks were completed before a member of staff commenced employment.
- Staffing rotas were developed in line with people's dependencies. There was minimal agency staff use at the service. Staff shortages were also covered by staff from other services ran operated by the provider. One person told us, "They [staff] come straight back to you if you need anything."

### Using medicines safely

- Staff administered medication safely. The provider used an electronic administration? record system which assisted oversight of the administration of medication.
- On the day of the inspection, we found a medication error had occurred the previous day. As the daily checks had not yet been completed this had not been identified. Once identified, the registered manager responded appropriately and reflective practice took place. People were not placed at risk due to this error.

### Preventing and controlling infection

• We were assured that the provider was preventing visitors from catching and spreading infections.

- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- 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.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- 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.

### Visiting in care homes

• People were supported and encouraged to have visitors. During the inspection, we spoke with relatives who regularly visited the service. There were no concerns about the ability to visit their relatives.

### Learning lessons when things go wrong

• Accidents and incidents at the service were recorded and regularly reviewed. The service utilised tools to monitor incidents and trends at the service. Root cause analysis was completed to drive learning and improvements.



# 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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

- People's needs were fully assessed prior to their admission to The Beeches. People were supported in line with their wishes. For example, people were supported to have showers when they liked.
- People had oral care plans in place to support good oral health and hygiene.

Staff support: induction, training, skills and experience

- Staff completed an induction period and regular training. The registered manager had good oversight of staff training compliance and staff were supported and encouraged to complete their training.
- The registered manager supported staff with regular supervisions and also updates in response to incidents and new guidance. Records of supervisions were stored on an online system which staff could access at any time for their own reflection.

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

- Staff supported people to eat and drink. Staff offered additional snacks to people who were at risk of losing weight. However, food and fluid charts did not always show that additional food and snacks were available after dinner. One person told us, "They [staff] feed me well, in fact I've put on weight since I came here."
- We received mixed feedback about the food available at the service. There was a selection of hot and cold food available at lunch and dinner time. Staff and people told us they did not always like the options available. When people did not like the food being served, other options were provided.

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

- Staff had good relations with the local nursing teams to assist in providing timely care to people at the service.
- Staff supported people to access other healthcare services, when required. People told us they had seen the chiropodist.
- Staff supported people to access emergency medical attention when needed. One person told us that staff had responded quickly following a fall and had kept them reassured and comfortable throughout.

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

- The Beeches had a homely feel throughout and people enjoyed sitting in the large lounge and dining areas and catching up with their friends.
- The home was well maintained, and improvements were responded to promptly. People had

personalised their rooms with their own items. One person told us, "You can bring any stuff in that you want."

Ensuring consent to care and treatment in line with law and guidance

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 MCA 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 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 appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff appropriately sought consent to care from people. Where people could not consent to care or elements of their care, best interest meetings were held and decisions made in their best interest.
- •Staff supported people in their best interests in line with national guidance. Staff arranged best interest meetings to decide whether it was appropriate to administer a person's medication covertly (hidden in food). The registered manager liaised with all relevant people and professionals and put clear guidance in place.



# 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant 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

- Staff treated people well. Staff treated people with kindness and respect. Staff had good rapports with people living at The Beeches and people were supported with good humour. One person told us, "We do a lot of laughing, that's the answer to most things."
- People knew how to get help and felt listened to by staff.

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

- People were involved in decisions about their care. Staff offered people support and respected when people declined and wanted to do things for themselves.
- Staff asked people how they would like to be supported and advised them on how they could support them.

Respecting and promoting people's privacy, dignity and independence

- Staff treated people with dignity and respect. Staff spoke to people with kindness and took the time to engage and get to know people better.
- Staff respected and promoted people's independence. People living at The Beeches had varying levels of mobility. Staff adapted their support to people's capabilities. One person told us, "I asked one of the carers if they thought I would ever walk again and they said, there's only one way to find out, and that's to try, so they took my hands and we walked together, so now I can walk with my frame and some help."



# Is the service responsive?

# Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Care plans were mostly personalised. Care plans contained sufficient detail to support people however they could be personalised further. Care plans included information around people's work, family and interests prior to moving into The Beeches.
- Notes relating to people's care were not always recorded contemporaneously.

### Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were met. Staff gave people the time they needed to communicate effectively. Care plan identified people's communication needs and how best to support them.
- A mobile library visited the service on a regular basis and people were able to access books in larger prints.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff supported people to engage in activities which were meaningful to them and enjoyable.
- The service had dedicated activity coordinators. They took time to get to know people personally so they could suggest and facilitate activities the person would enjoy. For example, organising outings to the local market hall so people could see how it had changed in the years since they had last visited.

Improving care quality in response to complaints or concerns

- The registered manager responded appropriately to complaints. There had been minimal complaints at the service. The management team innovatively looked for resolutions to concerns.
- People told us they felt able to speak to staff if they had any complaints. We observed that staff had a good rapport with people living at The Beeches.

### End of life care and support

• Staff supported people with end of life care. Staff were compassionate and understood what good end of life care looked like. Staff supported relatives to visit people at the end of their lives.

• People were supported in line with their preferences at the end of their lives, for example, staff played music which people enjoyed.
• Some staff had received additional training in the principles of end of life care.



### 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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- •The registered manager fully understood their role and responsibilities.
- The registered manager submitted notifications of injuries, events and death to CQC when required.
- The registered manager had a programme of audits in place which were reviewed and discussed with area managers to assist with their oversight of the service. Medication audits were conducted on a regular basis which provided increased oversight during the transition to an electronic medicines recording system.

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

- People were engaged in the running of the service. Staff felt well supported by the registered manager.
- The management team encouraged staff to share feedback about the service during regular team meetings and supervisions.
- People using the service shared their views at regular resident meetings.

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

- The registered manager promoted a positive culture throughout the service. There was a positive atmosphere throughout the service. Staff had excellent rapports with people.
- Staff worked well together to support people to have good outcomes and maintain their independence.

Continuous learning and improving care

- The service consistently reviewed incidents at the service and how they could improve.
- The home is due to have some refurbishments shortly which will include the allocation of a staff room and some redecoration.

Working in partnership with others

• Staff worked well with other health care professionals. The service told us they had a good working relationship with the local community health teams who completed a weekly ward round at the service.