

# MacIntyre Care Beulah House

## Inspection report

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Shropshire  
TF9 3BD

Website: [www.macintyrecharity.org](http://www.macintyrecharity.org)

Date of inspection visit:  
05 April 2017

Date of publication:  
04 May 2017

### 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

Beulah House is a small location providing accommodation for up to five people with learning disabilities and who require nursing or personal care. At this inspection five people were living there.

At the last inspection, the service was rated good. At this inspection we found the service remained good.

People continued to remain safe as staff knew how to recognise and respond to concerns of ill-treatment and abuse. There were enough staff to support people to meet their needs. The provider followed safe recruitment procedures when employing new staff members.

People continued to receive care that was effective. They were assisted by a staff team who were well supported and had the skills and training to effectively support people. People were supported to have choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service support this practice.

The support people received continued to be caring. People were supported by a kind and considerate staff team. Staff spoke about those they supported with warmth and respect. People were supported at times of upset and distress.

People continued to be involved in developing their own care and support plans. Regular reviews took place and accounted for any changes in people's needs. People's individual preferences were known by staff members who supported them as they wished. People and relatives were encouraged to raise any concerns or complaints.

Beulah House continued to be well-led. People were involved in decisions about their home and their suggestions were valued by the provider. Staff members believed their opinions and ideas were listened to by the provider and, if appropriate, implemented. The provider had systems in place to monitor the quality of service they provided and where necessary made changes to drive improvements.

Further information is in the detailed findings below.

## 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 remains good

### Is the service effective?

Good ●

The service remains good

### Is the service caring?

Good ●

The service remains good

### Is the service responsive?

Good ●

The service remains good

### Is the service well-led?

Good ●

The service remains good

# Beulah House

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 05 April 2017 and was announced. The provider was given 24 hours' notice because the location was a small care home for younger adults who are often out during the day; we needed to be sure that someone would be in.

This was a comprehensive inspection that was completed by one inspector.

We reviewed information we held about the service. We looked at our own system to see if we had received any concerns or compliments about the provider. We analysed information on statutory notifications we had received from the provider. A statutory notification is information about important events which the provider is required to send us by law.

We asked the local authority and Healthwatch for any information they had which would aid our inspection. We used this information as part of our planning.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

We spoke with one person living at Beulah House and spent time with everyone in the lounge area of their home. We also spoke with three care staff members and the registered manager. We looked at care and support plans for two people including individual assessments of risk and medicine administration records. We looked at records of incidents and accidents and quality checks completed by the registered manager and the provider. In addition we looked at the recruitment details of two staff members.

## Is the service safe?

### Our findings

People were protected from the risks of abuse and ill-treatment as staff knew how to recognise and respond to any concerns. One person told us they felt safe and protected at Beulah House. One staff member said, "If I witnessed anything I thought was wrong I would intervene immediately. I would support the person to ensure they were alright and document and report my concerns straight away." We saw staff had information available to them on how to report concerns to the Local Authority, the Care Quality Commission or the police. The provider had not needed to make any such reports but had appropriate systems in place to respond to concerns. We saw people were safely supported around their home and there were individual assessments of risk available. These assessments informed staff members how to safely support people.

Any incidents or accidents were reported by staff members and monitored by the registered manager and the provider's health and safety representative. This was to identify any trends or patterns which required further action. For example, the provider identified that new carpets were needed on the stairs to minimise the likelihood of trips or falls.

People told us, and we saw, there were enough staff to support them safely and to assist them to do what they wanted. The provider followed safe recruitment procedures when employing new staff members. These checks included obtaining references and checks with the disclosure and barring service (DBS). The DBS helps employers make safer recruitment decisions and prevent unsuitable people from working with others.

People received their medicines when they needed them and were supported by staff who were competent to do so. We saw one person being asked if they wanted their medicines. We then saw they were assisted by staff members to ensure they took them safely. Accurate records were kept of any medicines people took or declined.

## Is the service effective?

### Our findings

People were supported by staff who had the knowledge and skills to effectively meet their needs. New staff members undertook induction training which included health and safety, first aid and communication. Staff members also worked alongside existing staff members so they could get to know people and to see how they liked to be supported. Additional training was available for staff members to increase their existing knowledge. For example, the provider recognised and provided additional communication training. This was so they could meet the needs of someone moving into Beulah House. Staff members were supported by the registered manager and regularly attended one-on-one sessions where they could discuss aspects of their work.

People were supported to make decisions about their care, activities and day to day routines. We saw staff encouraging people to be involved in planning their days including what they wanted to eat, wear and do. We saw staff members asking for people's consent before they assisted them.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act 2005 (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The provider had made appropriate applications for people and were complying with any recommendations made. The provider had properly prepared staff members in understanding and applying the principles of the MCA.

People were supported to have enough to eat and drink to maintain their well-being. We saw people were supported to make healthy eating decisions. Food was prepared and presented as people wished which encouraged their appetite.

People had access to health care services when they needed it. These included foot health, GP, district nurses and opticians. The provider referred people for healthcare assessment promptly if required.

## Is the service caring?

### Our findings

People told us they were supported by staff they described as lovely and great. Staff members spoke about those they supported with kindness, warmth and fondness. We saw many interactions at this inspection which demonstrated how people mattered to those supporting them. People and staff members chatted and interacted in a calm and relaxed manner, sharing jokes and opinions where appropriate.

People told us they were involved in making decisions about their care. People were given the time and opportunity to choose what they wanted. They then communicated these decisions to the staff members supporting them. We saw people informing staff members how they wished to be assisted and by whom. One person showed us their care and support plan and told us they had written it with the assistance of a staff member.

People were supported at time of upset and distress. We saw one person become anxious regarding the health of a family member. Staff members took the time to sit and reassure this person and allowed them the time and space to express how they were feeling.

People's privacy and dignity was respected by those supporting them. We saw staff members knocking on people's doors and announcing themselves when entering their rooms. People were encouraged to do what they could for themselves and staff members assisted where needed. Information which was confidential to the individual was kept securely and only accessed by those with authority to do so.

## Is the service responsive?

### Our findings

People told us they had developed their personal care and support plans with the assistance of staff members. One person showed us their care plan and told us, "I wrote this. It is about me and what I want." The care and support plans that we saw were personal to the individual. They reflected what the person believed staff members should know in order to assist them how they wanted. For example, these plans contained details about what they liked and didn't like. They also included what people needed assistance with and what they could do by themselves. For example, one person showed us their care plan which included how they liked to be supported in the morning. Another showed us how they got nervous in the kitchen and how staff could reassure and keep them safe.

People regularly reviewed their care and support plans with staff members supporting them. We saw up to date plans of support which took into account recent changes in one person's physical health. These plans included the use of any adapted equipment used to aid their movement.

People were engaged in a range of activities they enjoyed and found stimulating. At this inspection we saw people engaged in completing daily living tasks including washing and cleaning tables. We saw others reading or listening to music and one person went out to lunch. People told us they were involved in a number of activities they enjoyed which included swimming, shopping, craft clubs, discos and quiz nights at a local public house.

People told us they knew how to raise a complaint or a concern if they needed to do so. One person told us, "I just tell [staff member's name]. But I am happy." We saw information was presented in a way people understood on how to raise a concern. The registered manager and the provider had systems in place to investigate and respond to any concerns raised with them. People were confident they would be listened to and their concerns addressed.



## Is the service well-led?

### Our findings

People knew who the registered manager was and they told us they found them approachable and engaging. Staff members we spoke with told us they could approach the registered manager at any time for support or guidance. Staff felt their opinions were valued and could make suggestions during regular staff meetings or when it was appropriate. For example, one staff member told us, "I suggested the use of a different type of technology which could assist someone with their communication. I was listened to and we tried it which seemed to work really well."

People were involved in their home and contributed to decisions regarding their environment. One person told us they were asked what furniture they would like to see in the lounge area. They said, "I chose a red chair. I went to the show room and tried it and that is the one we are getting."

We asked staff about the values they followed when supporting people at Beulah House. One staff member showed us the promises Macintyre Care make to those they support. These included, to support people to feel good about themselves and to be kind, friendly and fun. At this inspection we saw staff supporting people whilst demonstrating these promises. One person showed us how these promises had been adapted to meet their personal preferences. These included, to help me have fun when baking and to enjoy one on one support when shopping.

The registered manager and the provider undertook regular checks to drive quality. These included regular checks on the environment in which people lived and the support they received. We saw during one such check a recommendation was made to tarmac the driveway to avoid trips or falls. At this inspection we saw that this had been completed.

A registered manager was in post at this inspection and present throughout. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager understood the requirements of their registration with the Care Quality Commission. The provider had appropriately submitted notifications to the Care Quality Commission. The provider is legally obliged to send us notifications of incidents, events or changes that happen to the service within a required timescale.