

# Beaumont Court Care Home Limited

# Beaumont Court Care Home

## **Inspection report**

Peter Shore Court Beaumont Square London E1 4NA

Tel: 03333843884

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### Ratings

Overall rating for this service	Inspected but not rated
Is the service safe?	Inspected but not rated
Is the service effective?	Inspected but not rated
Is the service well-led?	Inspected but not rated

# Summary of findings

### Overall summary

#### About the service

Beaumont Court Care Home is a residential care home providing personal care for up to 49 adults. At the time of the inspection 48 people were living at the service, including older people and people living with dementia.

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

We found no evidence during the inspection that showed people were at an increased risk of injury in relation to falls or the management of any distressed behaviours.

There were systems in place for the assessment and management of risk and staff had a good understanding of people's needs and how to support them to keep them safe.

Staff worked with a range of health and social care professionals when people's needs changed or their health deteriorated with the relevant referrals being made in a timely manner.

Staff were positive about the level of information and guidance they had about people's conditions and how they needed to manage any incidents. Staff were confident any issues or incidents would be followed up by the management team to ensure the relevant professionals were involved.

Staff discussed people's needs during daily handovers, meetings and supervision to ensure they were aware if people were at an increased risk of having a fall or how to follow best practice if a person became distressed.

The management team reported all incidents to the relevant local authorities and informed people's relatives. Staff discussed incidents to reduce the risk of repeat events and the management team reminded staff about their responsibilities regarding monitoring and welfare checks.

#### Rating at last inspection

The last rating for this service was good (published 11 December 2019). The service also had infection prevention and control inspections carried out in October 2020 and February 2022 as part of our response to the COVID-19 pandemic.

#### Why we inspected

The inspection was prompted in part by an increase in notifications from the provider in relation to incidents related to falls and altercations between people who used the service. We undertook this targeted inspection to check on these incidents.

We found no evidence during this inspection that people were at an increased risk of harm from these issues and there were systems in place to monitor the service and work closely with the relevant health and social care professionals. The overall rating for the service has not changed following this targeted inspection and

remains good.

We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

You can read the report from our last inspection, by selecting the 'all reports' link for Beaumont Court Care Home on our website at www.cqc.org.uk.

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.

#### 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?	Inspected but not rated
At our last inspection we rated this key question good. We have not reviewed the rating as we have not looked at all of the key question at this inspection.	
Is the service effective?	Inspected but not rated
At our last inspection we rated this key question good. We have not reviewed the rating as we have not looked at all of the key question at this inspection.	
Is the service well-led?	Inspected but not rated
At our last inspection we rated this key question good. We have not reviewed the rating as we have not looked at all of the key question at this inspection.	



# Beaumont Court 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 Health and Social Care Act 2008.

This was a targeted inspection to check on concerns we had about increased incidents across the service and the risk management systems in place in the service.

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

The inspection was carried out by 1 inspector.

#### Service and service type

Beaumont Court Care Home 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. Beaumont Court Care Home is a care home without nursing care. CQC regulates both the premises and the care provided.

#### 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 reviewed information we had received about the service since the last inspection. This included significant incidents that occurred at the service. 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 reviewed the previous inspection report and recent feedback from the local authority. We used all of this information to plan our inspection.

#### During the inspection

We reviewed a range of records related to some of the recent incidents that had occurred across the service. This included 6 people's care plans and risk assessments, incident reports, staffing levels, staff supervision records and quality assurance records. We also reviewed key policies and examples of learning across the service.

We carried out observations throughout the day in relation to infection prevention and control procedures and staff awareness of best practice. We also reviewed records related to the management of infection control procedures across the home.

We spoke with 6 staff members. This included the registered manager, the deputy manager, a director, a team leader, a care assistant and the head of housekeeping.

We continued to seek clarification from the provider to validate evidence found related to the management of risk. This included clinical governance reports and samples of correspondence with a range of health and social care professionals.

We also spoke with a health and social care professional who had experience of working in the service and had been involved in some of the incidents that had been notified to us.

We provided formal feedback to the registered manager and nominated individual on 17 July 2023. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

#### **Inspected but not rated**

## 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 good. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had risk management systems and processes in place and to look at the infection control and prevention measures in place. We will assess all of the key question at the next inspection of the service.

Assessing risk, safety monitoring and management

- The provider had appropriate risk management plans in place to ensure any risks associated with people's care had been assessed to reduce the risk of incidents and accidents.
- We reviewed the records for people who had been involved in incidents related to unwitnessed falls and where people had expressed distress or agitation. There was detailed information about the risks and guidance for staff to follow to keep them safe, with risk assessments reviewed monthly.
- Staff had a good understanding of the risks associated with people's care and explained in detail what they looked out for, how they worked to reduce any risks and how they reported any issues or concerns. Staff were also aware of specific protocols and enhanced monitoring in place, which included techniques to manage any potentially challenging situations when people became agitated, upset or distressed.
- Along with care staff, domestic staff had been reminded about the importance of the environment in relation to the risks of slips, trips and falls for people who were able to mobilise around the home independently.
- Where more specific information was needed for a person, the registered manager acknowledged this was still in process and their care records were updated immediately. However, staff had a good understanding of this person's needs and we saw changes in their behaviours had been shared with the relevant professionals for further support and guidance.
- Where appropriate, assistive technology such as sensor mats and telecare had been put in place to alert staff when a person might be mobilising in their room. A staff member said, "We feel there is sufficient information, from the care plans but also the daily handovers where we discuss any issues or changes in people's needs to get a better understanding."
- A health and social care professional felt the provider carried out comprehensive assessments and had good risk management plans in place.

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

• We saw the provider was facilitating visits for people living in the home in accordance with the current guidance.

#### Inspected but not rated

## 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.

At the last inspection this key question was rated as good. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had risk management systems and processes in place and had been shared with the relevant health and social care professionals. We will assess all of the key question at the next inspection of the service.

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

- The staff team worked closely with a range of health and social care professionals to help people manage their health and wellbeing and identify any areas of support or best practice when their needs changed.
- Where people had been involved in incidents within the home, either related to falls or episodes of distressed or agitated behaviour, staff informed the relevant professionals and made the appropriate referrals where necessary.
- The GP visited weekly and staff reported where they had noticed any changes in people's health or if they had been involved in any incidents. People also benefitted from input from the visiting occupational therapist and monthly multi-disciplinary team (MDT) meetings.
- Feedback from a health and social care professional was positive in relation to risk management and staff understanding of people's changing needs. They added, "Issues and concerns are reported in a timely way and the staff team utilise the monthly MDT's to discuss any issues with residents, which is really positive. They are very open to taking on feedback and putting my recommendations in place."
- For example, they told us how they noticed their recommendations being carried out by staff on recent visits to help reduce a person's distress and agitation. They told us there had been no recent incidents which was a positive sign.

#### Inspected but not rated

## 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 good. We have not changed the rating of this key question, as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to check if the provider had risk management systems and processes in place. We will assess all of the key question at the next inspection of the service.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager had a good understanding of their responsibilities regarding notifiable incidents and all notifications had been submitted to the CQC in a timely manner. All relevant incidents had also been reported to the relevant local authority along with appropriate referrals if needed, to the occupational therapist or community mental health team.
- There was further oversight about the monitoring of the service regarding incidents as the registered manager reviewed incidents, accidents and safeguarding concerns in monthly clinical governance reports. These helped to identify any trends or themes within the home.
- For example, due to an increase in unwitnessed falls, the registered manager set up a falls workshop to raise awareness across the staff team and to discuss best practice.
- The registered manager and deputy manager also carried out regular unannounced night checks to monitor the service and ensure staff were carrying out their responsibilities. We saw staff had supervision and were reminded about responding to sensor mats and carrying out welfare checks for people at risk of falls or those who may be restless and walking with purpose throughout the night. People's care plans were also being reviewed across the home and formed part of the provider's home improvement plan, to ensure all records contained detailed information about people's needs.
- Staff were aware of their responsibilities and told us they discussed people's needs and any concerns with their care through daily handovers and supervision. A staff member was positive about the support from the deputy manager and registered manager regarding their support and helping them in their role.
- We discussed the increase in notifications with the registered manager which led to this targeted inspection. They felt due to being open and transparent, they had notified more than possibly needed. They were confident the systems in place ensured staff were aware of associated risks and reported any concerns as soon as incidents had occurred. They added, "We have a positive working relationship with the occupational therapist and they have been visiting us regularly, supporting us and chasing up referrals for us."

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 provider understood their responsibilities and the importance of making sure they were open and honest with people when they needed to be. When incidents had occurred across the service, people and

their relatives were notified with information about the incident and how it had occurred.