

Beechwood Care Home Care Home Service

20 Bridge Street
Wishaw
ML2 7QX

Telephone: 01698 374698

Type of inspection: Unannounced
Inspection completed on: 15 November 2016

Service provided by:
Tower Bridge Homes Care Limited

Service provider number:
SP2011011671

Care service number:
CS2011300269

About the service we inspected

Beechwood Care Home is registered to provide care for older people some of whom may have dementia and has a separate unit for younger people with physical and/or learning disabilities.

The service provider name is Tower Bridges Home Care Limited. The umbrella company is Holmes Care Group Limited which has its headquarters in Upminster in Essex.

The service is located in the town of Wishaw and was registered with the Care Inspectorate on 31 October 2011. The home is on a main public transport route and close to some shops and community facilities.

There are four units, each with their own lounge and dining room. Two on the ground floor and two on the upper floor. All bedrooms are single rooms with en suite showers. The central courtyard can be accessed from the main reception area.

The service states their objectives are to provide a high standard of individualised care for all residents, and that people will be cared for with dignity, respect and sensitivity to meet their individual needs and abilities.

How we inspected the service

We wrote this report following an unannounced inspection. This was carried out by three inspectors and two inspection volunteers. The inspection took place on 15 November 2016 between 9.30am and 4.30pm. We gave feedback to the home manager, regional manager and four service leads at the end of the inspection.

During the inspection process, we gathered evidence from various sources, including the following:

We spoke with:

- twelve residents
- two relatives
- the manager
- service leads
- care staff
- visiting GP

We looked at:

- personal plans
- risk assessments
- reviews
- training records
- accident and incidents
- complaints records

We used the Short Observational Framework for Inspection (SOFI 2) to directly observe the experience and outcomes of people who were unable to tell us their views.

Taking the views of people using the service into account

There were two inspection volunteers involved in the inspection. An inspection volunteer is a member of the public who volunteers to work alongside the inspectors. Inspection volunteers have a unique experience of either being a service user themselves or being a carer for someone who has used services. The inspection volunteer role is to speak with people using the service being inspected and gathering their views.

The inspection volunteers involved in the inspection talked to residents who were all overall happy with the care and support that they received at the care home. Some comments were:

"Staff come quickly when I buzz...anything you want, you get."

"Staff are lovely to me...so nice."

"The activity co-ordinator is magic."

"Some staff moan and groan at times."

"If you ask to see management then they come and see me."

"There's plenty of choice of food....if you don't like something, then they'll get you an alternative."

"This is my second home."

"I don't use the nurse call system....I just shout and they come."

"Staff are very kind and sensitive."

"Staff are always helpful."

"There's no 1:1 activities....I would like more exercises."

"When I call in staff they don't always respond quickly."

"Staff look after everyone well."

Taking carers' views into account

The inspection volunteers involved in the inspection talked to two visiting relatives who were both overall happy with the care and support that their relative/friend received at the care home. One had recently gone to the manager with a complaint and was satisfied with how it was being dealt with.

What the service has done to meet any requirements we made at or since the last inspection

Previous requirements

Requirement 1

Requirement 1, under quality theme 4

The provider must ensure that systems are in place to review the outcomes of any accidents which take place and which have the potential to cause harm to a service user and evidence what action is being taken to reduce potential for future occurrence.

This is to comply with SSI 210/2011 - Regulation 4(1)(a) A provider must make proper provision for the health, welfare and safety of service users.

Timescale: 30 September 2016

This requirement was made on 9 July 2015.

Action taken on previous requirement

We looked at accident and incident management and found that there were records kept for both. These were audited on a monthly basis to look at any trends. There was a section on each form for the manager to record that they had reviewed each accident/incident. We asked the manager to ensure that this section was routinely completed.

Met - outwith timescales

What the service has done to meet any recommendations we made at or since the last inspection

Previous recommendations

Recommendation 1

Recommendation 1, under quality theme 1

The service should continue to develop the care plans for residents. When doing so they should consider:

- that all paperwork being used has a section for staff to include the date that it was completed.
- making the monthly evaluations more meaningful and a summary of what has happened since the last one.
- including triggers and specific strategies for those that can become distressed.

National Care Standards, Care Homes for Older People - Standard 6: Supporting Arrangements.

This recommendation was made on 11 May 2016.

Action taken on previous recommendation

We sampled personal plans across the four units and found that all sections were signed and dated by staff. Some monthly evaluations were more meaningful than others. We discussed this at feedback and will monitor evaluations at the next inspection. We noted that care plans for people who could become distressed were in place and gave good information to staff on how best to support each person.

This recommendation had been met.

Recommendation 2

Recommendation 2, under quality theme 1

The service should ensure that agreed treatment plans for residents with chronic wounds or receiving end of life care are documented within the personal plan and includes who was all involved in reaching any agreements and when.

National Care Standards, Care Homes for Older People - Standard 6: Supporting Arrangements.

This recommendation was made on 11 May 2016.

Action taken on previous recommendation

We looked at the personal plan for a resident who was now receiving end of life care and whilst we noted that existing care plans and associated risk assessments had been updated, it was not clear to see what the new plans were for the person. For example: the person was now more at risk from skin damage due to pressure. This had been identified but no plan to prevent this was in place.

At the time of the inspection, no residents had any damaged skin. This is to be commended.

This recommendation had not been met.

Recommendation 3

Recommendation 1, under quality theme 2

The service should continue to resource appropriate restraint training for staff. In the meantime, they should familiarise staff with the Mental Welfare Commission: Rights, Risks and Limits to Freedom.

National Care Standards, Care Homes for Older People - Standard 5: Management and Staffing Arrangements.

This recommendation was made on 11 May 2016.

Action taken on previous recommendation

This best practice guidance had only very recently been distributed to staff. The home had plans to go through this with staff.

This recommendation had not been met.

Recommendation 4

Recommendation 1, under quality theme 3

The service should take steps to ensure the professional development of staff is adequately addressed.

In order to do this they should:

- review the skills and competencies of staff carrying out supervision and ensure that they are provided with support where required to do so in a skilled and meaningful way.
- ensure that records of supervision are used to demonstrate strengths and areas of improvement relating to staff skills and competencies.

National Care Standards, Care Homes for Older People - Standard 5: Management and Staffing Arrangements.

This recommendation was made on 4 November 2015.

Action taken on previous recommendation

The deputy manager had only just been promoted to home manager. This was an area that she was aware that was not up to date and planned to work through this. However, staff we spoke with during the inspection told us the management team were supportive and approachable.

This recommendation had not been met.

Recommendation 5

Recommendation 2, under quality theme 3

The provider should review the way they support people living with dementia and take actions to improve outcomes for people.

National Care Standards, Care Homes for Older People - Standard 13: Lifestyle - Keeping Well - Healthcare.

This recommendation was made on 4 November 2015.

Action taken on previous recommendation

We found that training had taken place for staff to assist them to support people living with dementia. We observed staff to be supportive when assisting people.

This recommendation had been met.

Recommendation 6

Recommendation 1, under quality theme 4

Where relatives or carers are identifying areas of concern, the service should ensure that actions are taken to address this and provide feedback to the relative or carer about what they have done.

National Care Standards, Care Homes for Older People - Standard 5: Management and Staffing Arrangements.

This recommendation was made on 4 November 2015.

Action taken on previous recommendation

We looked at the complaint folder and found that records were kept for both complaints and concerns that had been raised. Any agreed actions were noted and fed back to the complainant. People we spoke with during the inspection told us who they could complain to and that they felt at ease to do this.

This recommendation had been met.

Complaints

There have been no complaints upheld since the last inspection. Details of any older upheld complaints are published at www.careinspectorate.com.

Enforcement

No enforcement action has been taken against this care service since the last inspection.

Inspection and grading history

Date	Type	Gradings	
11 May 2016	Unannounced	Care and support	3 - Adequate
		Environment	4 - Good
		Staffing	4 - Good
		Management and leadership	3 - Adequate
4 Nov 2015	Unannounced	Care and support	Not assessed
		Environment	Not assessed
		Staffing	Not assessed
		Management and leadership	Not assessed
12 Jun 2015	Unannounced	Care and support	2 - Weak
		Environment	3 - Adequate
		Staffing	2 - Weak
		Management and leadership	2 - Weak
30 Jan 2015	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	2 - Weak
3 Jun 2014	Unannounced	Care and support	3 - Adequate
		Environment	2 - Weak
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
11 Feb 2014	Unannounced	Care and support	2 - Weak
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	2 - Weak
27 Aug 2013	Unannounced	Care and support	3 - Adequate
		Environment	3 - Adequate
		Staffing	3 - Adequate
		Management and leadership	3 - Adequate
9 Jan 2013	Unannounced	Care and support	Not assessed
		Environment	4 - Good
		Staffing	4 - Good

Date	Type	Gradings	
		Management and leadership	Not assessed
9 Jan 2013	Unannounced	Care and support Environment Staffing Management and leadership	Not assessed 4 - Good 4 - Good Not assessed
1 Aug 2012	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good Not assessed Not assessed 4 - Good
2 Dec 2011	Unannounced	Care and support Environment Staffing Management and leadership	4 - Good 4 - Good 4 - Good Not assessed

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