

## South West Care Homes Limited

# Beechmount

### Inspection report

Rousdown Road  
Chelston  
Torquay  
Devon  
TQ2 6PB

Tel: 01803605607

Website: [www.southwestcarehomes.co.uk](http://www.southwestcarehomes.co.uk)

Date of inspection visit:

12 September 2022

13 September 2022

Date of publication:

13 October 2022

### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Beechmount is a residential care home providing regulated activity accommodation for persons who require nursing or personal care to up to 25 people. The service provides support to older people some of whom are living with dementia. At the time of our inspection there were 18 people using the service.

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

People told us they felt safe living at Beechmount and spoke highly of the staff team. Staff understood how to protect people from the risk of abuse and had received safeguarding training. Staff told us they were confident to raise concerns.

Although we were assured people received their medicines as prescribed, we have made a recommendation about the information to guide staff to manage 'as required' medicines.

Risks to people were identified and managed to lessen the risk of harm to people. Staff knew the people they supported well and provided them with individualised care that reflected their needs, risks and preferences.

Staff followed infection control guidance and had access to Personal Protective Equipment (PPE).

There were enough appropriately skilled staff to meet people's needs and keep them safe. Staff had been recruited safely.

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.

The registered manager and provider monitored the quality of the service. Effective monitoring systems were in place and information from monitoring and audits were used to drive improvements.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good. (Published 10 January 2019)

### 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?**

The service was safe.

Details are in our safe findings below.

**Good** ●

### **Is the service well-led?**

The service was well led

Details are in our well led findings below.

**Good** ●

# Beechmount

## 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.

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 team consisted of an inspector, an assistant inspector 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

Beechmount 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. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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. At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was unannounced. Inspection activity started on 12 September 2022 and ended on 13 September 2022.

### What we did before the inspection

We reviewed information we had received about the service since the last 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 used all this information to plan our inspection.

### During the inspection

During the inspection we observed the care and support people received throughout the day. We spoke with seven people about their experience of the care provided and two relatives of people who use the service. We spoke with nine members of staff including the registered manager, operations manager, team leaders, care staff, cleaning staff and cook.

We reviewed a range of records. This included seven people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.

### After the inspection

We reviewed information received during and following the inspection. We contacted four health professionals by email to ask for their feedback. We also contacted six relatives by email and received two responses.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- People's medicines were managed safely and administered as directed by their GP. Safe systems were in place for the ordering, receipt, storage and disposal of medicines.
- Records showed that medicines were audited regularly so that any potential errors could be identified and addressed quickly.
- Staff undertook medicine training on a regular basis and confirmed that their competency was checked.
- Some records relating to medicines that were to be given 'as required' needed to be more detailed, for instance; about how staff would know the medicine was needed and what staff should try before administering the medicines.

We recommend the provider reviews all records relating to 'as required' medicines to ensure they contain sufficient information for staff to follow.

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

- People told us they were happy living at the service, and they felt safe. One person said, "Staff look after me and treat me nicely."
- People were protected from the risk of abuse and discrimination.
- Staff had received safeguarding training and were aware of their responsibilities. They told us they felt confident they could raise concerns with the registered manager. One staff member said, "I'd tell the manager if I saw anything untoward and report it straightaway. All the information is on the notice board if I need to contact anyone myself."
- Concerns raised were investigated and where required, the local authority and CQC had been notified.

### Assessing risk, safety monitoring and management

- Risks associated with people's care needs were identified, assessed and recorded. Risk assessments were detailed and regularly reviewed.
- Records showed that measures had been put in place to reduce those risks. For instance, people who were at risk of falls had monitoring equipment in place to reduce the risk of falls and potential injuries.
- Health and safety checks were in place to monitor the premises and equipment used.
- Emergency plans were in place outlining the support people would need to evacuate the building in an emergency. Fire safety procedures and appropriate checks and training for staff were in place.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

#### Staffing and recruitment

- Most people told us they felt there were enough staff. However, some people felt that staff were very busy and they could do with having more staff. One said, "Too much pressure on a few people (staff). They are wearing them out." We passed these comments on to the registered manager and provider.
- People's needs were assessed regularly to ensure that staffing levels were sufficient. The provider used a dependency tool to determine minimum numbers of staff needed to provide safe care. During our visit we observed there were sufficient numbers of staff to support people safely.
- Recruitment checks were carried out before prospective staff started work at the home. This included Disclosure and Barring Service (DBS) checks. These provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

#### 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 to have visitors as per government guidance.

#### Learning lessons when things go wrong

- Records were kept of accidents and incidents. Immediate action was taken where needed to mitigate risk, this included referrals to other professionals for advice and support, such as falls prevention team.
- The registered manager and provider monitored accidents and incidents and identified any lessons that could be learned to prevent future occurrences.



# 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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People told us they were happy living at Beechmount and we saw there was a relaxed, positive culture at the home. A relative told us, "All of the staff are very friendly and very caring and I know that [persons's name] is happy there."
- Care plans were person-centred and contained information about people's histories, interests, likes and dislikes.
- Staff knew the people they were supporting well and understood how to support people in line with their preferences and wishes.
- The registered manager promoted an open culture within the staff team. Staff were aware of whistleblowing procedures and told us they would be comfortable to approach the registered manager if needed. One staff member told us, "Communication is good between staff and the manager. We are able to talk openly and contribute."

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

- The registered manager and staff understood their roles and responsibilities, and they were clear about quality performance, risks and regulatory requirements.
- Quality assurance systems in place were robust and effective in managing the risks to the quality and safety of the service. The wide range of checks and audits completed ensured all areas of the service were monitored closely by the provider.
- Action plans were formulated after quality assurance checks to support the maintenance and improvement of the service people received.
- Staff told us the registered manager was passionate about providing good care outcomes for people and led by example. One staff member said, "We have a lot of respect for her (registered manager) and she is here all the time. She works really hard, and she puts the hours in."

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 and registered manager were aware of their responsibilities under the duty of candour guidance.
- The registered manager submitted statutory notifications to CQC when significant changes, events or incidents happened at the service.

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

- People and their relatives were able to give feedback about the service. The provider sought feedback about the quality of the service through questionnaires and meetings with people and their relatives.
- There was positive staff morale with staff saying they felt very well supported by the registered manager and provider. Staff told us they had regular opportunities to discuss their performance and had opportunities to attend team meetings.

Working in partnership with others

- Staff worked with healthcare professionals to make sure people's health needs were met. We saw evidence in people's records that referrals had been made in a timely way. Where advice was given by professionals, we saw this was recorded in people's care records and the advice was followed. For example, we saw nutritional recommendations to support people maintain a healthy weight, were followed.
- One health professional told us, "The home always make timely referrals to our team and do follow our recommendations and if they are struggling they do not hesitate to contact us. I have no concerns about the safety of the people living at Beechmount."