

Mr & Mrs Allison

Beachville West End

Inspection report

Beachville Care Home
West End
Newbiggin-by-the-sea
Northumberland
NE64 6XD

Tel: 01670817345

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28 February 2023

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18 July 2023

Ratings

Overall rating for this service

Good ●

Is the service safe?

Inspected but not rated

Is the service effective?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Beachville West End is a residential care home providing personal care to up to 13 people. The service provides support to older people with accommodation over 2 floors. At the time of our inspection there were 13 people using the service.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

The home accommodates 13 people in one adapted building which includes dining and social areas such as a communal lounge area and a seafront garden.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

At the time of the inspection, the location did not care or support for anyone with a learning disability or an autistic person. However, we assessed the care provision under Right Support, Right Care, Right Culture, as it is registered as a specialist service for this population group.

Right support: Staff were trained and enthusiastic in their roles to provide the care that people required to live the most independent lives as possible. Staff had received a good standard of training to fulfil their roles. We spoke to a number of people who use the service and their relatives who told us about how their nutritional needs were being met. This was in part due to the positive relationship between carers, the kitchen staff and people who lived there.

Right Care: People's care plans were person centred and the home recognised the importance of equality and diversity in its policy making. The management team were knowledgeable about their roles and responsibilities and had promoted a culture of respect which focused on individuals' personal choices. The Registered Manager had carried out appropriate quality checks to maintain a good oversight of the care being provided by their team.

Right Culture: Staff we spoke to were passionate about achieving good outcomes for people who use the service and people felt the home provided a close family like experience. 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 and update

The last rating for this service was requires improvement (published 21 May 2022)

The provider completed an action plan after the last inspection to show what they would do to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations and action had been taken to ensure people had given consent to their care and treatment was given in line with the law and guidance

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.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Beachville West End on our website at www.cqc.org.uk.

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?

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.

Inspected but not rated

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Beachville West End

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 Inspection Manager and an Inspector, as well as 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

Beachville West End 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. Beachville West End 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. Inspection activity started on 28 February 2023 and ended on 03 March 2023. We visited the location's service on 28 February 2023.

What we did before the inspection

We requested feedback from the local authority and Healthwatch and reviewed information we already held about the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

During the inspection we spoke with 3 people who used the service and 10 relatives about their experience of the care provided. We spoke with 6 staff including the registered manager, the deputy manager, 2 senior carers, 1 domestic staff, and a member of kitchen staff.

We reviewed care plans and a variety of records relating to the management of the service such as policies and management checks that were currently being used.

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 this key question was rated good. We have not changed the rating as we have not looked at all of the safe key question at this inspection. We will assess the whole key question at the next comprehensive inspection of the service.

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

Visiting arrangements were in line with current government guidance. One relative we spoke to told us, "I can visit at any time, and I am made to feel welcome as well."

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 our last inspection we rated this key question Requires Improvement. At this inspection the rating has changed to 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

- Care plans were assessed in detail and recognised people's needs and wishes.
- People's care was reviewed regularly and their consent was obtained.
- Daily notes were recorded accurately and used to inform good outcomes for people who use the service.

Staff support: induction, training, skills and experience

- Staff were trained with the skills they needed to provide care to people.
- Managers had in place a training tool to monitor staff training progress and staff were working towards their Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- Staff we spoke to confirmed they had received an induction when they started their employment. One relative we spoke to told us, "All of them are first class and it's a great team. They seem well trained and equipped."

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

- The provider ensured people's nutritional needs were being supported. This included monthly weight checks and working with partners including the GP and speech and language team.
- Residents worked closely with the cook to communicate their preferences which were recorded in their care plans. A member of the kitchen staff told us that, "If someone refuses a meal, we ask them what they would like."
- There were good working relationships between the kitchen staff and carers. A relative we spoke to told us, "My mother needs to be prompted to eat. She is maintaining her weight there, although she had lost a lot of weight before moving to this home. The menu is good, the food is home cooked, and my mother gets plenty to drink."

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

- The service had good links with healthcare professionals. Relatives told us and records we saw confirmed people saw healthcare professionals including their dentist, optician, and GP.
- Staff were vigilant about changes to people's health and wellbeing which was recorded in their care plans. A resident we spoke to told us, "They help you so much. You don't have to sit here and worry about anything. If you go to them they solve the problem by the time you've spoken to them. "

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

- The service had been well maintained and adaptations had been made to the building including grab rails, a stair lift and wheelchair accessible doors.
- There was a welcoming seafront garden space including a summer house which could also be used for outdoor visiting.
- People who lived at the service had rooms which were clean, tidy, and personalised to their taste.

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.

At our last inspection the provider had failed to involve people in decisions about their care. This was a breach of Regulation 9 (Person-Centred Care) of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014,

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 9.

- The service acted within the principles of the MCA and staff had been trained in this area.
- Evidence of best interest decisions were recorded in people's care plans.
- People's consent was recorded, and for people who lacked capacity, a power of attorney was in place.
- Deprivation of Liberty Safeguards (DoLS) were applied for and stored correctly, as well as being within date.

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 Requires Improvement. At this inspection the rating has changed to 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

- The home promoted an open and inclusive culture and staff were passionate about the service provided. A staff member we spoke to told us, "It's a very good place to work."
- The equality and diversity policy for the home was on display in the reception area upon entering the home.
- The Registered Manager was enthusiastic about the values of the home. They told us, "We work to the ethos of being open, transparent, friendly and caring. Everything is based around the individual person and person centered care. We don't promise things we can't fulfil. We make sure we do our preadmission checks, so we are sure of this. We are here to make sure we can give people the best quality of life."

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 understood their legal responsibilities when things go wrong. They also told us they valued the learning that could be gained when mistakes happen.
- There was an up to date complaints policy in place which was on display on the wall in reception during our site visit.
- The provider had an up to date Duty of Candour policy in place.

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

- The registered manager was knowledgeable about their roles and responsibilities in maintaining the homes values.
- Quality monitoring tools were in place, up to date and effective.
- There was a good working relationship between the registered manager and nominated individual to support the running of the home.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Continuous learning and improving care

- Staff made use of the smaller size of the home to gain informal feedback and views from people who use the service. One resident we spoke to told us, "They ask me how it is informally, being a smaller home is one

of its good points." Another resident told us, "They ask for my feedback. The staff are just perfect."

- Regular handover meetings and team meetings were held to capture feedback from staff.
- People living in the home told us both the registered manager and nominated individual were visible. The registered manager told us "I am looking to improve all the time around the residents and their individual care by getting to know them".
- The registered manager sought feedback from relatives and people who used the service to drive improvement.
- New learnings were shared with staff in team meetings.

Working in partnership with others

- Staff worked with health and social care professionals including the challenging behaviour team to achieve good outcomes for people who use the service. One relative told us, "They contact the GP and district nurse when needed and they are proactive in referring to other agencies."
- Records were kept showing support from healthcare professionals. Management were seeking to re-establish links within the community such as engaging with local schools.
- Professional advice was added to care plans so staff were provided with guidance to enable them to support people safely. This was then quality checked by the registered manager to ensure the guidance was being followed.