

Parkhaven Trust

The Beeches

Inspection report

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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

About the service

The Beeches is a residential care home providing personal and nursing care to 39 people who lived with dementia. The service can support up to 45 people across three separate units.

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

People received safe care and treatment. The environment was clean and well-maintained. Infection prevention and control standards were robust. Staff safeguarded people from abuse and improper treatment. People received their medicines as prescribed.

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. Staff assessed people's needs in a person-centred way and referred them to external health care specialists when needed. People told us they enjoyed the food provided and we observed staff were attentive to people's needs and preferences at mealtimes.

Staff told us they were supported and received sufficient training to undertake their roles and responsibilities. The provider was committed to staff development and offered educational placements for student nurses. Staff supported people to make choices about their end of life care, people's representatives told us they felt involved.

Staff supported people in a kind, dignified and respectful way.

Staff supported people to maintain their identity. Staff understood people's needs and preferences. We observed people engaged in meaningful activities. Staff supported people and their representatives to discuss and make decisions about their end of life priorities and preferences.

The senior management team quality assured the service and evidenced lessons learnt when things went wrong. There was a transparent and caring culture throughout the organisation. Staff worked in partnership with visiting professionals and acted on their recommendations.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 28/10/2019 and this is the first inspection.

Why we inspected

This was the first inspection.

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 until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring details below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well led.

Details are in our well-led findings below.

The Beeches

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 Care Act 2014.

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 undertaken by two inspectors 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

The Beeches is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. 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.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since registration. We sought feedback from the local authority and professionals who work with 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 used all of this information to plan our inspection.

During the inspection

We spoke with two people who used the service and thirteen relatives about their experience of the care provided. We spoke with seven members of staff including the registered manager, clinical lead, senior care workers, care workers and domestic staff. Throughout the inspection we liaised with the nominated individual, the nominated individual is responsible for supervising the management of the service on behalf of the provider. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included four people's care records and multiple medication records. A variety of records relating to the management of the service, staff training and policies and procedures were reviewed.

After the inspection

We provided feedback to the provider about inspection activity carried out remotely including phone calls to relatives and staff.

Is the service safe?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider protected people from the risk of abuse and improper treatment.
- Staff demonstrated very good knowledge of safeguarding procedures and told us they felt confident to raise any concerns with senior management.
- Staff were trained in safeguarding adults.
- People told us they felt safe. Relatives told us staff protected people from abuse. Comments included; "[Name] used to wander so we had to make the decision to find her somewhere to live. She is now totally safe and well cared for. The staff are awesome and wonderful with her and I can tell that she is happy there." Also "I never really see a resident without anyone watching them or nearby which is good because [Name] tends to wander."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff assessed, monitored and reviewed risk for people in a person-centred way.
- Staff understood the importance of positive risk taking and told us they felt confident to support people during periods of emotional distress.
- The registered manager investigated accident and incidents. Accident and incident analysis were recorded, and lessons learnt information was shared with staff and people's representatives.
- We observed staff supported people to maintain their independence. One person was unsteady when mobilising, we checked their care records and saw staff accurately followed their risk assessment and care plan.

Staffing and recruitment

- The provider deployed sufficient numbers of trained and experienced staff.
- The provider safely recruited staff and ensured they completed an induction training programme.
- People's representatives told us staffing was consistent. Comments included; "What I also like is that some of the staff have been there for years. She has been in several other places and none were as good as The Beeches." Also "I am happy that [Name] is safe because they have monitors to detect when he is moving about, they are always watching him to keep an eye on him."

Using medicines safely

- The provider ensured people's medicines were managed in a safe and effective way.
- We observed staff administer medicines in a person-centred way. Care records included information about people's preferences when taking medicines and potential risks associated, including side effects.

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 meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- 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.
- The provider was facilitating visits for people living in the home in a safe and person-centred way.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; Adapting service, design, decoration to meet people's needs

- Staff holistically assessed people's physical, mental health and social needs. Staff designed people's care plans in line with best practice guidance and national standards for social care.
- The provider embedded technology systems to promote people's independence. For example, movement sensors to alert staff when someone was awake at night and may need assistance and falls prevention.
- The service was purposely designed to meet the needs of people who lived with dementia. All units were ground floor level with direct access to secure outdoor areas.

Staff support: induction, training, skills and experience

- The provider deployed sufficient numbers of staff with the right competence, knowledge, qualifications, skills and experience to carry out their roles.
- Staff provided positive feedback about the training they received; "We've done a lot of training, in past I have done a 2-year course specially for dementia."
- People's representatives told us; "They [staff] are trained to deal with dementia and they look after [Name] extremely well. They [staff] are very efficient." Also "I think the staff are trained enough."

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

- Staff supported people to have choice and control at mealtimes. We observed people had access to sufficient food and drink throughout the inspection and staff supported them in a person-centred way.
- We saw the dining environment across all units was pleasant and food was well-presented.
- Staff assessed and recorded people's cultural, ethical and religious needs in relation to meals and drinks.
- Staff assessed and reviewed people's dietary needs. Risks around choking and weight management were regularly reviewed.

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

- Staff referred people to external health and social care services. Directions and recommendations made by professionals were recorded and followed.
- People's representatives told us their relative had access to external health care professionals and they felt involved in reviews; "[Name] has a tripod to help her mobility and access to an Occupational Therapist and a Physio." Also "[Name] has various ailments and if they need to change anything for any reason, they ring up to let me know and discuss it with me."

- Staff maintained up to date care records which contained important information about people's needs and preferences should they require transfer to another health service in the case of an emergency.

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 Act 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff supported people and or their representatives to be involved in decisions about their care and treatment.
- Staff were competent to assess and make judgements about people's mental capacity and act in their best interest.
- The registered manager audited care records and maintained a log of people subject to a DoLS. Staff followed conditions outlined in people's DoLS and demonstrated good knowledge about restrictive practice.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity; Respecting and promoting people's privacy, dignity and independence

- Staff supported people in a kind, dignified and respectful way.
- People and their representatives told us; "Oh all of the staff are wonderful, so kind and gentle with me", "They treat [Name] with respect and they help [Name] to shower and shave and show genuine affection towards him. They are brilliant with [Name] and show patience when their behaviour can be challenging." Also "They are very gentle, caring and willing with [Name] and make her as comfortable as they can."
- Staff encouraged people to maintain their independence. We observed a person on close supervision received support from staff to keep them safe however, staff ensured their privacy and independence was promoted.

Supporting people to express their views and be involved in making decisions about their care

- Staff encouraged people and their representatives to be involved in the planning of their care and treatment. People's representatives told us; "If there is a change to the plan they ring me up, like last week she needed an injection so they rang to ask my permission." Also "The staff regularly update me, if we need to discuss any changes in [Names] care I am always contacted, I feel involved."
- Staff recorded discussions with people and their representatives. Care records clearly outlined people's abilities to be involved in decisions including if they had a Lasting Power of Attorney who is legally assigned to make decisions on their behalf if they lack mental capacity to make their own decisions.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Staff completed and reviewed a range of care planning for each person that was focused on the person's whole life, including their goals, skills, abilities and how they prefer to manage their health.
- Staff empowered people to make choices and have as much control and independence as possible.
- Staff supported people to maintain their identity. We saw people who relied on staff for full support with personal care were dressed in a person-centred way including application of makeup and jewellery.

Meeting people's communication needs; Improving care quality in response to complaints or concerns
Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff assessed and reviewed people communication needs and preferences. We saw people who were prescribed spectacles and hearing aids had been supported by staff to wear them and regular health check ups were scheduled to ensure their prescriptions were in line with their needs.
- The provider had a policy and procedures in place which supported good practice around the Accessible Information Standard. Staff received training in effective communication and people's needs and preferences were considered prior to admission. Accessible information was in place to aid people with visual or cognitive impairment including signage and important procedures such as the complaints procedure.
- People's representatives told us they felt confident to raise their concerns or complaints. The registered managers office was at the entrance area and they operated an open-door policy. People's representatives told us, "Not had to complain but If I had to I would just go and see the Manager or Deputy they are easy to talk to and listen to what you have to say and deal with anything that might arise."

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff learnt about people's pastimes and family connections. We saw staff had built trusting relationships with people they supported.
- People had regular access to meaningful activities. We observed staff support people to maintain their hobbies and interests.
- Staff collated information about people's family and social connections and recorded this in their care plan. People were supported to have visitors and when possible access into the community.

End of life care and support

- Staff assessed people's end of life care needs and preferences in a person-centred way. Staff were sufficiently trained to deliver good end of life care.
- Staff recorded people's end of life care needs and preferences in their care plans and made sure important information including do not resuscitate decisions were easily accessible for staff to access.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; Continuous learning and improving care

- The provider had effective quality assurance processes and the service was well-led. People's representatives told us; "The Manager is very direct and efficient which I like and it is a well-run home." Also "The managers are very approachable and responsive, I have no concerns about how the place is run. It's a lovely set up and it doesn't really feel like a Care Home. Definitely recommend it to other people."
- The provider ensured lessons were learnt when things went wrong.

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 ensured lessons were learnt when things went wrong. Staff acted on their duty of candour responsibilities. There was a consistent open and transparent culture throughout the organisation.

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

- The registered manager understood their role and responsibility in relation to meeting regulatory requirements.
- The provider had a system in place to ensure clear and effective governance of the service.
- Staff told us they felt supported and received constructive feedback about their performance. Comments included; "The night manager is really good we can contact her with anything, she does all our supervisions, they are very good very supportive." Also "I really enjoy working at The Beeches especially the hours and work with nice members of staff, the manager and nurses are nice and listen to you."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People and their representatives told us staff involved them in a meaningful way. Everyone we spoke with told us they felt confident to provide feedback and felt listened to.
- The provider worked in partnership with other external health and social care professionals and had formed strong links with the community.