

Beechwood Care Home Care Home Service

20 Bridge Street
Wishaw
ML2 7QX

Telephone: 01698 374 698

Type of inspection:
Unannounced

Completed on:
5 July 2021

Service provided by:
Holmes Care Group Scotland Ltd

Service provider number:
SP2020013480

Service no:
CS2020379128

About the service

This was a focused inspection to evaluate how well people were being supported during the COVID-19 pandemic. We evaluated the service based on key areas that are vital to the support and wellbeing of people experiencing care during the pandemic.

This inspection was carried out by two inspectors from the Care Inspectorate.

Beechwood care home provides care and support for up to 90 people with a range of physical and cognitive impairment. The service is located in the town of Wishaw and was registered with the Care Inspectorate in 1 July 2020. 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 with en suite showers. The central courtyard can be accessed from the main reception area.

The service states its 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.

At the time of this inspection there were 84 people living in the home.

What people told us

We asked people using the service and their relatives to share their experience of Beechwood Care Home. We spoke with people face to face during the inspection visit.

People we talked with during the inspection spoke very positively about the staff and the care they gave. People told us,

"The staff are very kind"

"They look after me well".

Some residents commented that the food was good.

Other people said that the menu choices were repetitive and would like to see changes.

There were a range of views about the activities available. Some people were happy with what was on offer. And particularly enjoyed the music sessions and Tai Chi exercises.

Other people told us they were bored and that there wasn't enough for them to do. We were told that when activities were available, they were always the same.

Visiting family members commented positively on the care that their relatives were receiving. They told us that visiting was well organised. People said that communication was good, and that staff kept in touch if there are any changes.

Relatives commented,

"The staff are so kind and considerate"

"Staff can't do enough to help"

"All staff are brilliant - from the manager down they are so helpful"

"Couldn't ask for a better place for my relative, her care has been second to none"

"As a family we are very pleased about the care our relative has received"

Families said that the home are good at keeping them informed.

"Regular phone calls throughout the pandemic."

"Visiting has been well managed - it's been difficult, but the home has made it as easy as they can."

From this inspection we evaluated this service as:

In evaluating quality, we use a six point scale where 1 is unsatisfactory and 6 is excellent

How well do we support people's wellbeing?	3 - Adequate
How good is our care and support during the COVID-19 pandemic?	3 - Adequate

Further details on the particular areas inspected are provided at the end of this report.

How well do we support people's wellbeing?

3 - Adequate

1.1 People experience compassion, dignity, and respect.

People living in Beechwood care home were treated with respect and compassion.

We saw staff support people in a friendly and kind manner. We saw warmth of approach from staff who offered comfort to people who were distressed or upset.

People benefited from being supported by staff who were familiar with individual's preferences and care needs.

Staff were often busy completing tasks and were not focused on responsive, person-centred engagement. Staff would benefit from training to improve their dementia care skills and knowledge.

This would help them develop a person-centred approach to support and prevent people from feeling left out or isolated.

See area for improvement 1.

1.2 People get the most out of life

The systems in place to support families to visit safely were working well, in line with current guidance. Staff were supporting people to keep in touch with their families using technology. This was positively commented on by families and residents.

To help to give purpose to individuals' day and support their well-being, people should have opportunities to take part in activity that is meaningful to them.

People living in some units were supported to take part in activities that they enjoyed and were meaningful to them. In other units there was a lack of meaningful activity. At times activities were not suitable and people did not engage with them. There were fewer opportunities for meaningful activities available for people living with dementia and who may be quieter.

There was little meaningful engagement for people who spent their day in their bedroom. This could cause people to feel isolated and lonely.

We saw that staff concentrated on completing tasks and missed opportunities to spend time with people in a meaningful way.

People told us that there was not enough to keep them occupied. People told us -

"It gets boring with nothing to do"

"The activities don't change, it's always the same things."

We saw that the garden was not being used to its full potential to support people to have access to the outdoors.

Information about individuals' preferences regarding meaningful activities needs to be developed. This would guide staff to plan meaningful activities taking individuals choices into account.

See requirement 1.

1.3 People's health benefits from their care and support

Health care needs of people were being well supported. External health care professionals were involved in people's care. Records in care plans generally detailed the outcomes of visits from healthcare professionals.

People had good access to drinks and snacks. Staff had good awareness of people's preferences and specific dietary needs.

Personal plans reflected the care and support needs of individuals. The service was continuing to develop personal plans to reflect the choices and preferences of people. This will help guide staff to plan care taking individuals choices into account and ensure a person-centred approach to care provision.

There was a need to further develop the care plans relating to the management of stress and distress reactions. The plans should be more detailed. This would provide guidance to staff about the agreed and consistent support to deliver when individuals become distressed.

See area for improvement 2

We were concerned that the Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) certificates we viewed were not always fully completed. Many lacked details about who had been involved in the decision to have the certificate in place. This does not protect the legal rights of individuals or respect their choices.

See requirement 2.

There was a need for attention to detail regarding the completion of care charts. To ensure that healthcare needs are accurately assessed and monitored care charts should be fully and timeously completed.

See area for improvement 3

Requirements

1. By 5 September 2021, the provider must ensure that people have access to meaningful activity to support their wellbeing. In particular, the provider must ensure the following:

- appropriate numbers of staff are available to support the co-ordination and delivery of meaningful activity for everyone living in the home
- the views of people living in the home are used to inform the development of an activity program which promotes their choices and aspirations
- the activity programme provided should be appropriate for individuals, supporting their health and well-being needs
- support people living in the home to access outdoor space
- improve information within personal plans detailing individuals' preferences regarding meaningful activity
- involvement in activities should be recorded in an outcome focussed manner so that it is evident if the activity was a success for the individual.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that:

I can choose to have an active life and participate in a range of recreational, social, creative, physical, and learning activities every day, both indoors and outdoors. (HSCS 1.25)

" I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes"

(HSCS 3.14)

And, in order to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

2. By 26 July 2021, the provider must ensure that the legal rights of individuals are protected, and their decisions respected. To do this the provider must carry out a review of all DNACPR certificates in place to ensure that they are valid, fully completed, and confirm that consent has been sought.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that:

'My views will always be sought, and my choices respected, including when I have reduced capacity to fully make my own decisions.' (HSCS 2.1)

'If I am unable to make my own decisions at any time, the views of those who know my wishes, such as my carer, independent advocate, formal or informal representative, are sought and taken into account.' (HSCS 2.2)

'My human rights are central to the organisations that support and care for me'. (HSCS 4.1)

And, in order to comply with Regulation 4(1)(a) of The Social Care and Social Work Improvement Scotland (Requirements for Care Services) Regulations 2011 (SSI 2011/210).

Areas for improvement

1. To help support meaningful engagement with people living with dementia the provider should ensure that staff are supported with appropriate training such as 'Promoting Excellence programme for dementia learning and development'.

This is to ensure care and support is consistent with the Health and Social Care Standards which state that:

" I have confidence in people because they are trained, competent and skilled, are able to reflect on their practice and follow their professional and organisational codes" (HSCS 3.14)

2. To guide staff to deliver agreed and consistent support when individuals became distressed the provider should ensure that care plans relating stress and distress are fully developed. Plans should be more detailed regarding triggers, strategies to manage distress and include clear guidance regarding the use of medication prescribed 'as needed'.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'My care and support meets my needs and is right for me'. (HSCS 1.19)

3. To support the monitoring of individual's healthcare needs and inform effective care planning the provider should ensure that care charts are fully and timeously completed.

This includes, but is not limited to, food and fluid charts, oral care charts and topical medication records.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'My care and support meets my needs and is right for me'. (HSCS 1.19).

How good is our care and support during the COVID-19 pandemic?

3 - Adequate

7.2 Infection control practices support a safe environment for both people experiencing care and staff.

On the first day of inspection, we identified some areas of the home and equipment that needed to be cleaned to ensure that people living in the home were protected from harm and the risk of infection. The management team took immediate action to resolve this. On the second day of the inspection, we noted that the areas of concern had been improved.

The system used to assess and monitor cleanliness of the home and equipment needs to be improved. This would ensure a consistent approach to the monitoring of cleanliness and help maintain acceptable standards of cleanliness.

See area for improvement 1.

We noted high levels of wear and tear in servery kitchens, on floors, handrails, doors, and walls. This impacted on the effectiveness of cleaning and disinfection. Some areas of the home were malodorous. There is a need for action to refurbish the care home environment to ensure that people experience care in a home that is well maintained and free from odours. We discussed this with the provider who gave assurances that a refurbishment plan would be initiated. The provider needs to share this plan with the Care Inspectorate.

See area for improvement 2.

Infection prevention and control measures to protect people from infection, including the management of PPE and hand hygiene measures, were in line with current guidance.

There were wall mounted Alcohol Based Hand Rub dispensers placed in the home. To enhance hand hygiene measures the provider should look at increasing the number of dispensers. Particularly between entering and exiting units.

7.3 Staffing arrangements are responsive to the changing needs of people experiencing care

There were sufficient nursing and care staff to meet people's needs. We saw that staff teams worked well together to support the health and care needs of people living in the home.

People living in the home and their families commented positively about the skills and kindness of staff.

Staff have had appropriate training regarding the use of PPE and current infection prevention and control guidance. There was a system of direct observation of practice. This ensured that staff used their knowledge to inform their practice and safeguard people from infection.

To protect people from infection the provider should review the hours that housekeeping staff work. There should be sufficient housekeeping staff available into the evening to maintain acceptable levels of cleanliness within the home.

See area for improvement 3.

Areas for improvement

1. To ensure consistency of approach to assessment and monitoring of cleanliness of the home and equipment, the provider should develop a robust quality audit. This should take account of current infection prevention and control guidance.

This is to ensure care and support is consistent with the Health and Social Care Standards which state: 'I benefit from a culture of continuous improvement, with the organisation having robust and transparent quality assurance processes' (HSCS 4.19)

2. The provider should share the refurbishment plan with the Care Inspectorate. The plan should detail the timescales for refurbishment to take place.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment.' (HSCS 5.22)

'My environment is relaxed, welcoming, peaceful and free from avoidable and intrusive noise and smells.' (HSCS 5.18)

3. To maintain acceptable levels of cleanliness and protect people from infection the provider should review the hours that housekeeping staff work. The provider should take account of the need to extend housekeeping hours into the evening.

This is to ensure care and support is consistent with the Health and Social Care Standards which state:

'I experience an environment that is well looked after with clean, tidy and well-maintained premises, furnishings and equipment.' (HSCS 5.22)

Complaints

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

Detailed evaluations

How well do we support people's wellbeing?	3 - Adequate
1.1 People experience compassion, dignity and respect	4 - Good
1.2 People get the most out of life	3 - Adequate
1.3 People's health benefits from their care and support	3 - Adequate

How good is our care and support during the COVID-19 pandemic?	3 - Adequate
7.2 Infection control practices support a safe environment for people experiencing care and staff	3 - Adequate
7.3 Staffing arrangements are responsive to the changing needs of people experiencing care	4 - Good

To find out more

This inspection report is published by the Care Inspectorate. You can download this report and others from our website.

Care services in Scotland cannot operate unless they are registered with the Care Inspectorate. We inspect, award grades and help services to improve. We also investigate complaints about care services and can take action when things aren't good enough.

Please get in touch with us if you would like more information or have any concerns about a care service.

You can also read more about our work online at www.careinspectorate.com

Contact us

Care Inspectorate
Compass House
11 Riverside Drive
Dundee
DD1 4NY

enquiries@careinspectorate.com

0345 600 9527

Find us on Facebook

Twitter: @careinspect

Other languages and formats

This report is available in other languages and formats on request.

Tha am foillseachadh seo ri fhaighinn ann an cruthannan is cànan eile ma nithear iartras.

অনুরোধসাপেক্ষে এই প্রকাশনাটি অন্য ফরম্যাট এবং অন্যান্য ভাষায় পাওয়া যায়।

یہ اشاعت درخواست کرنے پر دیگر شکلوں اور دیگر زبانوں میں فراہم کی جاسکتی ہے۔

ਬੇਨਤੀ 'ਤੇ ਇਹ ਪ੍ਰਕਾਸ਼ਨ ਹੋਰ ਰੂਪਾਂ ਅਤੇ ਹੋਰਨਾਂ ਭਾਸ਼ਾਵਾਂ ਵਿਚ ਉਪਲਬਧ ਹੈ।

هذه الوثيقة متوفرة بلغات ونماذج أخرى عند الطلب

本出版品有其他格式和其他語言備索。

Na życzenie niniejsza publikacja dostępna jest także w innych formatach oraz językach.