

Beechwood Park Care Home Service

136 Main Street
New Sauchie
Alloa
FK10 3JX

Telephone: 01259 720 355

Type of inspection:
Unannounced

Completed on:
3 May 2023

Service provided by:
ARIA HEALTHCARE GROUP LTD

Service provider number:
SP2013012090

Service no:
CS2013318118

About the service

This service registered with the Care Inspectorate on 30 August 2013.

Beechwood Park care home is provided by Aria Healthcare Group Limited. The care home is registered to provide care for 62 older people.

On the day of the inspection there were 47 people living in the care home.

The service aims to provide "exceptional care and comfort in a place you can call home."

The home is located on the main street of Sauchie and close to local amenities. The home is laid out over two floors and divided into five units providing single room accommodation, with all rooms having ensuite shower facilities. At the time of the inspection, three of the five units were in use. There are also some enclosed garden areas and seating with direct access from ground floor lounges.

About the inspection

This was an unannounced inspection, which took place on 1 May 2023, 09:30 to 20:00, 2 May 2023, 09:30 to 16:00 and 3 May 2023, 14:00 to 16:30. The inspection was carried out by two inspectors from the Care Inspectorate.

To prepare for the inspection we reviewed information about this service. This included previous inspection findings, registration information, information submitted by the service and intelligence gathered since the last inspection.

In making our evaluations of the service we:

- spoke with 15 people using the service and four of their families
- spoke with staff and management
- observed practice and daily life
- reviewed documents
- spoke with visiting professionals.

Key messages

- Staff showed kind, caring support and a genuine interest in 'caring' for people
- Good evidence of effective partnership working and multi-disciplinary working
- A new manager and deputy had started in the care home and were committed to ensuring people were well cared for.
- Improvement was needed in the management of accidents and incidents
- Staff were recruited safely
- People benefitted from a comfortable, warm and homely environment
- All people had a care plan in place but risk assessments didn't always inform the care plan.

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?	4 - Good
How good is our leadership?	4 - Good
How good is our staff team?	4 - Good
How good is our setting?	4 - Good
How well is our care and support planned?	4 - Good

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

How well do we support people's wellbeing?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Quality Indicator: 1.1 People experience compassion, dignity and respect

Quality Indicator: 1.2 People get the most out of life

Quality Indicator: 1.3 People's health and wellbeing benefits from their care and support

People should receive support which is in line with the Health and Social Care Standards. The service evidenced this in a variety of ways in their day-to-day practice, which promoted a culture of respect. Staff showed kind, caring support and a genuine interest in 'caring' for people. One relative told us "I can't speak highly enough about the staff, they really look after mum but also dad when he visits."

The service employs one wellbeing worker and a second was in process of being recruited. Whilst there was no wellbeing worker onsite during our inspection, there was planned activities and we saw activities taking place within the home, these ranged from group events, entertainers, crafts and the King's coronation celebration, to individual social events outwith the home like shopping trips and attending the local cafe.

People told us that the food was good and we saw plenty of snacks and drinks available throughout the day, there was also a night owl menu for people in the evenings. We saw that special diets were catered for, including fortified foods. People's support plans and assessments identified these dietary needs, however we highlighted some inconsistencies in communication. The manager was responsive and gave assurances this would be addressed.

People benefited from robust systems in place to monitor and escalate their health needs to other health professionals. We saw good evidence of effective partnership working and multi-disciplinary working to ensure people's needs were effectively met.

How good is our leadership?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Quality Indicator: 2.2 Quality assurance and improvement is led well

A new manager and deputy had started in the care home recently. The management team was committed to ensuring people were well cared for. Staff felt that they were approachable and supportive. However, staff felt communication could be better between all levels of care staff. We saw regular staff meetings being carried out and a plan for staff supervisions, which will ensure staff have the necessary information and support to provide care based on relevant evidence, guidance and best practice.

People could be assured that there were systems in place to audit standards of care within the care home. We found that this included audits for key areas including medication management, nutrition and falls. Action plans had been devised following completed audits and was currently being worked through.

There was a complaints process in place, and evidence of shared learning to drive improvement. However, we saw some gaps in the oversight and management of accidents and incidents. Improvement was needed to ensure the safety of people, identify relevant risks and follow up actions. (See Area for Improvement 1).

Areas for improvement

1.
To keep people safe and healthy, the provider should improve the management of all accidents and incidents. The service should, at a minimum:

- a) Ensure that staff and management recognise potential harm and understand their duty to report this under the Adult Support and Protection Act (Scotland) 2007.
- b) Ensure that they adhere to the Care Inspectorate notification guidance for reportable events.
- c) Implement a system to regularly monitor, review and learn from accidents, incidents and adult protection concerns.

This is to ensure care and support is consistent with the Health and Social Care Standards, which state: "I am protected from harm, neglect, abuse, bullying and exploitation by people who have a clear understanding of their responsibilities." (HSCS 3.20)

How good is our staff team?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Quality Indicator: 3.1 Staff have been recruited well

People could be assured that staff were recruited safely and checks were carried out as expected including, references and protection of vulnerable groups (PVG) scheme.

Management ensured that new staff were well supported when they started. A new staff induction process was being implemented, which included some shadow time for new staff, to allow them to work alongside existing staff initially. Staff benefited from a training programme that provide new staff with the relevant knowledge and skills to carry out their job role.

We found that staffing across the home was inconsistent throughout the week with some days having more staff than others. Management informed us that this was partly due to historic set shift patterns and partly due to having additional staffing at times. We spent time in each unit observing how the day was spent and discussed staffing arrangements with care staff. After all this and looking at the most recent dependency level calculations, management agreed to review staffing and consider not only the home as a whole, but also each unit individually. We asked them to consider the frequency of unwitnessed falls, stress and distress experienced by people and nutritional support. We will review this at our next inspection.

How good is our setting?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Quality Indicators: 4.1 People experience high quality facilities

People benefitted from a comfortable, warm and homely environment where residents were able to sit and chat to each other. They were able to move around the care home as they wished and choose where to spend their day. There was access to a large, secure garden which had a large summer house.

The environment was overall clean and tidy, with no evidence of intrusive smells.

People's bedrooms were comfortable and nicely personalised which helped to give people a sense of belonging. People had their own rooms and ensembles which promoted privacy.

At our previous inspection we had identified a lack of dining furniture for people to use at mealtimes and found that whilst some had been provided, there was still a lack in Ben Cluech unit. This impacted on people's ability to have a choice to sit at a dining table at mealtimes. Management were responsive to our feedback on day one and quickly addressed this by sourcing additional furniture before we left.

People could be assured that they were living in a safe and well maintained environment as internal and external maintenance checks were carried out. However, some areas were in need of refurbishment and the provider assured that they had plans in place to improve the environment.

How well is our care and support planned?

4 - Good

We evaluated this key question as good, where several strengths impacted positively on outcomes for people and clearly outweighed areas for improvement.

Quality Indicator: 5.1 Assessment and personal planning reflects people's outcomes and wishes

People could be assured that they had a care plan in place, with a good level of detail to guide staff around how best to care and support each person. Risk assessments were also in place but did not always inform the care plan. Care plans were reviewed but were not always updated to reflect any changes noted during the review.

Since our last inspection the transferring of care plans from paper to electronic had taken place and now complete. Managers continued to support staff and provide training to ensure care planning was person centred and meaningful.

People and their representatives were involved in care planning. Not all six monthly reviews had taken place, however the manager had devised a plan to ensure everyone has a review planned.

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?	4 - Good
1.1 People experience compassion, dignity and respect	5 - Very Good
1.2 People get the most out of life	4 - Good
1.3 People's health and wellbeing benefits from their care and support	4 - Good
How good is our leadership?	4 - Good
2.2 Quality assurance and improvement is led well	4 - Good
How good is our staff team?	4 - Good
3.1 Staff have been recruited well	4 - Good
How good is our setting?	4 - Good
4.1 People experience high quality facilities	4 - Good
How well is our care and support planned?	4 - Good
5.1 Assessment and personal planning reflects people's outcomes and wishes	4 - Good

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