



Making Social Care  
Better for People

Inspecting for better lives

# Key inspection report

## Care homes for older people

<b>Name:</b>	Beechwood Gardens
<b>Address:</b>	73 Rochester Road Earlsdon Coventry West Midlands CV5 6AF

The quality rating for this care home is:

two star good service

A quality rating is our assessment of how well a care home, agency or scheme is meeting the needs of the people who use it. We give a quality rating following a full assessment of the service. We call this a 'key' inspection.

<b>Lead inspector:</b>	<b>Date:</b>
Deborah Shelton	2   7   0   4   2   0   0   9

This is a report of an inspection where we looked at how well this care home is meeting the needs of people who use it. There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

**Outcome area (for example Choice of home)**

**These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:**

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

**This is what people staying in this care home experience:**

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

Copies of the National Minimum Standards – Care Homes for Older People can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: [www.tso.co.uk/bookshop](http://www.tso.co.uk/bookshop)

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- Put the people who use social care first
- Improve services and stamp out bad practice
- Be an expert voice on social care
- Practise what we preach in our own organisation

Our duty to regulate social care services is set out in the Care Standards Act 2000.

## Reader Information

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## Information about the care home

Name of care home:	Beechwood Gardens
Address:	73 Rochester Road Earlsdon Coventry West Midlands CV5 6AF
Telephone number:	76713654
Fax number:	02476463032
Email address:	beechwoodgardens@btconnect.com
Provider web address:	

Name of registered provider(s):	Mrs Wendy Peggs, Mr Brian William Peggs
Type of registration:	care home
Number of places registered:	20

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65

dementia	20	20
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Additional conditions:		
Age: Dementia - Code DE age 55 and above.		
The maximum number of service users who can be accommodated is: 20		
The registered person may provide the following category of service only: Care Home Only (Code PC); To service users of the following gender: Either; Whose primary care needs on admission to the home are within the following categories: Dementia (DE) 20		

Date of last inspection								
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Brief description of the care home
Beechwood Gardens is registered to provide accommodation for up to 20 older men and women who have dementia. There are sixteen single occupation bedrooms, nine of which have en suite facilities, and two shared (double) rooms without en suite facilities. The home has one assisted bathroom, and a wet room (shower) which have toilets, two separate toilets are also available. There are two lounges for residents to use both have adjacent dining areas.
There is an attractive patio and terraced garden to the rear of the building. This garden

### Brief description of the care home

area is accessed through patio doors in the lounge/dining rooms, one of which has a ramp for wheelchair users. A sloping ramp also leads from the patio to the lower terrace of the garden.

The home is located in the Earlsdon area of Coventry where shops, places of worship and public transport are easily accessible. The home is a conversion of an existing building with accommodation for residents located on two floors. The forecourt provides limited parking but as the home is situated in a quiet location, there is ample street parking available.

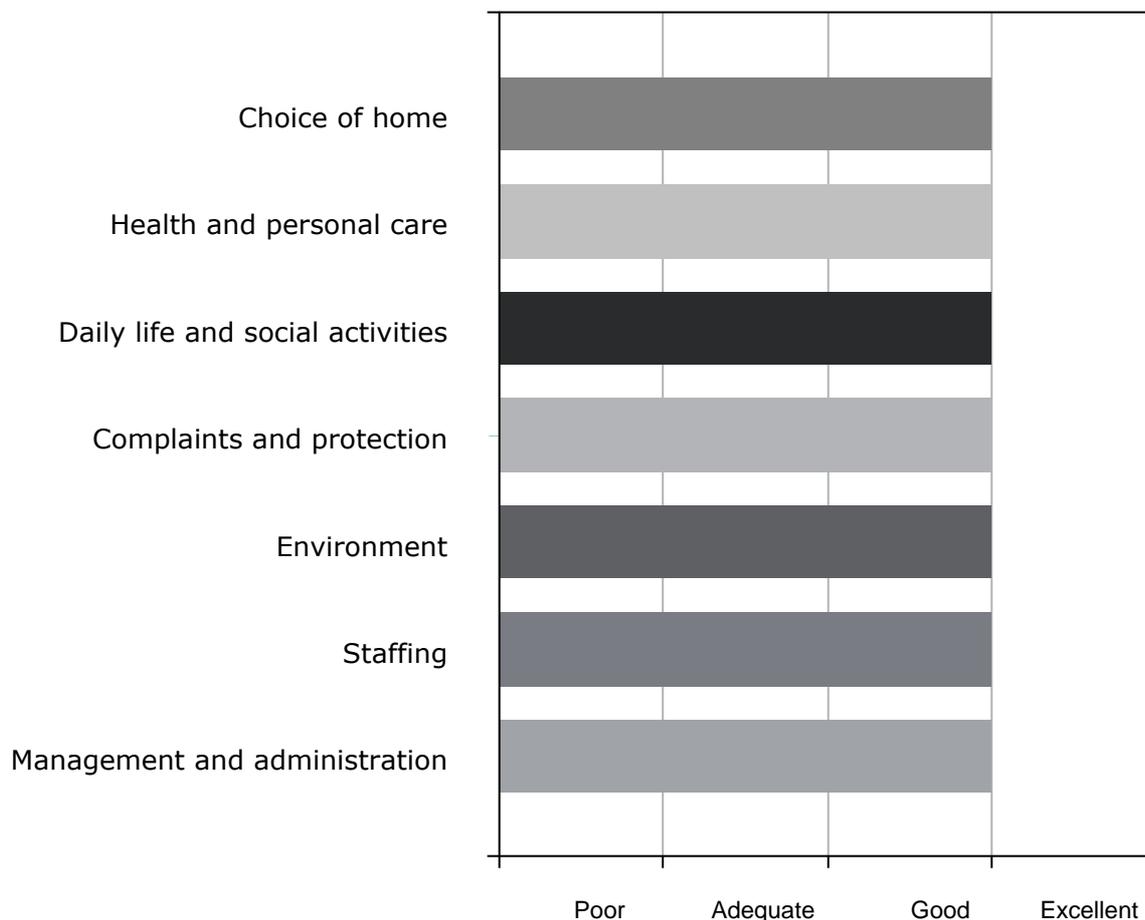
## Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

two star good service

### Our judgement for each outcome:



### How we did our inspection:

The quality rating for this service is 2 star. This means the people who use this service experience good quality outcomes.

This was a key inspection visit and was unannounced. This means that the Home were not aware that we were going to visit. The visit took place on Monday 27 April 2009 between 9.20am and 3.45pm.

The inspection process concentrates on how well the service performs against the outcomes for the key national minimum standards and how the people living there experience the service.

Before the inspection we looked at all the information we have about this service such as previous inspection reports, information about concerns, complaints or allegations and notifiable incidents. This helps us to see how well the service has performed in the past and how it has improved. An Annual Quality Assurance Audit (AQAA) was completed by the manager and returned to us within the timescale required. This document gives information on how the Home thinks it is performing, changes made during the last twelve months, how it can improve and statistical information about staffing and residents.

During this Key inspection we used a range of methods to gather evidence about how well the service meets the needs of people who use it. Time was spent sitting with people in the lounge watching to see how they were cared for and how they spent their day. Discussions were held with people who use the service, staff and visitors to the Home. Information gathered was used to find out about the care people receive. We also looked at the environment and facilities and checked records such as care plans and risk assessments.

Three people living in the home were identified for case tracking. This involves reading their care plans, risk assessments, daily records and other relevant information. Evidence of care provided is matched to outcomes for the people using the service, this helps us to see whether the service meets individual needs.

## **What the care home does well:**

People have an assessment of their needs before they move into the home so they can be confident their needs will be met there.

Information is made available to people before they visit the home so that they can make an informed choice about whether to move in. People are encouraged to look around before agreeing to move in.

Detailed care plans are developed within a week of admission to the Home for each need identified. People have access to advice from health professionals where they need it, so their health needs can be met.

Medicines are well managed for the ongoing protection of people who live in the home

There are lots of opportunities for people to make decisions about their lives so that they do things for themselves and have choices regarding activities of everyday living.

Spiritual needs are met by representatives from local churches who visit frequently.

Meals are nutritious and varied, people said that the food is always good. Assistance to eat meals is provided in a sensitive way.

Adult protection issues are dealt with in an appropriate manner. Staff receive training to recognise and respond to suspected abuse.

Accommodation is clean, well furnished and comfortable. Improvements have been made to facilities at the Home. The manager is aware of maintenance issues which are addressed promptly.

There are sufficient numbers of staff on duty to meet the needs of people living in the home. Recruitment procedures are robust and ongoing training ensures that staff have the skills and knowledge needed to meet individual's needs. Supervision helps to ensure staff carry their job out appropriately.

Health and safety is well managed so that people live in a safe home.

There is a clear management structure and one of the management team or a senior staff member is always on duty during daytime hours to allow for the effective running of the home.

## **What has improved since the last inspection?**

Pre-admission assessment documentation now records the type and level of assistance required by people to enable staff to prepare for their admission to the Home.

Improvements have been made to the information recorded in daily records. These now clearly demonstrate any staff interventions and how people spend their day.

New carpets and flooring have been laid throughout the Home. An extension has been

built which does not increase the number of beds registered but provides more single occupancy bedrooms, therefore reducing the number of shared bedrooms from five to two. New bedroom furniture has been purchased for two bedrooms and six new beds have been bought.

Soiled laundry is now washed in accordance with infection control procedures.

The Home has been decorated throughout and new carpet and non slip flooring has been purchased.

A new shower and toilet has been put in place in the wet room.

Ongoing maintenance takes place throughout the Home.

**What they could do better:**

An appropriate controlled medications cabinet must be available for storage of any controlled medications in use.

Improvements should be made to quality assurance systems. The timescales for undertaking audits should be appropriate and the views of the people that live in the Home and their relatives should be sought on a regular basis.

All staff should undertake initial and updates in mandatory training.

Appropriate signage/pictures should be in place on all bedrooms doors to help people find their own bedrooms and maintain independence and dignity.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details set out on page 4.

The report of this inspection is available from our website [www.cqc.org.uk](http://www.cqc.org.uk). You can get printed copies from [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk) or by telephoning our order line –0870 240 7535.

## Details of our findings

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## Choice of home

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People who are considering moving into the home benefit from having their care needs assessed before admission so that they can be sure the home can meet their needs. These people and their families are provided with information and visit the service prior to admission to enable them to make an informed choice.

Evidence:

Three people were chosen to case track during this inspection. This involved looking at their care files, observing them throughout the day and talking to the staff that care for them. Their living accommodation and the facilities available to them were also looked at.

The care file of the person most recently admitted was reviewed to identify whether appropriate pre-admission processes take place. Standardised documentation is used to record information about people to help the Home decide whether the person is able

## Evidence:

to move in. Brief information is recorded to show whether assistance is required with a task and the number of staff required to assist. This information is used along with the care plan provided by the social worker, where available, to help provide care, until more detailed care plans are available. Care plans are developed within a week of admission using the information obtained during the pre-admission process.

From documentation seen, discussions with the manager and a visitor to the Home, it was noted that pre-admission processes are satisfactory. Sufficient information is obtained about people before the Home confirm in writing that they are able to meet their needs.

The manager said that people who are considering moving in have copies of the Service User's Guide, the Home's brochure and are given a copy of the most recent inspection report. Relatives and potential residents are encouraged to visit, have a look around and stay for a meal before they decide that they would like to move in. This was confirmed by a visitor spoken to during the inspection. It was noted that they were given a lot of information before their relative moved in, they also came and had a look around. This person had looked at the last inspection report and the Home gave them a copy of their brochure and contract of residency. Giving information to people who may wish to move into the Home ensures that they have enough information to make an informed choice about whether they would like to live at Beechwood Gardens or not.

Contracts of residency are issued after the first four weeks of admission. All residents have a contract of residency. The contract records important information regarding fees, room numbers, items to be paid for over and above the fees and other terms and conditions of residency.

## Health and personal care

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People living in the home can be confident their health and personal care needs will be met. Medicine management is considered safe and protects the people who use the service.

Evidence:

The care plans of the three people identified for case tracking were reviewed to see whether health and social care needs have been identified and action recorded to meet these needs. Discussions were also held with two members of staff to evidence whether they were aware of how to provide care for these people. Documentary evidence demonstrated that care needs are identified and recorded. Staff spoken to were aware of the action to take to meet people's needs. People spoken to were happy living at Beechwood Gardens and with the care that they receive.

Each person living at the Home has a care file. This records information about their needs, abilities, preferences and routines whilst living at the Home. The three files seen contained a pre-admission assessment undertaken by the manager or deputy.

## Evidence:

This demonstrates that the Home were aware of people's needs before they moved in.

Care plans contained sufficient information to guide staff regarding the assistance required to meet individual needs in a way that meets people's preferences. Care plans were up to date and had been reviewed on a monthly basis.

Relatives had signed care plan agreement forms to demonstrate that they have been involved in, or offered the option of being involved in, the care planning process. This helps to ensure that personal preferences and routines are included when planning care.

Risk assessments regarding nutrition and the risk of developing a pressure area were available and had been reviewed on a monthly basis. Care plans are developed regarding risks identified these recorded details of the actions that staff are to take to minimise the risk.

Not all care files contained a photograph of the person. The manager was aware of the need for photographs and is in the process of ensuring they are available in all care files.

Daily entries are recorded three times per day. These demonstrate that staff are aware of the person's wellbeing throughout their shift ie where they have spent their day, any assistance given, diet, changes in health etc. This information is used by staff on the next shift to monitor people's changing needs.

Records held regarding bathing and changes of bed linen demonstrate that the people being case tracked have at least one shower/bath per week and bed linen changed as needed.

Records demonstrate that people are seeing the GP, optician, dentist and other external professionals on a regular basis. From discussions with staff, visitors, observations of the people living in the Home and review of records it appears that people's health and social care needs are being met at Beechwood Gardens.

Medication storage, administration and records were reviewed for the three people being case tracked. Medication available was that as recorded on the medication administration records. Records were up to date and clearly written. Copies of prescriptions were available for each person. The deputy confirmed that the prescription is used to check medication received and medication administration records.

## Evidence:

Paracetamol is the only homely remedy. A small bottle of paracetamol is available for residents to take if they have a headache or occasional ache or pain. The manager confirmed that this has been agreed with the GP, at the previous visit to the Home the homely remedies policy was reviewed and found to be satisfactory. Records are available to show the amount of paracetamol taken, what it was taken for and who took it. The amount remaining is also recorded.

A new medication cabinet has been purchased, all medication was stored neatly. There is no controlled drugs cabinet available at the Home but no controlled drugs in use at the time of inspection. The manager was informed that the Home must have a controlled drugs register and cabinet which meets requirements for the safe storage of controlled medications. The manager confirmed that she would discuss this with the pharmacist and obtain a cabinet as soon as possible.

Key custody was discussed and practices at the Home are considered to be safe.

The pharmacy collects any medication to be disposed of every four weeks. There were no excess stocks of medication on the premises on the day of inspection.

People were dressed appropriately for the time of year. Those people seen were dressed in clean clothing, hair was neatly brushed and all had short clean finger nails. One visitor said that "XX is always well dressed and wearing clean clothes, staff treat people with respect and encourage baths or showers regularly". Another visitor said "staff ask what she would like to wear and help her choose if necessary, she is always well dressed".

## Daily life and social activities

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People are able to undertake regular social and leisure activities and maintain contact with family and friends as they wish. Meals are well presented, wholesome and provide people with a nutritious and balanced diet.

Evidence:

People sat in both lounges on the morning of the inspection. Staff gave people the option of watching the television or listening to music. Everyone appeared to be at ease in their surroundings. Some wandered freely around the Home, whilst others sat listening to music. People were seen occupying themselves in activities of their choice such as cuddling a doll, chatting to staff or reading a magazine.

The Home report in their Annual Quality Assurance Assessment that they are "very aware of the importance of stimulation as well as being aware of the difficulties of the sometimes limited interaction that our clients will accept. We find that one to one chats are beneficial, hand holding and hand massage and where appropriate music and singalong, either organised with a paid entertainer or with impromptu sessions with staff". Activity records show that activities such as manicure, hand massage and one to one chats take place with people on a regular basis. Staff were seen spending time

Evidence:

in the lounges chatting to people throughout the day.

Records are completed to demonstrate that activities take place. An activity folder and a separate activity log records the activities available and whether or not the person has joined in or just observed the activity. Records show whether the person has enjoyed the activity or not.

A list of activities that can take place is on display in the dining room. The manager said that they try to ensure these are suited to individual wants and people are asked every day what they would like to do. One person spoken to said "there is always something going on, not too noisy but just enough going on". A visitor said "there is often activities such as playing the organ, one to one activities and doll therapy". One person was observed helping out in the kitchen after lunch and appeared to enjoy assisting staff. From discussions with the manager, visitors and records seen it was noted that a varied activity programme is in operation at this Home.

Religious needs are met by the visiting Church of England Vicar and Catholic Priest who give communion to anyone who wishes to attend.

Choice, independence and individual preferences were discussed with the manager, staff and one person living at the Home. Bathing and showering facilities are available and people are able to choose which they prefer. Currently there are no male care staff. The manager confirmed that male staff would be employed if/when there are more male residents. Individuals would then be given a choice of having personal care provided by male or female staff and this would be recorded on their care plan.

Care plans contain information about preferences, likes and dislikes and staff spoken to were aware of these. One person spoken to said that everyone has a choice of when to get up in the morning and go to bed, what they want to drink and what they want to do in the day. Likes and dislikes regarding food are obtained from family members. Residents are given the main meal and if they say that they do not want this meal they are offered something else. If the Home are aware that someone has a particular dislike they provide an alternative.

One person spoken to said that the food is "lovely and there is plenty of it". A visitor said "XX says he has a six course meal and really enjoys the food". Everyone appeared to be enjoying their meal on the day of inspection. Records show that people are weighed on a monthly basis and their weight remains stable.

## Complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them know how to complain. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Complaints are handled objectively and people are confident that their concerns will be listened to and acted upon. Systems are in place to protect residents from the risk of abuse.

Evidence:

There have been no complaints made about the Home since the last inspection. People are made aware of how to complain through the complaints procedure which is on display in the hallway and is also given to people with their contract of residency. There is a complaints form for people to fill in if they wish.

The manager has an open door policy and encourages people to come and talk to her about any concerns or issues. There is always a senior member of staff on duty during day time hours if the manager is not available. Two visitors said that "if I had any concerns I am confident they would be sorted out", "staff are approachable, if there were any problems I would speak to them and they would sort them out".

Staff training records showed that eleven staff have received training in safeguarding vulnerable adults so that allegation or suspicion of abuse could be responded to in accordance with the home's policies and procedures. It was noted that induction training also covers training regarding the protection of vulnerable adults.

Evidence:

Staff spoken to during this visit were aware of the procedures to follow to protect the people who live in the home.

Discussions with the manager demonstrate that she is aware of the procedures to take to report adult protection issues and the relevant agencies that are to be involved.

Recruitment records sampled showed that a robust procedure is followed for the ongoing protection of people living in the home.

## Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it.

This is what people staying in this care home experience:

Judgement:

People using this service experience **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People living in the home are provided with clean, homely and comfortable surroundings to live in. Recent improvements within the home benefit those who live there.

Evidence:

Beechwood Gardens is situated in a residential area of Earlsdon, Coventry. The Home is close to local amenities such as shops, public houses and bus stops. The exterior of the Home is pleasant to look at and in keeping with the other houses on the road.

The hallway upon entering the Home was bright and cheerful, this area had been redecorated and was clean and gave a welcoming feel. Communal areas consist of two lounge/dining areas. Both were clean with no unpleasant odours. Pictures on the wall, occasional tables, televisions, wall lights and fresh flowers gave these areas a homely, relaxed feel. Radiators were guarded to prevent people injuring themselves on their hot surfaces.

The Home is registered to care for twenty people. There are sixteen single bedrooms, nine of which have en suite facilities and two double rooms with no en suite facilities. As well as the en suite facilities, two toilets, one wet room (shower room) with toilet and one assisted bath with toilet are also available. Disposable soap and hand towels

Evidence:

were available in all toilets to help prevent the spread of infection by the use of communal towels.

The kitchen which prepares and stores the food for the Home was not viewed at this inspection.

A lot of work has been undertaken recently. The Home has been decorated throughout and a new wing built. Non-slip flooring has been put down in all bedrooms, dining rooms and bathrooms. The wet room has been fitted with a new electric shower and toilet. Due to the extension new heating boilers have been fitted, carpets have been fitted to the stairs, landings and the office and new armchairs bought for the reception area. Gardens are in the process of being landscaped. People are being given the opportunity to plant flowers in the raised plant beds.

Bedrooms seen had been personalised with pictures and ornaments and were in keeping with people's tastes and preferences. Shared rooms have portable screening to maintain privacy and dignity for both people sharing the room. Pressure mats are in place for those people at risk of falling, to alert staff that someone has got out of bed at night.

The laundry was clean and there was no backlog of items waiting to be laundered. The tumble dryer has been moved from the laundry room, to an alternative, safer location since it recently caught fire. The manager confirmed that she is in the process of developing a risk assessment regarding staff carrying laundry up and down stairs.

The washing machine was in good working order and has the required settings to wash soiled laundry to infection control standards. During a discussion with the deputy manager it was noted that staff are aware of the correct temperature to wash soiled laundry and are following the Home's procedures regarding this.

Four bay windows have been changed, new double glazed units incorporating window blinds between the sealed units are now in place. These are used instead of curtains. The deputy confirmed that they are better because some residents were at risk of injury from the curtains.

Some of the bedroom doors had a wooden picture frame on them, the manager confirmed that she is in the process of taking all resident's pictures to put in these frames. This should help people identify which is their bedroom.

A visitor said that "the Home is always clean". The Home was clean and fixtures and fittings seen on the day of inspection were in good working order.



## Staffing

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

There are sufficient, competent staff on duty to meet the needs of people living in the home. Procedures for employment, induction of new staff and ongoing training ensure that people who use this service are protected and safe.

Evidence:

People are cared for by a well established team of staff. The manager, deputy, three care assistants, the chef and a domestic were on duty during the morning of the inspection. Duty rotas for the period 20th April to 3 May 2009 were examined and it was noted that sufficient staff are available to be able to meet the needs of those who live at Beechwood Gardens.

The number of staff on duty on the day of inspection was in accordance with duty rotas. Agency staff are not used as existing staff are willing to cover shifts if necessary. This helps to ensure that people living in the Home know who will be providing their care.

Both visitors spoken to praised staff saying "there always appears to be enough staff on duty", "I am very impressed with the staff, they are caring and patient. Staff are young but treat people with respect", "Staff are all very nice". One person said "the staff are all kind, patient and caring, they treat you well".

## Evidence:

Only one person has been employed since the last inspection. Records regarding the recruitment and selection process for this member of staff were seen. These records show that relevant Pre-employment checks such as written references and criminal records bureau checks are undertaken before employment is confirmed. This helps to ensure that people are protected from the risk of having unsuitable staff work in the home with them.

The manager confirmed that all staff have Protection of Vulnerable Adults and Criminal Records Bureau checks on file.

Training was discussed with the manager and records were seen. These showed that fourteen of the seventeen care staff employed have undertaken national vocational training at level two (four staff have level three). The manager confirmed that the remaining staff have signed up for this training which should start soon.

Training certificates showed that staff undertake a variety of training including Promoting independence, Health and safety and Safeguarding adults. Ten staff are currently undertaking a distance learning course regarding dementia awareness at Hinckley college.

Records demonstrate that a majority of staff have undertaken up to date mandatory training. The manager has developed a training matrix and is aware of the staff that need to undertake update training in manual handling and first aid.

Induction in line with Skills for Care requirements is undertaken by new staff. The newest member of staff has just completed induction training at the National Vocational Qualification centre. All staff undertaken in house induction and skills for Care induction as necessary.

## Management and administration

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

This is what people staying in this care home experience:

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The manager has the support to ensure the service is run in the best interests of people living in the home. The safety and well being of the people who use this service, visitors and staff are promoted and protected.

Evidence:

The home has a registered manager, who has completed the registered manager's award and NVQ Level 4 in care. The manager has worked at Beechwood Gardens for seven years and undertakes training to ensure that she keeps up to date with any developments in the social care field.

Various methods are used to obtain the views of the people living at the Home or their representative. This helps to ensure that the quality of the service provided meets their needs and expectations. Residents meetings are used to ask peoples views of daily life at the Home and to inform them of any changes. The last meeting was held in January 2008. Records were available to show any comments made and the action

## Evidence:

taken to address issues raised. Visitors and people living at Home are able to call in and speak to the Manager at any time.

Satisfaction surveys are sent out to visitors/families on an annual basis. All responses seen were positive and praised the Home. There was no evidence of a recent survey. The manager confirmed that surveys are also occasionally given to professional visitors such as chiropodist and external entertainers.

Various audits take place to ensure that systems and practices are being followed and that fixtures and fittings are in a good state of repair. Not all of the audits had been undertaken on an annual basis. The accident audit was very detailed. The manager or deputy also observe staff to ensure that they are following procedures and undertaking safe working practices.

Quality assurance systems go some way to ensure that the people living at the Home are happy with the care that they receive.

The Home are not involved in holding any personal allowance monies on behalf of people. The Home's fees include hairdressing (not perms), toiletries, stockings and chiropody. Anything over and above this could be purchased by family members or by the Home who then send out an invoice for the funds owing.

Records show that all staff have received supervision during 2009. Staff confirmed that they have the opportunity to speak out during these meetings. Supervision helps staff and their supervisor to talk about working practice, training and any issues or concerns.

A number of checks are made to ensure that people's health and safety is maintained. Records regarding checks on fire equipment were all up to date and in good order. The Home received a letter from fire service commending staff for their prompt and effective action regarding a small fire in the laundry of the Home. Staff undertake regular fire training.

Records show that the hoist has not been serviced since September 08. The manager reported that the hoist is currently not in use. This piece of equipment should be serviced ready for use in an emergency situation.

Legionella water checks and water temperature records were all satisfactory.

Health and safety issues are monitored and action taken to address issues raised.



Are there any outstanding requirements from the last inspection?

Yes

No

## Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action
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## Requirements and recommendations from this inspection:

### Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action
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### Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action
1	9	13	Controlled medications must be stored in an appropriate controlled medications cabinet.  This is to ensure the safe storage of medications in line with relevant legislation.	01/06/2009

### Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No.	Refer to Standard	Good Practice Recommendations
1	7	Care plans should contain a photograph of the person to help staff identify who they are providing care to.
2	19	Appropriate signage should be in place on all bedrooms doors to aid orientation for residents.
3	33	The views of people using the services at the Home and their representative should be sought on at least an annual basis.
4	33	Audits should be undertaken on at least an annual basis to demonstrate that the information held is up to date.
5	38	Records should be available to demonstrate that the hoist has been serviced on a regular basis and is suitable for use.

## Helpline:

**Telephone:** 03000 616161 or

**Textphone:** or

**Email:** [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk)

**Web:** [www.cqc.org.uk](http://www.cqc.org.uk)

We want people to be able to access this information. If you would like a summary in a different format or language please contact our helpline or go to our website.

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