



Making Social Care  
Better for People

# inspection report

## CARE HOMES FOR OLDER PEOPLE

### **Beechcroft Nursing Home**

**62-64 Bidston Road  
Oxton  
Birkenhead  
Wirral  
CH43 6UW**

*Lead Inspector*  
Jeanette Fielding

*Key Unannounced Inspection*  
11th December 2006      09:30

The Commission for Social Care Inspection aims to:

- 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

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This is a report of an inspection to assess whether services are meeting the needs of people who use them. The legal basis for conducting inspections is the Care Standards Act 2000 and the relevant National Minimum Standards for this establishment are those for *Care Homes for Older People*. They can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or obtained from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering: [www.tso.co.uk/bookshop](http://www.tso.co.uk/bookshop)

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# SERVICE INFORMATION

<b>Name of service</b>	Beechcroft Nursing Home
<b>Address</b>	62-64 Bidston Road Oxton Birkenhead Wirral CH43 6UW
<b>Telephone number</b>	0151 652 6715
<b>Fax number</b>	0151 652 6715
<b>Email address</b>	
<b>Provider Web address</b>	
<b>Name of registered provider(s)/company (if applicable)</b>	Flightcare Limited
<b>Name of registered manager (if applicable)</b>	Mrs Gaye Hayes
<b>Type of registration</b>	Care Home
<b>No. of places registered (if applicable)</b>	43
<b>Category(ies) of registration, with number of places</b>	Old age, not falling within any other category (43)

# SERVICE INFORMATION

## Conditions of registration:

1. 43 beds nursing care / 20 beds personal care in an overall total of 43

**Date of last inspection** 19th December 2005

## Brief Description of the Service:

Beechcroft Nursing Home is one of a number of care homes owned by Flightcare Limited. The home is managed by Mrs Gaye Hayes who is a first level nurse with many years experience in caring for the client group. This care home is a four storey mature building, situated in the Oxton area of Birkenhead close to local amenities. It is registered to provide nursing care for 43 older persons and 20 of the beds may accommodate clients who require personal care only. Various sitting areas are available throughout the home; these include the main lounge and a small lounge on the ground floor, a quiet lounge and a further sitting area on the lower ground floor. The main dining room is on the ground floor and dining facilities are also provided in the lower ground lounge at the request of residents. Televisions, music centres, piano, tropical fish tanks and in-house library are provided in communal rooms and a selection of celebrations cards can be purchased. Televisions are available for use in bedrooms and telephone sockets are provided in all bedrooms. Accommodation is provided in single rooms, however shared rooms are available on request. Most of the bedrooms have en suite facilities and many are large enough to provide a bed sitting room. A selection of bathrooms and toilets are provided on each floor and assisted bathing facilities are available. Ramp access is available at the side of the building and a lift serves all floors. The front garden is mainly car park. The secluded well maintained rear gardens have walkways and various sitting areas.

# SUMMARY

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

This unannounced inspection was conducted in one day over a period of six hours. During the inspection, care and staff files were inspected and were found to be extremely well maintained and up to date. Discussion with service users confirmed that their privacy and dignity are respected at all times and that they are offered choices in all aspects of daily living. The premises were found to be decorated, furnished and maintained to a very high standard, with many improvements having been made since the last inspection.

## **What the service does well:**

The home is registered to provide nursing care to elderly people. The records held in the home provide evidence that all staff have been given training to ensure that they can meet the needs of the service users. Records relating to service users were detailed and provide evidence that their care needs are met. A high number of activities and social stimulation is provided to service users by the activities co-ordinator and all staff are involved with this during the quiet afternoon periods. The environment is clean, bright and is decorated and maintained to a very high standard. Service users and visitors spoke highly of the staff, their environment and the care given to them.

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

Considerable improvements have been made to the home since the last inspection. New bedroom furniture has been provided and many of the bedrooms have been redecorated and fitted with new floor coverings. Corridors have been redecorated and the whole home is warm and welcoming. The exterior of the home has also been repainted and has been made more attractive by the provision of plants and shrubs.

## **What they could do better:**

The home should continue to provide a high level of service.

Please contact the provider for advice of actions taken in response to this inspection.

The report of this inspection is available from [enquiries@csci.gsi.gov.uk](mailto:enquiries@csci.gsi.gov.uk) or by contacting your local CSCI office.

# **DETAILS OF INSPECTOR FINDINGS**

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Choice of Home (Standards 1-6)

Health and Personal Care (Standards 7-11)

Daily Life and Social Activities (Standards 12-15)

Complaints and Protection (Standards 16-18)

Environment (Standards 19-26)

Staffing (Standards 27-30)

Management and Administration (Standards 31-38)

Scoring of Outcomes

Statutory Requirements Identified During the Inspection

## Choice of Home

### **The intended outcomes for Standards 1 – 6 are:**

- 1.** Prospective service users have the information they need to make an informed choice about where to live.
- 2.** Each service user has a written contract/ statement of terms and conditions with the home.
- 3.** No service user moves into the home without having had his/her needs assessed and been assured that these will be met.
- 4.** Service users and their representatives know that the home they enter will meet their needs.
- 5.** Prospective service users and their relatives and friends have an opportunity to visit and assess the quality, facilities and suitability of the home.
- 6.** Service users assessed and referred solely for intermediate care are helped to maximise their independence and return home.

**The Commission considers Standards 3 and 6 the key standards to be inspected at least once during a 12 month period.**

### **JUDGEMENT – we looked at outcomes for the following standard(s):**

3, 6

Quality in this outcome area is excellent. This judgement has been made using available evidence including a visit to this service.

Detailed pre admission assessments are undertaken on all prospective service users to ensure that their individual needs and preferences are identified.

### **EVIDENCE:**

Detailed pre admission assessments are undertaken on all prospective service users. The care files of the most recent admissions to the home were inspected. These contained completed pre-admission assessment forms, which have been specially designed to identify the care needs of the service users. The forms also include information regarding equipment which may be necessary for use by the service user, or the staff, to provide the care and gives the opportunity to ensure that the equipment is in place in advance of the service users admission to the home.

Special diets are identified and this information is given to the chef who may need to order particular foods to ensure that the appropriate diet is served.

The assessments also include information gathered from relatives, hospital staff and any other person involved in the care of the service user to ensure that all care needs are identified.

A basic plan of care is prepared prior to the service user being admitted to the home which is then reviewed and amended following the admission.

A further assessment is undertaken on service users following admission to the home to identify any changes in their care needs and a more comprehensive care plan prepared.

The care files of service users recently admitted to the home were inspected and provide evidence of the comprehensive and informative assessments.

The home does not offer intermediate care.

## Health and Personal Care

### **The intended outcomes for Standards 7 – 11 are:**

- 7.** The service user's health, personal and social care needs are set out in an individual plan of care.
- 8.** Service users' health care needs are fully met.
- 9.** Service users, where appropriate, are responsible for their own medication, and are protected by the home's policies and procedures for dealing with medicines.
- 10.** Service users feel they are treated with respect and their right to privacy is upheld.
- 11.** Service users are assured that at the time of their death, staff will treat them and their family with care, sensitivity and respect.

**The Commission considers Standards 7, 8, 9 and 10 the key standards to be inspected at least once during a 12 month period.**

### **JUDGEMENT – we looked at outcomes for the following standard(s):**

7, 8, 9, 10

Quality in this outcome area is excellent. This judgement has been made using available evidence including a visit to this service.

Care files are comprehensive and informative and provide staff with the necessary information to enable them to meet the service users individual needs and preferences.

### **EVIDENCE:**

The care files of five service users were inspected and were found to be extremely detailed and informative. Staff are provided with all the necessary information to enable them to meet the service users needs and preferences.

The care plans are reviewed each month or more frequently as necessary. The plans are agreed with the service user, or their next of kin, as appropriate, who sign them to indicate their agreement.

The records held in the home provide evidence that service users health care needs are identified and that specialist advice and intervention is sought where necessary. All accidents are recorded and audited, and appropriate action is

taken to prevent further accidents. The reports completed by the nurses give full details of the actual care given on a daily basis.

Medications were found to be handled in accordance with the home's policy and procedure. The Medication Record Sheets were clear and accurate. All storage areas were clean and organised. Appropriate arrangements have been made for the disposal of unwanted medications and no excessive stocks were held.

Screens are provided in shared bedrooms and service users spoken to during the inspection said that the staff respected their privacy and dignity at all times.

A pay telephone, with a privacy hood has been provided although some service users have chosen to have their own telephone installed in their room at their own cost. Mail is delivered unopened to service user.

Locks are provided on all bathroom and toilet doors to provide privacy, although these can be opened from the outside in the event of an emergency. The care plans also give details of the name by which they wish to be referred to by and service users spoken to said that this is comforting and homely.

Service users confirmed that they meet with their visitors in the privacy of their own bedroom or in one of the communal areas as they prefer.

## Daily Life and Social Activities

### The intended outcomes for Standards 12 - 15 are:

12. Service users find the lifestyle experienced in the home matches their expectations and preferences, and satisfies their social, cultural, religious and recreational interests and needs.
13. Service users maintain contact with family/ friends/ representatives and the local community as they wish.
14. Service users are helped to exercise choice and control over their lives.
15. Service users receive a wholesome appealing balanced diet in pleasing surroundings at times convenient to them.

**The Commission considers all of the above key standards to be inspected at least once during a 12 month period.**

### **JUDGEMENT – we looked at outcomes for the following standard(s):**

12, 13, 14, 15

Quality in this outcome area is excellent. This judgement has been made using available evidence including a visit to this service.

A high level of social activity takes place to provide service users with stimulation and social interaction to enrich their lives.

### **EVIDENCE:**

The service users enjoy a high number of activities and a record is held of all in house activities and trips out. The home holds a cinema night and provides crisps and popcorn. A coffee morning is held each week and a cheese and wine evening is held each month to which relatives are invited. Entertainers visit the home each week and recent trips include a visit to Liverpool Cathedral and shopping. On the day of the inspection, service users had been baking and decorating Gingerbread Men. Service users spoke enthusiastically about the recent mulled wine and mince pie evening. The home employs an activities co-ordinator who organises the events and also spends time with service users on a one to one basis.

The hairdresser visits the home each week and provides a reasonably priced service.

Service users are free to choose whether they take their meals in their own bedroom or in one of the dining rooms. Dining tables are attractively set with tablecloths and table centres. Service users choose from a selection of meals and the menus provide evidence that a varied and balanced diet is offered. Special diets can be provided on the recommendation of the dietician, GP or at the service users request.

Service users spoken to said that they were free to choose the time that they went to bed at night and got up in the morning and what they did during the day. Discussion with both staff and service users confirmed that where possible, service users could request a particular member of staff to attend to their personal care needs in line with the home's key worker system.

Visitors to the home said that they were made very welcome at any time and that staff made every effort to ensure that the service users were given the best care possible.

# Complaints and Protection

**The intended outcomes for Standards 16 - 18 are:**

- 16.** Service users and their relatives and friends are confident that their complaints will be listened to, taken seriously and acted upon.
- 17.** Service users' legal rights are protected.
- 18.** Service users are protected from abuse.

**The Commission considers Standards 16 and 18 the key standards to be inspected at least once during a 12 month period.**

**JUDGEMENT – we looked at outcomes for the following standard(s):**

16, 18

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

The home has a robust complaints procedure to protect service users.

## **EVIDENCE:**

The home has a comprehensive complaints procedure which is detailed in the Statement of Purpose and Service Users Guide and is also displayed in the foyer of the home.

No complaints have been received by the home since the last inspection. Visitors to the home said that they were completely happy with the care given to their relatives.

The records held on the staff files show that training on abuse has been given. Discussion with staff demonstrated that they were aware of the different types of abuse and of the action that would be taken if it were suspected. All staff have had appropriate checks made on them to ensure that service users are protected within the home.

A high number of compliments cards and letters have been received from relatives of service users.

# Environment

## The intended outcomes for Standards 19 – 26 are:

19. Service users live in a safe, well-maintained environment.
20. Service users have access to safe and comfortable indoor and outdoor communal facilities.
21. Service users have sufficient and suitable lavatories and washing facilities.
22. Service users have the specialist equipment they require to maximise their independence.
23. Service users' own rooms suit their needs.
24. Service users live in safe, comfortable bedrooms with their own possessions around them.
25. Service users live in safe, comfortable surroundings.
26. The home is clean, pleasant and hygienic.

**The Commission considers Standards 19 and 26 the key standards to be inspected at least once during a 12 month period.**

## **JUDGEMENT – we looked at outcomes for the following standard(s):**

19, 26

Quality in this outcome area is excellent. This judgement has been made using available evidence including a visit to this service.

The home is furnished and decorated to an extremely high standard to provide a pleasant environment for service users to live.

## **EVIDENCE:**

This home continues to improve to provide a high quality environment for service users. Many of the service users bedrooms have been redecorated since the last inspection and most bedrooms have been provided with new, furniture. The furnishings throughout the home are domestic style to provide a homely environment. Many bedrooms have had new carpet or flooring fitted and are bright and welcoming. New lighting has been fitted in the lounge and dining room and new tables have been provided in the dining room. All corridors have been redecorated since the last inspection and are clean and bright. The home is extremely well maintained with all issues being addressed as soon as they are identified.

Service users bedrooms are extremely pleasant and service users are encouraged to personalise their rooms with pictures, photographs and items of memorabilia.

The exterior of the home has been repainted and is bright and welcoming with plants and flower pots around the parking area. The rear garden is well maintained and is provided with seating areas.

Health and safety are the responsibility of all staff, with the manager and maintenance person taking the primary role in ensuring that these are Health addressed. Staff have been given health and safety training and the records held in the home show that all procedures are followed as required.

Laundry is attended to by dedicated staff. Care had obviously been given with the laundering of linens and personal clothing, and the laundry staff undertake labelling of clothes and minor repairs where necessary.

Infection control policies and procedures are in place and staff records show that training in this is given during the induction programme.

The home smells fresh throughout and there were no unpleasant odours.

## Staffing

**The intended outcomes for Standards 27 – 30 are:**

- 27.** Service users' needs are met by the numbers and skill mix of staff.
- 28.** Service users are in safe hands at all times.
- 29.** Service users are supported and protected by the home's recruitment policy and practices.
- 30.** Staff are trained and competent to do their jobs.

**The Commission consider all the above are key standards to be inspected at least once during a 12 month period.**

**JUDGEMENT – we looked at outcomes for the following standard(s):**

27, 28, 29, 30

Quality in this outcome area is excellent. This judgement has been made using available evidence including a visit to this service.

The home has a robust recruitment policy and procedure to ensure that service users are protected.

### **EVIDENCE:**

The home employs staff in sufficient numbers to meet the needs of the service users. The staff rota shows that staff are appropriately deployed.

The home provides two qualified nurses on duty at all times. The nurses are supported by ten care assistants during the morning and six care assistants until 8pm. Three care assistants support the nurses at night. The home also employs chefs, kitchen assistants, domestic, laundry, catering and maintenance staff.

A high number of training events have taken place since the last inspection for all staff. These training events include nursing and care practices together with health, safety and protection of service users. Further training is planned for the near future to ensure that a high standard of care is given to all service users. A record is held of all staff training undertaken.

The home has a robust recruitment policy and procedure and the records held in the home provide evidence that the procedure has been followed.

Prospective staff are required to complete an application form prior to interview. Two references are taken and checks are made with the Criminal Records Bureau and Protection of Vulnerable Adults registers. Gaps in employment history are checked and evidence of training and qualifications are required to be produced.

All staff have been given training in the protection of vulnerable adults, abuse and health and safety to ensure the protection of service users.

## **Management and Administration**

### **The intended outcomes for Standards 31 – 38 are:**

- 31.** Service users live in a home which is run and managed by a person who is fit to be in charge, of good character and able to discharge his or her responsibilities fully.
- 32.** Service users benefit from the ethos, leadership and management approach of the home.
- 33.** The home is run in the best interests of service users.
- 34.** Service users are safeguarded by the accounting and financial procedures of the home.
- 35.** Service users' financial interests are safeguarded.
- 36.** Staff are appropriately supervised.
- 37.** Service users' rights and best interests are safeguarded by the home's record keeping, policies and procedures.
- 38.** The health, safety and welfare of service users and staff are promoted and protected.

**The Commission considers Standards 31, 33, 35 and 38 the key standards to be inspected at least once during a 12 month period.**

### **JUDGEMENT – we looked at outcomes for the following standard(s):**

31, 33, 35, 38

Quality in this outcome area is good. This judgement has been made using available evidence including a visit to this service.

The views of service users, relatives and other healthcare professionals are sought on a regular basis to enable improvements to continue.

### **EVIDENCE:**

The manager of the home is a qualified nurse who has considerable experience in the management of a care home for elderly people. She holds an NVQ in management at level 4 and records are held in the home of further training and qualifications in care practice to enable her to manage the home to a high standard.

The home is accredited with the quality assurance system ISO 9002 and also undertakes their own internal audits every six months. Customer satisfaction

questionnaires are sent to service users, relatives and other care professionals and these are evaluated and actioned where necessary to ensure that the service provided is regularly reviewed and improved. Service users confirmed that they were regularly asked their views and felt that their suggestions on improvements were taken into consideration.

The Responsible Individual visits the home on a regular basis and completes a report every two weeks.

Service users or their representatives are encouraged to deal with financial matters and the home only holds small amounts of cash for service users on request. Detailed records are held for all purchases made on service users behalf, which includes receipts and accounts records. Secure facilities are provided for the storage of valuables and personal allowances.

The manager and maintenance personnel are responsible for ensuring the health and safety of all service users and staff. All staff have been given training in health and safety to ensure their own and service users protection. Evidence of this training is held on the staff files.

Safety certificates were inspected and found to be well maintained and up to date. Checks on fire detection equipment are made as required and are duly recorded.

All accidents were recorded and the records show that action has been taken to reduce risks and provide protection for the service users.

# SCORING OF OUTCOMES

This page summarises the assessment of the extent to which the National Minimum Standards for Care Homes for Older People have been met and uses the following scale. The scale ranges from:

- 4** Standard Exceeded (Commendable)      **3** Standard Met (No Shortfalls)  
**2** Standard Almost Met (Minor Shortfalls)      **1** Standard Not Met (Major Shortfalls)

"X" in the standard met box denotes standard not assessed on this occasion

"N/A" in the standard met box denotes standard not applicable

CHOICE OF HOME	
Standard No	Score
1	X
2	X
3	4
4	X
5	X
6	N/A

HEALTH AND PERSONAL CARE	
Standard No	Score
7	4
8	4
9	3
10	3
11	X

DAILY LIFE AND SOCIAL ACTIVITIES	
Standard No	Score
12	4
13	3
14	4
15	4

COMPLAINTS AND PROTECTION	
Standard No	Score
16	3
17	X
18	3

ENVIRONMENT	
Standard No	Score
19	4
20	X
21	X
22	X
23	X
24	X
25	X
26	4

STAFFING	
Standard No	Score
27	4
28	3
29	4
30	4

MANAGEMENT AND ADMINISTRATION	
Standard No	Score
31	4
32	X
33	4
34	X
35	3
36	X
37	X
38	4

Are there any outstanding requirements from the last inspection? No

**STATUTORY REQUIREMENTS**

This section sets out the actions, which must be taken so that the registered person/s meets the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The Registered Provider(s) must comply with the given timescales.

No.	Standard	Regulation	Requirement	Timescale for action

**RECOMMENDATIONS**

These recommendations relate to National Minimum Standards and are seen as good practice for the Registered Provider/s to consider carrying out.

No.	Refer to Standard	Good Practice Recommendations

## **Commission for Social Care Inspection**

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