



Inspection Report

Name of Service: The Beeches Professional and Therapeutic Services

Provider: The Beeches Professional and Therapeutic Services Ltd

Date of Inspection: 23 January 2025

Information on legislation and standards underpinning inspections can be found on our website <https://www.rqia.org.uk/>

1.0 Service information

Organisation/Registered Provider:	The Beeches Professional and Therapeutic Services Ltd
Responsible Individual:	Mr James Brian Wilson
Registered Manager:	Mrs Siobhan Duffy
Service Profile: This home is a registered residential care home which provides health and social care for up to 34 residents. The home provides care for residents under and over 65 years of age with learning disability. There are a range of communal areas throughout the home and residents have access to enclosed gardens.	

2.0 Inspection summary

An unannounced inspection took place on 23 January 2025 from 10 am to 4.10 pm by a care inspector.

The inspection was undertaken to evidence how the home is performing in relation to the regulations and standards and to determine if the home is delivering safe, effective and compassionate care and if the service is well led.

The inspection established that safe, effective and compassionate care was delivered to residents and that the home was well led. Details and examples of the inspection findings can be found in the main body of the report.

It was evident that staff promoted the dignity and well-being of residents and that staff were knowledgeable and well trained to deliver safe and effective care.

Residents said that living in the home was a good experience. Residents unable to voice their opinions were observed to be relaxed and comfortable in their surroundings and in their interactions with staff. Refer to Section 3.2 for more details.

This inspection resulted in no areas for improvement being identified.

3.0 The inspection

3.1 How we Inspect

RQIA's inspections form part of our ongoing assessment of the quality of services. Our reports reflect how the home was performing against the regulations and standards, at the time of our inspection, highlighting both good practice and any areas for improvement. It is the responsibility of the provider to ensure compliance with legislation, standards and best practice, and to address any deficits identified during our inspections.

To prepare for this inspection we reviewed information held by RQIA about this home. This included the previous areas for improvement issued, registration information, and any other written or verbal information received from residents, relatives, staff or the commissioning Trust.

Throughout the inspection process inspectors seek the views of those living, working and visiting the home; and review/examine a sample of records to evidence how the home is performing in relation to the regulations and standards.

Through actively listening to a broad range of service users, RQIA aims to ensure that the lived experience is reflected in our inspection reports and quality improvement plans.

3.2 What people told us about the service

Residents spoken with said that living in the home was a positive experience, telling us that they were "happy" or "love it here", and one resident said "this is now my home."

Residents said that staff were kind and helpful, and described staff as "wonderful", and "funny and good company." Residents described various ways that staff helped them during the day to ensure they felt comfortable and safe, and told us that they knew the manager and could easily approach her, "Siobhan (manager) knows everything", "I could go to Siobhan with anything."

Residents told us that they made their own decisions about how they spent their day and that they were supported to do this. For example, one resident talked about their daily routine and how they felt involved with the running of the home through participating in daily household chores that they enjoyed.

Residents told us about their interests, hobbies, or things that were important to them, and how they were able to include these in their day, such as playing games, practicing musical instruments, shopping, cinema trips, reading, watching their favourite TV shows, or enjoying visits from family.

Residents said that they could choose to participate in organised activities if they wished and one resident said that they enjoyed going out for trips in the home's bus. Residents said that they were happy with the environment and that they could decorate their bedrooms to their own taste.

Following the inspection RQIA received six questionnaire responses from residents. All six respondents indicated that they were satisfied with the care and services provided in the home. They described the care as “good”, and commented that staff were “very supportive and always there with a helping hand”, and “always there to listen and talk with me if I need it.”

When asked about support to help them feel safe, respondents said, “I live in a safe environment and all staff make me feel safe...the manager Siobhan makes me feel safe”, “it makes me very safe the way they care for me”, and “they help me when I feel scared.”

No relatives or visitors were available to speak with during the inspection. One relative questionnaire was received following the inspection. This relative indicated that they were satisfied with the care and services provided to their loved one. This relative commented, “I am very happy with the care and support given to my (loved one) ...The Beeches staff know (their) needs very well and provide very satisfactory care...”

Staff spoken with said that they were happy working in the home and that they were satisfied with the staffing arrangements and felt supported to carry out their roles. Staff told us that they were provided with ample training to ensure they were delivering safe and effective care and confirmed that they could raise any issues or concerns with management. Staff expressed that residents’ care and wellbeing was of paramount importance and that daily routines and activities were resident lead, with comments such as “residents determine the day.”

Following the inspection 29 staff survey responses were received. All respondents indicated that they were satisfied or very satisfied that the care provided in the home was safe, effective, and delivered with compassion, and that the service was well led.

Staff comments from the survey included, “everyone works well as a team...management is very approachable...”, “excellent team...providing a high standard of care...the team go above and beyond”, “this is the best managed home”, “the level of service is excellent...a brilliant working environment...led by a management team with compassion, experience, and empathy at the forefront of all they do”, “amazing client led care and great team to work with”, and, “the Beeches provides person centred care and support to individuals...”

One respondent commented, “better communication and better levels of staffing would be helpful day to day.” All comments were shared with the manager for consideration and action where required.

3.3 Inspection findings

3.3.1 Staffing Arrangements

Safe staffing begins at the point of recruitment and continues through to staff induction, regular staff training and ensuring that the number and skill of staff on duty each day meets the needs of residents. There was evidence of robust systems in place to manage staffing.

Residents said that there was enough staff on duty to help them. Staff said there was good teamwork and that they felt well supported in their role and that they were satisfied with the staffing levels.

It was noted that there was enough staff in the home to respond to the needs of the residents in a timely way; and to provide residents with a choice on how they wished to spend their day. For example, staff were seen to respond promptly to requests for assistance, and staff were heard to ask residents about what they wanted to do next.

3.3.2 Quality of Life and Care Delivery

Staff met at the beginning of each shift to discuss any changes in the needs of the residents. Staff were knowledgeable of individual resident's needs, their daily routine wishes and preferences. Throughout the day observation confirmed that staff attended safety briefings or 'safety pauses' prior to mealtimes to ensure good communication across the team about changes in residents' needs.

Staff were observed to be prompt in recognising residents' needs and any early signs of distress or illness, including those residents who had difficulty in making their wishes or feelings known. Staff were skilled in communicating with residents; they were respectful, understanding and sensitive to residents' needs. For example, staff recognised nonverbal cues from a resident and anticipated that the resident was becoming restless and would soon want to move around the home as this was their preferred activity. Staff responded by coordinating which staff would assist the resident to do this and which staff would remain with other residents.

It was observed that staff respected residents' privacy by their actions such as knocking on doors before entering, discussing residents' care in a confidential manner, and by offering personal care to residents discreetly. Staff were also observed offering resident choice in how and where they spent their day or how they wanted to engage socially with others.

It was observed throughout the day that systems were in place to support residents to make choices such as displays of menus including alternative hot meal options and planned activities posters. Staff were seen to encourage and support residents to make choices. Residents were seen to exercise their rights to choose how they spent their time. For example, one resident said that they were enjoying a lie on in bed after breakfast, another resident was seen to change their mind several times about attending an activity and staff respected their decision.

At times some residents may require the use of equipment that could be considered restrictive or they may live in a unit that is secure to keep them safe. It was established that safe systems were in place to safeguard residents and to manage this aspect of care.

Residents may require special attention to their skin care. These residents were assisted by staff to change their position regularly and care records accurately reflected the residents' assessed needs.

Examination of care records and discussion with staff confirmed that the risk of falling and falls were well managed and referrals were made to other healthcare professionals as needed. For example, residents were referred to their GP, or for physiotherapy.

Good nutrition and a positive dining experience are important to the health and social wellbeing of residents. Residents may need a range of support with meals; this may include simple encouragement through to full assistance from staff and their diet modified.

The dining experience was an opportunity for residents to socialise, music was playing, and the atmosphere was calm, relaxed and unhurried. It was observed that residents were enjoying their meal and their dining experience. Prior to the mealtime staff held a safety pause to consider those residents who required a modified diet. It was clear that staff had made an effort to ensure residents were comfortable, had a pleasant experience and had a meal that they enjoyed.

The importance of engaging with residents was well understood by the manager and staff. Observation of the planned activities of games in the morning and music therapy in the afternoon confirmed that staff knew and understood residents' preferences and wishes and helped residents to participate in planned activities or to remain in their bedrooms or communal areas with their chosen activity such as reading, listening to music, waiting to go on an outing, or waiting for their visitors to come.

Life story work with residents and their families helped to increase staff knowledge of their residents' interests and enabled staff to engage in a more meaningful way with their residents throughout the day.

Staff understood that meaningful activity was not isolated to the planned social events or games.

Arrangements were in place to meet residents' social, religious and spiritual needs within the home.

The weekly programme of social events was displayed on the noticeboard advising of future events.

Residents' needs were met through a range of individual and group activities which fell under the headings of therapeutic, educational, social skills, health and wellbeing, and independent living skills. The programmes included activities such as, arts and crafts, music, relaxation, audio stories, reading skills, turn taking, bingo, reflexology, basketball, baking, and road safety.

Residents were well informed of the activities planned for the day and of their opportunity to be involved or to opt out if they wished.

3.3.3 Management of Care Records

Residents' needs were assessed by a suitably qualified member of staff at the time of their admission to the home. Following this initial assessment care plans were developed to direct staff on how to meet residents' needs and included any advice or recommendations made by other healthcare professionals.

Residents care records were held confidentially.

Care records were person centred, well maintained, regularly reviewed and updated to ensure they continued to meet the residents' needs. Care staff recorded regular evaluations about the delivery of care. Residents, where possible, were involved in planning their own care and the details of care plans were shared with residents' relatives, if this was appropriate.

3.3.4 Quality and Management of Residents' Environment Control

The home was clean, tidy and well maintained. For example, residents' bedrooms were personalised with items important to the resident. Bedrooms and communal areas were well decorated, suitably furnished, warm and comfortable.

Discussion with staff and review of records evidenced that the management team conducted daily walks around the home and completed regular environmental audits. Records evidence action taken when deficits were identified. For example, replacement of damaged furniture.

There was evidence that systems and processes were in place to manage infection prevention and control which included policies and procedures and regular monitoring of the environment and staff practice to ensure compliance.

Fire safety measures were in place to protect residents, staff and visitors from harm. Staff were trained in fire safety and knew what actions to take in the event of the fire alarm being raised. Residents were also provided with training to ensure they knew what to expect from staff in the event of a fire. This is good practice as this would help to reduce residents' concerns about emergencies or alarms sounding.

3.3.5 Quality of Management Systems

There has been no change in the management of the home since the last inspection. Mrs Siobhan Duffy has been the manager in this home since 1 March 2018 and has been registered with RQIA since 25 July 2019.

Residents, relatives and staff commented positively about the management team and described them as supportive, approachable and able to provide guidance.

Review of a sample of records evidenced that a robust system for reviewing the quality of care, other services and staff practices was in place. There was evidence that the manager responded to any concerns, raised with them or by their processes, and took measures to improve practice, the environment and/or the quality of services provided by the home.

Residents said that they knew who to approach if they had a complaint and had confidence that any complaint would be managed well.

A record of compliments about the home was held and shared with staff. A recent card to staff including the comment "thank you for the exceptional care and compassion you provided...I witnessed first-hand the dedication and kindness of staff who went above and beyond to ensure (resident)'s comfort, safety and happiness. I know (resident) felt safe and loved and I am forever grateful for the positive impact you had on their life."

4.0 Quality Improvement Plan/Areas for Improvement

This inspection resulted in no areas for improvement being identified. Findings of the inspection were discussed with Mrs Siobhan Duffy, Manager, as part of the inspection process and can be found in the main body of the report.



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