



Making Social Care  
Better for People

Inspecting for better lives

# Key inspection report

## Care homes for older people

<b>Name:</b>	Two Beeches Nursing Home
<b>Address:</b>	2 Wallis Road Waterlooville Hampshire PO7 7RX

<b>The quality rating for this care home is:</b>	two star good service
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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>
Beverley Rand	0 4 1 1 2 0 0 8

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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- 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:	Two Beeches Nursing Home
Address:	2 Wallis Road Waterlooville Hampshire PO7 7RX
Telephone number:	02392232706
Fax number:	01252612539
Email address:	twobeeches@contemplation-homes.co.uk
Provider web address:	

Name of registered provider(s):	Contemplation Homes Ltd
Name of registered manager (if applicable)	
Ms Dawn Swift	
Type of registration:	care home
Number of places registered:	30

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
old age, not falling within any other category	0	30
physical disability	6	30
terminally ill	6	30
Additional conditions:		
A maximum of six service users between the ages of 55 and 64 are to be accommodated at any one time.		
Service users must be at least 55 years of age.		
Date of last inspection		
Brief description of the care home		
Two Beeches is part of the Contemplation group of care homes and is a care home providing nursing care for residents over the age of 55 years. The four single and thirteen shared bedrooms and the communal rooms are accommodated over three floors and are accessible by a shaft lift. The home has a large open lawn at the front, with car parking and an attractive, well-kept, garden at the rear that is accessible to service users. The home is situated in a residential area with access to local amenities.		



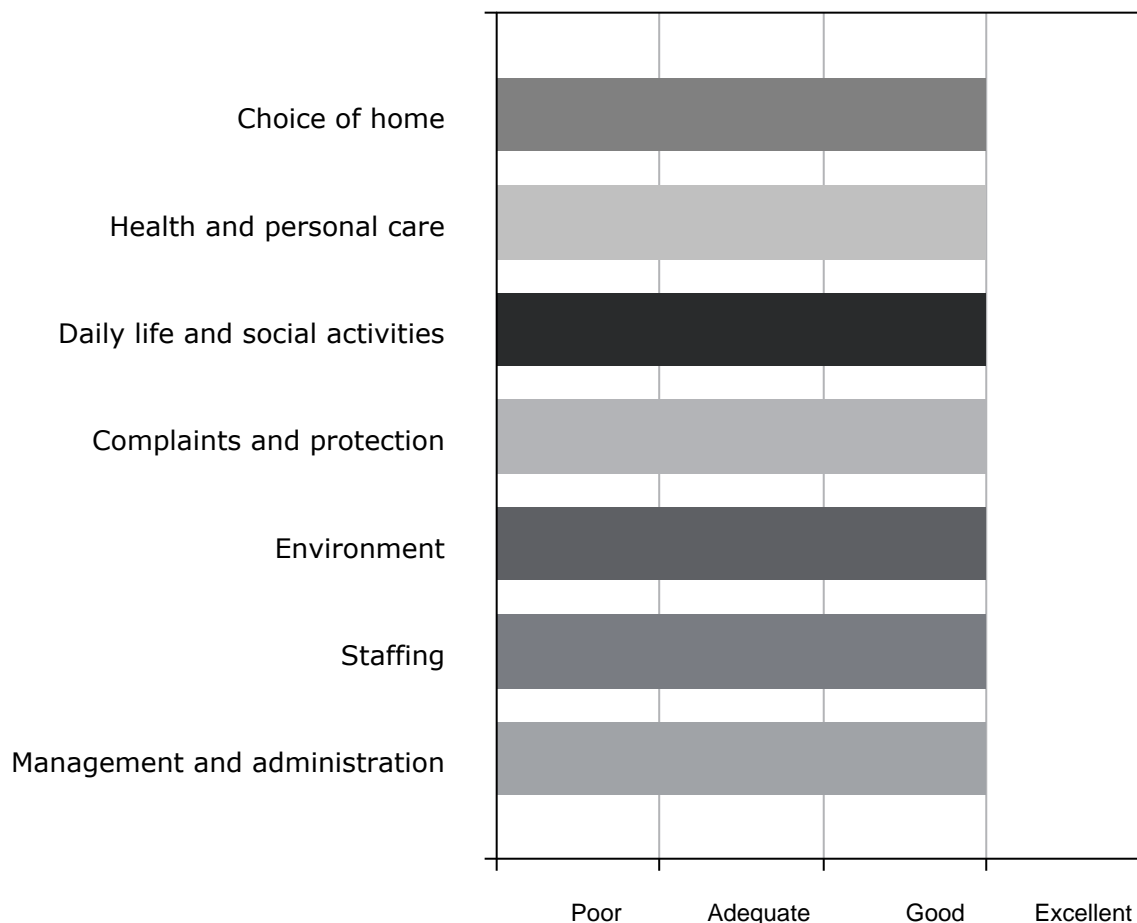
## Summary

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:

This was an unannounced key inspection. Before we visited the home we looked at the last inspection report and any information we had received since the last inspection. During the inspection we spoke with three service users, two staff and the acting manager. We looked around the home and looked at records such as staff recruitment files and care plans.

We were told that the current fees are between 650.80 and 762.80 pounds a week.

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

The home ensures that prospective service users have their needs assessed before they move into the home. All service users have a care plan which identifies individual needs and preferences. The home accesses healthcare professionals when needed. Medication is stored correctly and records are kept accordingly. Staff are respectful when supporting or interacting with service users. An activities programme is provided which includes group and individual time. Visitors are welcome. Service users enjoy their meals and there is choice. There is a complaints procedure in place and service users feel able to talk to management if they had concerns. Improvements continue to be made to the environment with redecorating schedules in place. The home was clean and staff are mindful of infection control procedures. Staff training is a high priority and all but one of the nursing support staff have achieved the National Vocational Qualification in care. Robust procedures are in place for the recruiting of new staff to ensure checks are completed before they start work. The home is currently being managed by the acting manager, who was the deputy manager. There is a system in place for effectively seeking feedback from service users and other interested parties, regarding the quality of care provided. The home looks after money on behalf of some service users and the records matched the money kept. The home is run with due regard to health and safety policies.

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

The last inspection report did not detail any necessary improvement, but the home continues to strive for improvements in the provision of care.

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

We have not identified any areas which need to be improved to meet the National Minimum Standards.

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.csci.org.uk](http://www.csci.org.uk). You can get printed copies from [enquiries@csci.gsi.gov.uk](mailto:enquiries@csci.gsi.gov.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.

All prospective service users have their needs assessed before they move into the home.

Evidence:

We looked at pre-admission assessments and found that they had been completed before the person moved into the home. They detailed all aspects of individuals' needs.

## 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.

Service users benefit from good care planning systems. Medication risks are minimised and medication is administered by trained staff.

Evidence:

Care plans and comprehensive assessments were in place for all service users. Risk assessments include risk of falls, use of bed rails and moving and handling. Care plans include separate information on maintaining a safe environment for the individual, communication, eating, personal care, socialising, mobility and pressure area care. The plans used a tick box format but could, and generally were, added to with more personal information. Plans show individual needs and preferences. Although the plans had been reviewed monthly over the last year, more recently, some had not been. The acting manager was aware of this and was gradually rectifying the situation.

The records examined indicated that a range of healthcare professionals visited the home and that arrangements were made for treatment for service users when it was necessary. Residents said that they saw and received treatment from among others,

## Evidence:

doctors, podiatrists and opticians and when required arrangements to attend outpatient clinics were made by the home. Individuals' health was monitored routinely and regularly, for example, blood pressure and weight.

The home took particular care regarding the nutritional needs of residents and where there were concerns about the sufficiency of an individual's diet the home monitored their food intake. One of the chefs that worked in the home said that they had attended training about the nutritional needs of older people.

The home has adequate and safe storage for medication. The acting manager did not know if the storage facility for controlled drugs complied with the Misuse of Drugs (Safe Custody) Regulations 1973 and agreed to find out. The cupboard was an appropriate style of cupboard and was bolted to the wall. A record is kept of controlled drugs being used in the home and the records and prescribed medication matched. Other prescribed tablets are provided by the pharmacy in blister packs. Prescribed dressings are kept in a named box for each service user. Only trained nurses give medication to service users and there were no gaps on the Medication Administration Records.

We spoke to a service user about the staff, and they said the staff were, 'very good, they help me to walk'. They also confirmed that staff were respectful and used their preferred name when talking to them. We observed staff being respectful to service users, and being mindful of their dignity, throughout the day.

## 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.

Service users continue to enjoy the activities and choice of menu.

Evidence:

The home has employed an experienced healthcare assistant specifically to organise activities. A list of these activities is displayed in the hallway as well as in every service users' bedroom. Activities include games, manicures, making Christmas cards, Karaoke, crosswords, bingo and hand massage. For those service users who choose not to join in with organised activities, time is built into the schedule to undertake one to one sessions, to spend time with those service users doing something they choose, such as looking at a newspaper. One of the service users we spoke with confirmed that there were lots of activities going on and that they particularly liked the Karaoke. A notice board in the hallway was decorated with regard to Remembrance Day.

The home welcomes visitors and they can stay for a meal, at a charge.

Service users are able to bring their possessions and furniture into the home. We saw that service users had personalised their rooms in this way. There was information in the entrance of the home about an organisation that could offer advice, and provide

Evidence:

advocacy that could be helpful to residents and their families.

The daily menu is displayed in the lounge and service users choose which option they would like. The home employs a staff member specifically at meal times. We heard this staff member asking service users what they would like to eat. Service users can ask for an option which is not specifically on the menu for that day. One service user told us that there was, 'choice, they will always make an omelette, the food is reasonable, there is enough' and another told us that the food was good and that they could have cooked breakfast in their room. The home does not have a dining room which means service users do not have the opportunity to socialise at mealtimes. We asked one service user about this and they said they liked to eat at their individual table in the lounge area as they did not have to walk to lunch. The acting manager said it was an issue she had identified and that she was discussing it with the service provider. We saw that the tables were set for lunch with mats so that it would feel more like a mealtime. We were told that soft diets and service users with diabetes were currently being catered for. We saw that service users have a choice of cups and beakers to meet their individual needs.

## 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.

Service users feel able to complain and systems are in place to protect them although one procedure needs amending.

Evidence:

The home has a complaints procedure which is displayed in the hallway. There is a logbook kept for the recording of complaints as well as one for concerns. Service users told us they would feel happy to speak with the acting manager if they had any concerns.

Staff have received training in the safeguarding of adults. The home did not have a copy of the Hampshire County Council Safeguarding Adults procedure but this was later downloaded from Hampshire's website. The home's own procedure was unclear about the responsibility of the home's manager if an allegation was made and the acting manager understood that she would be the, 'investigating officer'. The training manager then told us that new information for managers was currently being provided, which stated that the local authority must be alerted within 24 hours. Staff were aware of how to report any suspicion or allegation of abuse.

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

Service users live in a clean and well maintained home.

Evidence:

We looked around the communal areas of the home and some of the bedrooms. The hallway was being redecorated on the day of the inspection and we were told that the lounge was due to be decorated next. There is one lounge where service users can watch television or listen to music and a conservatory where people can sit quietly.

Service users' bedroom doors had photographs of them, as well as a photograph of their named nurse. Toilets and bathrooms also had pictures on them to aid service users in recognising the rooms. We were told that furniture was being replaced with new and that the majority of beds were four way profiling, which benefit service users who have limited mobility or spend a lot of time in bed.

The home has sluice facilities and a separate laundry room. A staff member works in the laundry every day and we saw that clean clothes were separated into named baskets. Staff are mindful of ways of working to reduce cross infection within the home. Hand wash gels and paper towels are available around the home and staff were seen to use them.



## 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.

Service users are supported by well trained staff who have recruitment checks in place before they begin work.

Evidence:

The acting manager told us that staffing was less at the moment as there were currently less service users. The rota generally showed two nurses on duty through the day, supported by three or four nursing support assistants. A further person worked in the home over the lunchtime to support with meals. Other staff included two cleaners, laundry staff, a chef and a person undertaking maintenance tasks. At night, there is one registered nurse and two nursing support assistants, all of whom are awake through the night.

Only one of the nursing support assistants does not have a National Vocational Qualification, (NVQ) in care. Nine have achieved NVQ level 3 and seven have achieved level 2. One is currently working towards level 3.

We looked at the recruitment files for two new staff and found that the necessary checks, including references were in place before the people started work.

The home has a training programme in place which includes infection control, adult

Evidence:

protection, moving and handling, fire safety, continence and dementia awareness. The acting manager has completed the, 'Train the Trainer' course in moving and handling and is therefore able to complete this training in house. Earlier this year staff undertook training in the Mental Capacity Act which included adult protection. Overseas staff are supported to undertake, 'English at work' courses if necessary. The home has also achieved an, 'Investors in People award. We spoke to staff who confirmed the training available.

## 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 home is well run for the benefit of the service users.

Evidence:

The registered manager has left the home and the home is currently being managed by the deputy manager. She is a qualified nurse and has worked for the provider for twelve years in other homes. She was working as a deputy at Two Beeches for about a year before managing the home. The acting manager has completed the Registered Manager's Award. Other relevant training has included dementia awareness, food hygiene, prevention and assessment of leg ulcers, decision making in end of life, catheterisation, wound management and fire training.

The provider has a quality assurance system in place. After a prospective service user or their representative, visits the home, they are sent a survey to complete about their first impressions. When people move in they are given a welcome pack and invited to complete a survey when they are settled. We were told that surveys are completed on

## Evidence:

a regular basis and the results are analysed by head office and a report written. The acting manager said that surveys were also sent out if any changes had been made within the home, to see how the changes had affected them. Staff are also given surveys to complete, as are relatives and service users who have a short stay. Staff meetings are held three or four times a year or when changes have been made.

Managers of all the homes in the group meet every four to six weeks and there are two big meetings a year to discuss each home in more detail. The acting manager said that staff receive supervision in alternate months, or more frequently if needed. Supervision can be individual or group, depending on the subject matter.

The home looks after money on behalf of some service users. Receipts and records are kept and we looked at these for one service user. The records and amount of money held matched.

Fire equipment maintenance records were maintained appropriately. Equipment such as hoists are maintained regularly. The acting manager told us there had been a problem with one of the boilers recently and described how they had managed the situation to ensure risks were identified and reduced.

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
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### 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
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## Helpline:

**Telephone:** 0845 015 0120 or 0191 233 3323

**Textphone:** 0845 015 2255 or 0191 233 3588

**Email:** [enquiries@csci.gsi.gov.uk](mailto:enquiries@csci.gsi.gov.uk)

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