

Beechwood Place Nursing Home, Malton

Enter and View report
November 2024

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General information

Service address	50-52 Welham Road, Malton YO17 9DP
Service provider	Beechwood Place Care Ltd
Date of visit	12th November 2024
CQC rating	Good (December 2019)
Care home manager	Jessica Middleton
Contact number	01653 692641

Healthwatch North Yorkshire's authorised representatives:

- Helen Littler (Team leader)
- Pat Southgate (Volunteer – pre-visit only)
- Jill Pouncey (Volunteer)
- Julie Broughton (Volunteer)

The team would like to thank Jess and her staff for their cooperation and support in organising and facilitating the visit.



Background

What is Healthwatch?

Healthwatch North Yorkshire is the independent champion for people using local health and care services. We amplify the views and experiences of individuals, particularly those who feel unheard or overlooked, providing them with a platform to share their thoughts and shape the services that matter most to them.

What is Enter and View?

The aim of an Enter and View visit is to gather views and experiences of residents, friends and family and staff of a service and observe the environment to assess the quality of the service.

This visit was an announced Enter and View visit undertaken by authorised representatives who are empowered to enter health and social care premises, announced or unannounced.

The team compiles feedback and observations into a report highlighting good practices and areas for improvement. The home manager can respond before the report is published on the Healthwatch North Yorkshire website.

Where appropriate, Healthwatch North Yorkshire may arrange a revisit to check the progress of improvements. The report is shared with the Care Quality Commission, North Yorkshire Council, Healthwatch England and any other relevant organisations.

The care home selection process focuses on two main criteria: ensuring representative geographical coverage across North Yorkshire and avoiding providers already flagged for improvement by the Care Quality Commission or receiving support from North Yorkshire Council.

Pre-visit and location

Healthwatch representatives gathered information from the management of the home in a pre-visit conducted on the 31st October 2024.

Beechwood place is owned and run by Beechwood place Care Ltd. Their website <https://www.beechwoodplace.co.uk> specifies their objective:

“Our aim is to make a real and lasting difference to the people we support by achieving positive outcomes and enabling as normal and fulfilling a life as possible.”

Layout of the home

The home is in a building that was previously a residential home which has been extended. There are three floors, the ground floor has the communal areas with access to a large garden space plus some resident's rooms. The remaining floors are all residents' rooms. Beechwood place has capacity for 35 residents. At the time of the visit there were 32.

Who were heard from

- **8** residents,
- **8** residents' friends or family members,
- **11** members of staff

All the people we heard from were over 65 with most being 80+. There were 6 females and 2 males, all were white British. Staff tenure ranged from 5 weeks to 8 years. Resident-staff interactions and activities were also observed.

Key findings

Observation

Authorised representatives observed a welcoming and friendly environment where personalised and considerate care was evident. Staff, friends and family and residents are well looked after and content as evidenced by the findings below. There could however be improvements made to encourage more socialisation and engagement in activities for all residents that would like to participate.

Positive feedback

- Beechwood Place is welcoming, with staff appearing **friendly and approachable**.
- Residents felt the home is **clean and comfortable**.
- Staff were knowledgeable of residents and their families **likes and dislikes**.
- Lots of information on notice boards about staff including **well-being and dementia champions**.
- The activities co-ordinator organised **activities tailored to residents' interests**, which were appreciated by residents and friends and family.
- Friends and family were able to leave **feedback** about the home at the entrance.
- Friends and family appreciated the **newsletter outlining any news or activities**.

Areas for improvement

- **Signage:** Clearer signage of visitors' toilet and larger print on signs for rooms and floors would help navigating what could be a confusing floor layout.
- **Socialising:** The communal space could be improved with comfortable seating arranged to encourage socialising.
- **Assist with hearing aids:** Some training on checking that hearing aids are working would be beneficial i.e. low battery.
- **Outside space:** The garden area would benefit from being enclosed to provide a safe outdoor space for residents due to being accessible from the car park.
- **Online:** Ensure the website is kept up to date. For example, the staff information is out of date.
- **Activities:** Residents' feedback and observations suggested more could be done to get residents involved with meaningful activities, where possible, out of their rooms and engaging with each other. Perhaps all staff should consider activities as part of their responsibility.



Enter and View observations

External environment

Beechwood place is generally in a good state of repair with some refurbishment taking place gradually. Despite being in extensive grounds there is limited parking with difficult manoeuvrability.

The main entrance is across from the parking bays. The driveway is on a slope which may present difficulties for those with mobility issues. Access to the building itself is reasonable with a buzzer and a wide door.

The grounds are largely grass with a raised bedding area that the manager mentioned was due to be improved to allow residents to tend to it, but no timeline was mentioned. There is some permanent outside seating and sufficient space for other seating and wheelchairs. Our representatives noted that the garden was accessible from the car park and felt it might be unsafe for residents if left unsupervised.

On the day of the visit no residents used the outside space. Staff mentioned that they did sit out in good weather.

Internal environment

The reception area is welcoming and homely, there are manual and digital sign in options at the entrance. There is also a notice board with key staff members and an activities timetable.

The communal areas are on the ground floor and comprise a dining room, an activity room and a 'garden room'. Generally, these areas lacked a homely and welcoming atmosphere. The



garden room, though decorated with flowers, felt like a corridor connecting key spaces. The room contained a few armchairs and pets including 2 birds and a guinea pig. The activity room was functional but lacked warmth, with furniture pushed aside and cluttered shelves. There was no designated cozy living area for residents. The small dining room could not accommodate all residents, though many chose to eat in their rooms. While a menu and homemade cakes added thoughtful touches, the overall environment would benefit from more inviting and social design.

The style of the building with its various additions means that the layout could be confusing. This would present a challenge to more less mobile residents. Signage is not sufficient to cope with this difficulty, for example there was no visible signage for the garden or visitor's toilet. There was a lack of clear directions regarding the upper floors and the top floor had a sloping roof which represented a hazard which was only highlighted by a small sign.

Accommodation

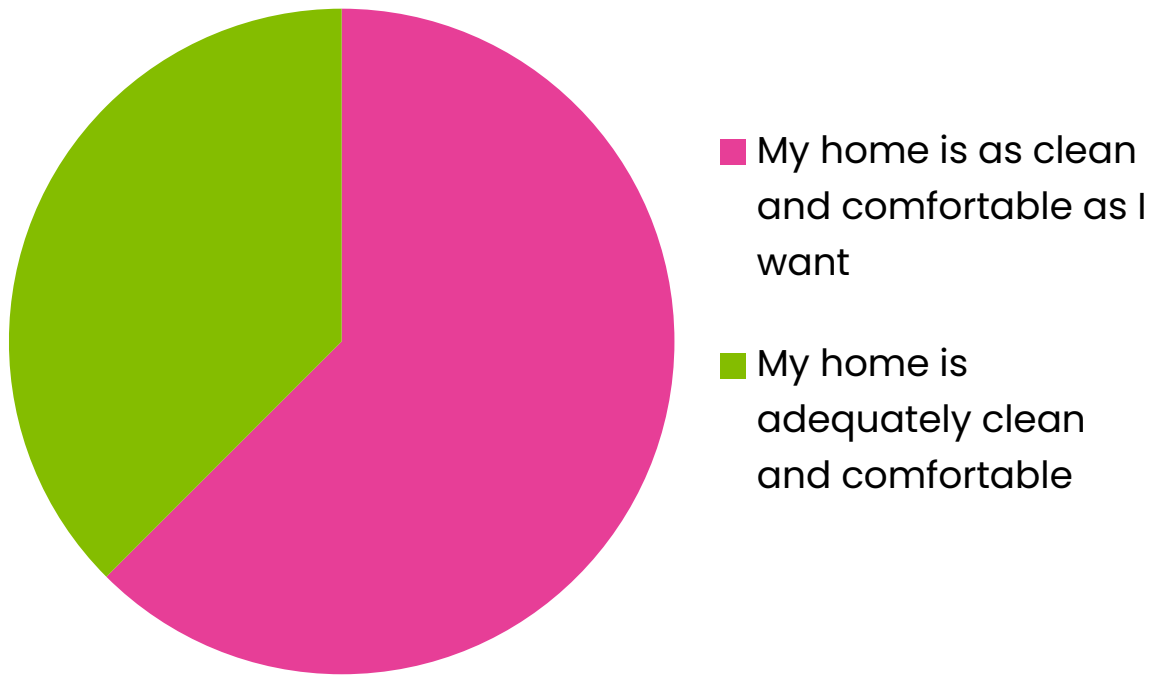
Some Residents' rooms were identifiable with the resident's name and a photo. Staff informed representatives that this was personal choice. Otherwise, each had a number and the residents name on the door. Similarly, inside some rooms were personalised and others were not. All the bedrooms entered were clean and tidy. They vary in size, but all seemed to be sufficient. Bathroom areas that were seen on the 2nd floor were small with no obvious signage. Not all rooms we viewed had ensuite facilities.

Cleanliness and hygiene

All areas of the home looked clean and tidy with cleaning trolleys in use during the visit.

We asked residents about the cleanliness of the home.

How clean and comfortable is your home?



All 8 residents our representatives spoke with said the home was clean or adequately clean.

“Very comfortable, anything I need I get help with”

All the 8 friends and family who responded felt the home was clean and comfortable.

“It’s very good”

Quality of life

General happiness

Residents were asked whether they were happy living in the care home and how much choice they had over their daily life. (By choice we meant could they get up/go to bed when they want, can they go where they like in the home, do they choose what to wear each day etc).

All residents who responded said they were happy living at the home.

“Yes, the staff are friendly”

“Yes, I am happy living here, obviously its not my own home, but I’m happy here”

6 residents stated they had sufficient or adequate choice in their daily lives. One resident did not respond to this question, while another felt they had some choice but not enough. Feedback focused on physical limitations restricting activities rather than any criticisms of the home itself.

“I can’t do very much. I can’t walk so I can’t get out of bed. I get out if I need to go somewhere. Yesterday I went to the hospital. I can’t sit out of bed. This is how it is.”

Most friends and family (6 out of 8) felt their loved one was happy at Beechwood Place.

“He is very happy here.”

“Naturally, she would prefer to be at home but she remains ‘happy’.”

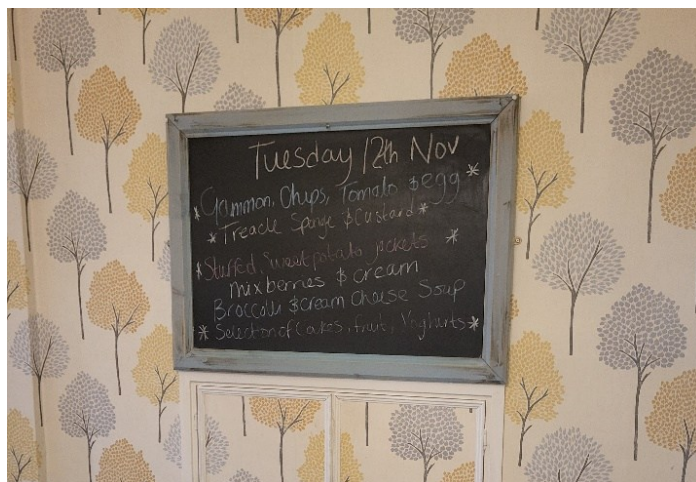
The remaining 2 did not respond to this question.

Food and drink

Residents and friends and family were asked to share their views on the food and drink. Our representatives observed a mealtime in the home.

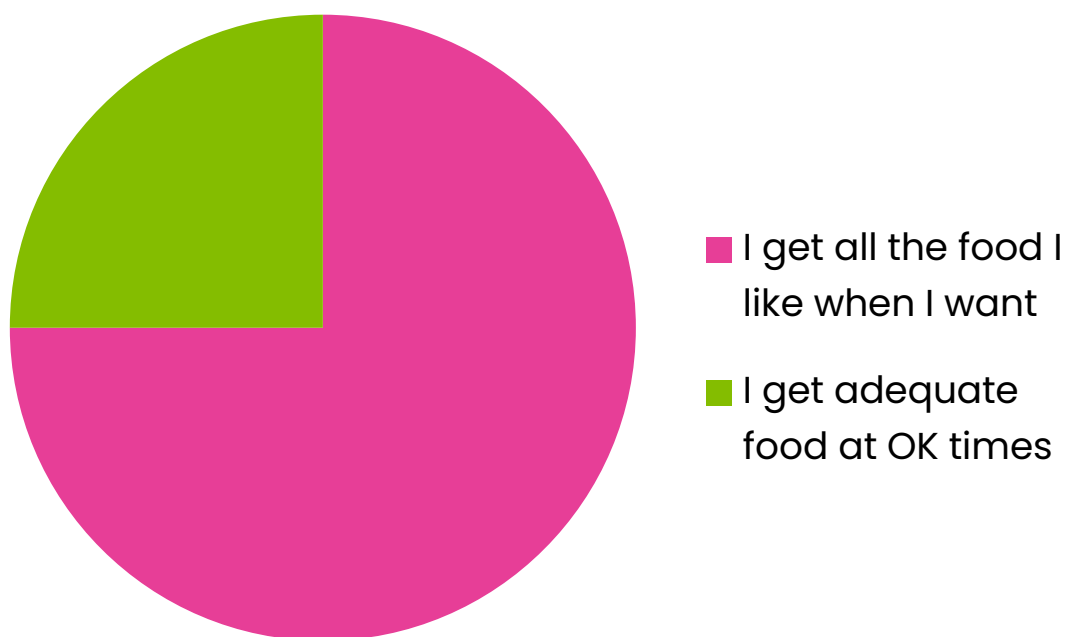
Whilst most residents ate in their rooms, the 5 that were in the dining room were all enjoying their food. The food looked very good, and residents were positive about it with some enjoying second helpings. All staff appeared to be aware of residents’ needs and preferences

and interacted with residents throughout lunch. There was a menu on the wall with the lunch and dessert. One resident who needed assistance with lunch was helped by the activities coordinator.



All the residents were asked if they wanted juice with their meal followed by tea and coffee.

Do you get the food you like when you want it?



Most (6) residents said they get all the food they want when they want it, with the remaining 2 agreeing they got adequate food at ok times.

“Food is very nice.”

“I liked the steak pie, no concerns about the food, here it is very good.”

“You get food at mealtimes which is decided by the home not when I feel like it but saying that I never go hungry. You get a choice, and the food is very good.”

All 8 friends and family felt their loved ones got adequate or better food they liked when they wanted it.

“He’s very happy with the food. They spoil him.”

“First class food and all cooked freshly on the premises. I stay for lunch most days.”

All 8 friends and family confirmed that drinks were readily available and 7 out of 8 stated that their loved one could easily reach the drink when required. The other person noted:

“It’s not always able to reach drinks when in bed as the table is not in the right position.”

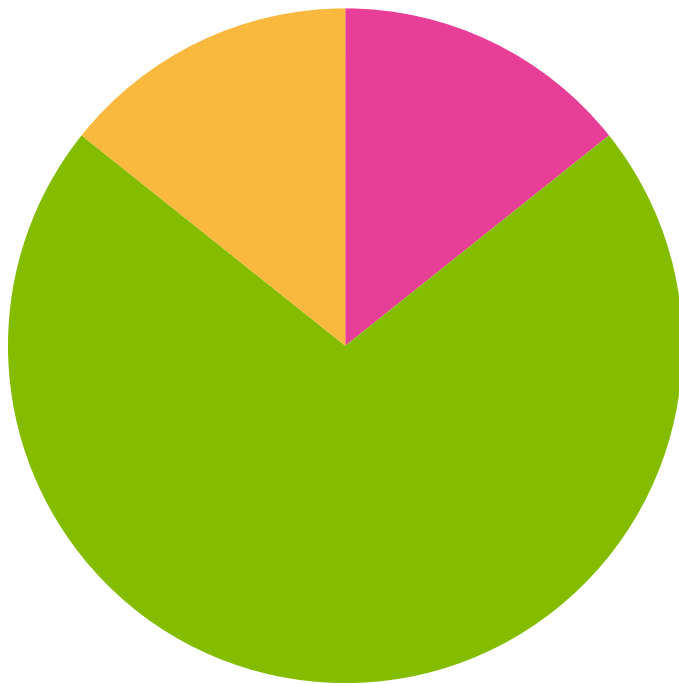
Activities

Residents were asked if they spend their time doing things they value and enjoy. Friends and family and staff were asked if residents have regular access to activities in the home.

A schedule for activities highlighted events planned for the afternoon. Examples include quizzes, dominoes and crafts. No activities were scheduled at the time of our visit and the communal area was quiet. Staff informed our representatives that they usually had about 8 residents participating in activities. The activity coordinator was engaging with residents individually in their rooms, delivering donated flowers and demonstrating a warm, positive connection. Most residents remained in their rooms due to nursing care needs, with some enjoying music or the radio, but overall, our representatives felt there could be more opportunity for engagement activities with these residents.

6 residents said they were able to spend their time doing enough activities or as much as they wanted and enjoyed. Activities they expressed enjoying were playing games, listening to music and making Christmas cards.

Do you spend your time doing things you value and enjoy?



- I'm able to spend my time as I want, doing things I value or enjoy
- I'm able to do enough of the things I value or enjoy with my time
- I do some of the things I value or enjoy with my time, but not enough

People told us that did not feel they did enough mentioned that this was impacted by their own physical limitations.

Staff noted that residents are given a choice of activities whether they can move around the home or are confined to their room. Activities cited by several members of staff include trips out, pet therapy, knitting, crafts and games.

“Varied activities program to cater for different needs.”

“Games, crafts etc. We use monthly activity planning so residents can decide what they want to do and when.”

6 out of 8 friends and family of residents felt they had regular access to activities in the home. Highlights mentioned were days out including to restaurants and visits from animals.

“All activities are well displayed prior to events – she especially enjoys the visits from alpacas and lambs.”

“Not anymore – my mum is bedridden, but she did when she first came here.”

All friends and family who responded said that they received invites to participate in activities. For some residents the question was not applicable as they were unable to participate.

“You can always come to things that are going on in the home.”

Social contact

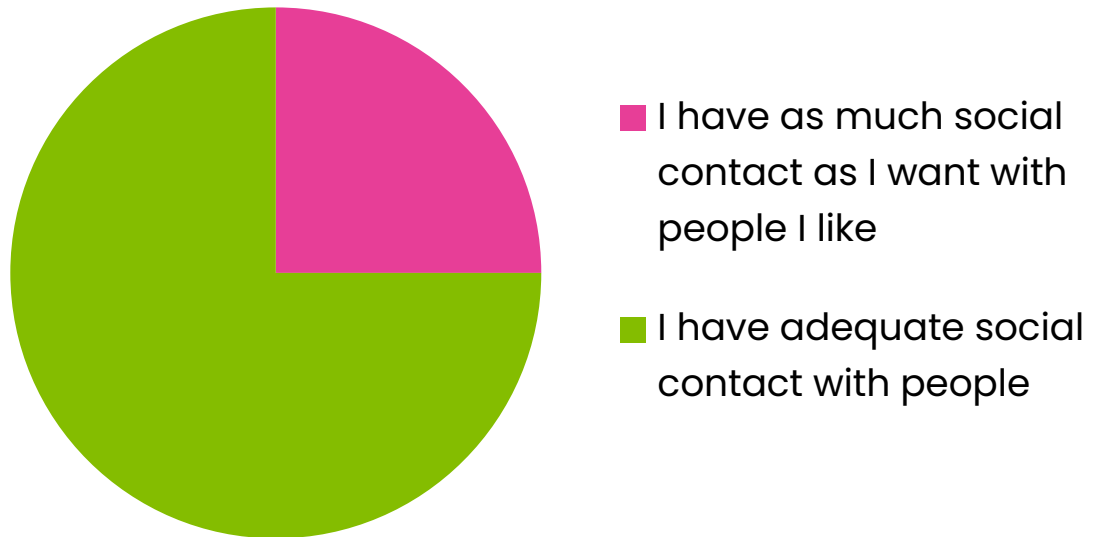
Residents and their friends and family were asked about their social contact and our representatives observed interactions between residents, friends and family, and staff.

A majority of residents had some form of limited mobility with some also living with dementia, this combined with the challenging layout of the building made social interaction difficult. Despite these challenges all residents felt they had an adequate or better amount of social contact. Our representatives noted that the home could provide more opportunities for residents to gather.

“My daughter and wife come to see me. I am not lonely.”

“Contact is mainly with staff as they pass the door or are managing her personal care.”

How much social contact do you have with people you like?



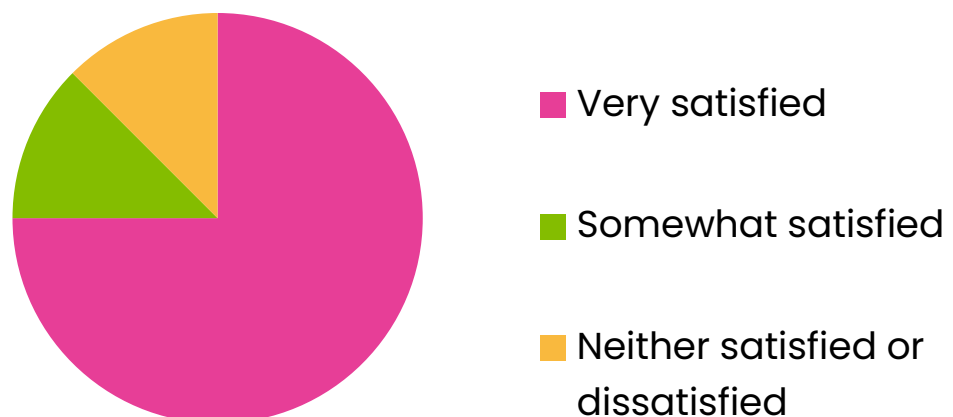
Quality of care

Residents and friends and family

They were asked whether they felt they/their relative was well cared for. We also observed whether residents looked well cared for during our visit.

Our representatives noted that all residents looked well dressed and groomed.

Overall, how satisfied are you with the care that you receive?



7 out of 8 residents who responded were somewhat or very satisfied with the care they received.

“The home is very good. They do a good job.”

“I’d rather be here than anywhere else.”

Half of the people felt clean and able to present themselves as desired with the other half feeling adequately clean and presentable.

We also wanted to know whether residents feel like they need additional help with anything, such as help to eat or drink, and if they receive enough help.

4 out of 8 residents indicated that they required additional help and all but 1 felt they were given enough help.

“I need help going to the toilet and sometimes have to wait a bit depending on how busy they are.”

Friends and family were asked how satisfied they are with the care their loved ones receive.

Everyone said they were very satisfied with the care their loved ones received.

“Very satisfied – each day I leave with peace of mind.”

“The staff treat my mum like part of their family.”

“The only thing I would like is for him to be shaved daily and have his teeth cleaned.”

Relatives and friends were asked if they contribute to individual care plans.

4 out of 6 relatives and friends reported that they contributed to their friend/relatives’ individual care plans.

“I was asked about him, what he can do and what he likes.”

Staff

We also wanted to know how well informed the staff are about the residents they look after in terms of their individual likes and dislikes, food/drink requirements, hobbies/interests.

The staff group has been with Beechwood place for 4 years on average. People who responded to the survey worked in various roles including direct caring roles plus administration and catering. Observers noted that staff appeared caring and aware of residents’ needs and preferences. All staff encountered by Healthwatch representatives were friendly and happy to talk.

9 out of 11 staff reported being somewhat or very informed about the residents they look after and their likes and dislikes. This is achieved through care plans, daily handovers and staff meetings. People who reported feeling uninformed were not in caring roles, so the information was not required.

“The information is in their care plan so we can see it.”

Safety and staff levels

Residents, friends and family, and staff were asked whether they feel there are enough staff, and we asked the residents if they felt safe in the home.

6 out of 8 residents felt there was enough staff to care for them. The residents that did not agree that staffing was sufficient expressed a general desire for there to be more care staff.

“They seem to have enough staff here.”

“Takes ages to come when I need them.”

5 of the 7 residents that responded felt that call bells were answered in a timely manner. One person said:

“Sometimes I have to wait a bit to go to the toilet depending on how busy they are, so I know not to leave it until the last minute to ring the bell.”

7 out of 8 residents that responded said they felt safe in the home. The other resident said they felt adequately safe.

“They don’t always do things the way we would do for ourselves so can make you feel vulnerable.”

8 out of 11 members of staff agreed that there were enough staff for the home to function well.

“Generally, there are enough staff unless there is sickness.”

Staff did feedback that better resourcing would allow them to do more with residents.

“I believe we could have one extra domestic and someone to help with activities.”

“Domestics, activities could have more help.”

Most friends and family (7 out of 8) felt there is enough staff within the home to care for their friend/relative. The 1 negative response is clarified below.

“They seem to be able to manage but there’s never enough is there – there could always be more.”

Health Checks

We asked residents and friends/ family if they had been able to access relevant health checks.

GP visits

All residents indicated that they could access a GP visit when necessary. The Healthwatch representatives noted that a GP was in attendance when they visited the home.

All friends and family who responded to this question confirmed their loved one had access to a GP or that it was not applicable to them.

Eyesight checks

3 residents stated that they were able to access eyesight checks when needed. 1 resident said they did not have access to eye checks although it was not clear as to why they gave this response, and the other responses were not applicable. 2 friends and family responses said their loved one had access to eye care, 5 people said it was not applicable.

Dentist appointments

1 resident said that they did not have access to dental care although it was not clear as to why they gave this response, the others responded that it was not applicable. 1 friends and family responses said access to dental care was available the others reported that it was not applicable.

Hearing checks

1 resident said that they had access to hearing checks while they had been in the home. 4 other responses were not applicable. 3 friends and family who answered this question said their loved ones had access to hearing checks, 4 others reported that it was not applicable.

Friends and family noted the following:

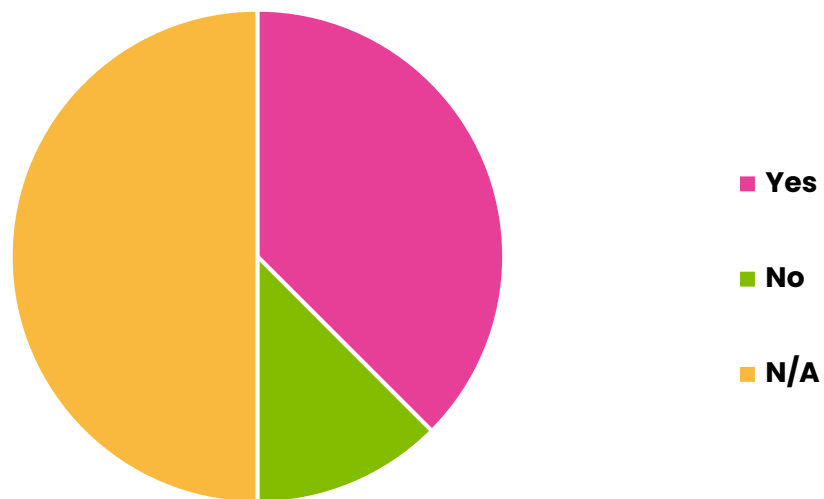
“They arrange what’s needed.”

“I don’t know the answers, but she has regular health checks.”

Sensory needs

We asked residents if they received the help they needed to wear and maintain appliances that support their sensory needs including glasses, dentures and hearing aids.

Do you receive help to wear and maintain appliances that support your sensory health needs



Of 8 residents 3 said yes and 4 said they do not have any associated requirements. The other resident had issues with the battery in her hearing aid which the Healthwatch representative raised and was soon resolved.

Raising concerns and issues

Residents, family, and friends

We wanted to know if they had any concerns about the service, would they know what to do.

6 out of 8 residents said they would know what to do if they had concerns. The remaining 2 residents weren't sure what the procedure was. Our representatives raised this with the manager on the day of the visit and were informed of her daily availability and highlighted the guidance in the newsletter.

"I would speak to the manager or a nurse."

All friends and family confirmed that they would know what to do if they had any concerns.

"Yes, the staff are very approachable."

"I would start by talking to Jess, the manager."

"Ask to speak with the manager or staff."

We also asked if they had been happy with how the concern had been dealt with in the past.

All responses from friends and family said it had not been needed or that their concerns had been dealt with.

"Staff are always willing to talk or provide information."

"No concerns, just little foibles which are soon acted upon."

Staff

How do they feel?

We asked staff about working in the care home.

All staff who responded said that they enjoyed working in Beechwood Place Care Home.

“Home from home for staff as well.”

We wanted to know if staff felt there was anything the home could put in place to improve their working environment

There were 6 responses out of a possible 11, 3 said there is nothing additional they needed.

“No, it’s very fair and they are understanding.”

The other responses are noted below.

“More staff and more appreciation.”

“More training in nutrition.”

“Some care staff can be rude and disrespectful to senior staff.”

10 people also said they felt they were offered all the relevant training they needed to do their jobs. The other staff said it was not applicable.

“I’m happy with everything.”

“I really enjoy it here.”

We wanted to know whether the staff feel well informed about changes to services in the home.

9 staff members agreed they were kept well informed about changes to services, 1 staff member responded no citing occasional lack of communication between staff.

In response to whether inputs from staff members had been acted upon we received the following:

“If you make suggestions, they consider them. It might take some time, but ideas do get fed up the chain.”

“I have made recommendations on many issues, and I am always met with an open mind and willingness to take on board my thoughts and ideas.”

Overall rating

We asked residents, family and friends of residents, and staff how they would rate the home out of 5 (with 5 being the best).

Residents: (4.4/5)



Friends and family: (4.6/5)



Staff: (4.7/5)



Acknowledgements

The Healthwatch North Yorkshire Enter and View team would like to thank the manager, staff, friends and families of residents, and residents for letting us access the care home, and for sharing their views with us. Thanks also to our dedicated volunteers who helped support this Enter and View visit.

Disclaimer

This report is not a representative portrayal of the experiences of all residents, friends and family, and care home staff, but an account of what was observed on the day of the visit and shared with us by those who completed our survey. Note: Some of the residents we spoke with have cognitive impairment which can impact their ability to answer the questions.



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North Yorkshire

Healthwatch North Yorkshire
55 Grove Road
Harrogate
HG1 5EP
www.healthwatchnorthyorkshire.co.uk

t: 01423 788 128
e: hello@hwny.co.uk

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