

DHCH6

Westcliffe Manor

Inspection report

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Ratings

Overall rating for this service	Good •
Is the service safe?	Good
Is the service effective?	Good
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

About the service

Westcliffe Manor is a residential care home providing personal and nursing care to up to 30 people. The service provides support to older people. At the time of our inspection there were 19 people using the service.

People's experience of using this service and what we found

People received a caring service and felt supported and valued as individuals. People told us they were treated with respect and were happy living at Westcliffe Manor. People liked the food available, could access a number of activities and had formed trusting relationships with the staff team.

Risk assessments and appropriate care plans had been developed to meet people's needs. People were involved in developing their care plans which were person centred. Changes were made as people's needs changed.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People received their medicines as prescribed and were supported to access healthcare and other specialist services. The staff also worked with other professionals and organisations to ensure positive outcomes were achieved for people.

Staff were recruited safely, and staffing levels were safe.

The service was well-led and staff felt supported by the registered manager and wider management team.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on 19 July 2021 and this is the first inspection. The last rating for the service under the previous provider was good, published on 24 April 2018.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.



The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service effective?	Good •
The service was effective.	
Details are in our effective findings below.	
Is the service caring?	Good •
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Good •
The service was responsive.	
Details are in our responsive findings below.	
Is the service well-led?	Good •
The service was well-led.	
Details are in our well-led findings below.	



Westcliffe Manor

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was carried out by 1 inspector.

Service and service type

Westcliffe Manor is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Westcliffe Manor is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 5 people who used the service and 3 family members about their experience of the care provided. We also spoke with 1 visiting professional and 2 friends of a person who used the service. We observed interactions between staff and people who used the service.

We spoke with 8 members of staff including the registered manager, regional manager, deputy manager, carers, domestic staff, the chef and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included 6 people's care records and multiple medication records. We looked at 4 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.



Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

- Staffing levels were safe although staff told us they were very busy due to the physical needs of people. We also observed staff were very busy however did not see any evidence people's care needs were not being met.
- People spoke very positively about the staff and the care they received. A person commented, "I think there are enough staff. They are pushed but very committed."
- Staff were safely recruited. Appropriate checks had been made before applicants were offered employment.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place to protect people from the risk of abuse. Staff received training and understood the actions they must take if they felt someone was being harmed or abused.
- Referrals had been made to the local authority safeguarding team when abuse had been suspected and investigations had been completed.
- There was a system in place to record and monitor accidents and incidents. Accidents and incidents were reviewed on a regular basis by the registered manager and the provider. This enabled them to analyse trends and identify any lessons learnt.

Assessing risk, safety monitoring and management

- People's needs were appropriately assessed; care plans had been developed to minimise any risk to people's health and wellbeing.
- People told us they received safe care. Throughout our inspection, we also observed safe working practices, such as moving and handling being carried out.
- Routine checks on the environment and equipment were up to date and certificates were in place to demonstrate this.

Using medicines safely

- Medicines were safely managed. Records of administration were maintained and in line with best practice. This included when people were prescribed creams.
- Guidance was in place for all prescribed medicines administered on an 'as required' basis. This helped staff to understand why certain medicines were prescribed; and under what circumstances they should be offered to a person.
- Medicines were stored securely and only administered by staff who were suitably trained.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises. A visitor told us, "It's lovely here. Very clean and tidy."
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- The provider was enabling visiting in line with government guidelines.



Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to maintain a balanced diet and spoke positively about the quality of food. Comments included, "The chef is very good" and, "The food is great."
- Menus were displayed, and tables were set in a way which promoted a positive dining experience. We observed the chef offering choices and alternatives to the planned menu.
- Staff were aware of people's nutritional needs and had clear information with regards to this.

Adapting service, design, decoration to meet people's needs

• People had the equipment they needed to be supported effectively and were encouraged to personalise their rooms with photographs and personal items. A person told us, "My bedroom is comfortable."

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The service was working within the principles of the MCA. Capacity was assessed; where appropriate, DoLS applications had been made.
- During the inspection we observed staff asking people for consent before they delivered care.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

• People's needs had been assessed. Care plans had been developed based on these assessments, as well as advice and guidance provided by other health and social care professionals.

Staff support: induction, training, skills and experience

- Staff completed an induction and received the training they needed to support people effectively.
- Staff also received ongoing support through supervision and observations of their practice.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff worked with other agencies to ensure people received consistent, effective and timely care. A visiting professional told us, "If we are contacted, they are helpful and organised" and, "All the staff are very helpful."
- People confirmed they were supported to access their GP and other health services when required. A person said, "The staff will call the doctor if needed. We have our own nurse, we are lucky."
- Families members confirmed staff would contact them with any health concerns. A family member said, "If there were problems the staff would ring me up."



Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were well treated. We observed warm and friendly interactions between people. Staff spoke to people in a respectful manner.
- People spoke positively about the care they received. We were told, "I have been staying here for a while. It's very good" and, "The staff are very, very nice."
- Visitors to the home also spoke positively about the care people received. One told us, "All the staff here are lovely and [Name] likes them all."
- Staff considered characteristics protected under the Equality Act 2010. Religious and cultural needs were identified when developing care plans and planning social events and activities.

Supporting people to express their views and be involved in making decisions about their care

• People confirmed they were involved in decisions about their care. Where appropriate, family members and friends were also involved.

Respecting and promoting people's privacy, dignity and independence

- Staff encouraged people to do as much as they could for themselves. Care plans clearly described where people were to retain their independence.
- People's privacy and dignity was also respected. We observed staff knocking on doors and doors being closed before people were supported with care.
- Personal information was kept secure and confidential at all times.



Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Staff were familiar with people's needs and preferences. Important information was recorded.
- Staff were kept updated about any changes to people's care needs through detailed handover records.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- The communication needs of people were assessed and understood.
- Information about the home was available in different formats and languages upon request.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Activities were available for people to access. This reduced the risk of social isolation. Due to the health needs of a number of people many activities were provided on a 1-1 basis in people's bedrooms.
- Because a number of people were cared for in bed, the lounge areas were very quiet on the days of our inspection. We received mixed feedback about this and a person told us, "It's too quiet, I would like it a bit noisier." However, a family member told us, "I think the quiet does [Name] well."
- We discussed the quiet environment with the management team, and we were told activities would be an area of focus to ensure everybody's needs were considered.

Improving care quality in response to complaints or concerns

- A complaints policy was in place and information on how to make a complaint was clearly visible. Records were maintained.
- People confirmed they knew how to raise a complaint and who they would complain to. A family member told us, "I would just go to the office and make a complaint. I think they would do something about it."

End of life care and support

- Care plans demonstrated personal wishes were documented.
- Where appropriate, Do Not Attempt Cardio-Pulmonary Resuscitation (DNACPR) orders were identified clearly in care plans.



Is the service well-led?

Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

This is the first inspection for this newly registered service. This key question has been rated good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- People living at Westcliffe Manor told us they were happy living at the service and received person-centred care. A person added, "I am okay. I am happy."
- Family members also spoke positively about the positive culture at the service. Comments included, "The staff are very nice and friendly" and, "I think it is amazing here. The staff are amazing, the chef is amazing."
- Staff we spoke with told us the registered manager was very supportive and felt confident in sharing any concerns.
- The registered manager demonstrated an understanding of their responsibilities under duty of candour.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- Systems were in place to monitor and review the quality of care and experiences of people. Regular audits were completed and demonstrated a commitment to continuous learning and improving care.
- The registered manager understood their responsibility for notifying the Care Quality Commission of events that occurred within the service and we saw that accurate records were maintained.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered provider sought the views of staff, residents and relatives through questionnaires. Records were maintained of any actions taken and people told us the registered manager was approachable if they wanted to share their views. A visitor commented, "I have met [the registered manager]. They are lovely, very nice."
- Information contained within care plans demonstrated the staff at Westcliffe Manor worked in partnership with other agencies.