

Larchwood Care Homes (North) Limited

Wordsworth House

Inspection report

Wordsworth Street
Hapton
Burnley
BB12 7JX

Tel: 01282778940

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Wordsworth House is a residential care home and is registered to provide accommodation and personal care for up to 40 older people and people living with dementia. At the time of our inspection, 23 people were using the service.

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

People told us they felt safe and were happy with the service they received. They said staff were kind and they were treated well. Relatives we spoke to were also satisfied with the service. One told us, "It's well managed and there is always plenty of staff around. They are helpful and seem to enjoy their job. You get the feeling it's a good place, staff are happy. I can't fault them."

Staff understood how to protect people from abuse and recruitment processes ensured new staff were suitable. People's safety was at the centre of care delivery. Risks were assessed and carefully monitored, and people received their medicines safely. Infection control was well managed, and the home was clean and free from hazards. Improvements were being made inside and outside the home; there was a plan to support this. There were sufficient staff to meet people's care and support needs. Additional staff were being employed to support people with increased activities and going out.

A new manager had been in post since August 2021 and was part way through registering with CQC. The manager was already providing clear leadership to ensure an enabling and person-centred culture was being embedded at the home. People's views and opinions of the service were sought and acted on. People and their relatives were happy with the way the service was managed and told us the new manager was very approachable.

The manager and staff team were committed to providing people with high-quality care. Staff reported good team work and found the new manager supportive and open to ideas. The provider had systems in place to monitor the quality of the service.

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

Rating at last inspection

The last rating for this service was good (published 17 April 2019).

Why we inspected

The inspection was prompted in part due to the home not having a registered manager for some time. We looked at Safe and Well-led at this inspection. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We looked at infection prevention and control measures under the Safe key question. We look at this in all 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.

Follow Up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Wordsworth House

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 Care Act 2014.

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

The inspection was carried out by one inspector and an Expert-by-Experience. An Expert-by-Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Wordsworth House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager who was in the process of registering with the Care Quality Commission. Once registered this means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since they registered with CQC. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers

to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all this information to plan our inspection.

During the inspection

We spoke with five people living in the home in person and rang nine of their relatives. We spoke with three members of care staff, the cook, a domestic staff, office staff and the manager. The providers' quality assurance officer was also visiting to carry out an audit on medicines management, and we also spoke with them. We observed staff interaction with people. In addition, we reviewed a range of records. These included care records of three people, medication records, staff files in relation to recruitment and staff training records. We also reviewed a variety of records relating to the management of the service. We had a walk around the premises and looked at infection control measures.

After the inspection

We continued to seek clarification from the manager to validate evidence found.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. People told us they felt safe with staff who provided care and support to them. One person told us, "I like the staff here. I do feel safe and feel I can speak to any of them if I have any worries."
- Staff were trained to identify and report abuse. They told us they would report any concerns to a member of the management team and were confident action would be taken to protect people.
- The manager had followed due processes and reported incidents to the local safeguarding team for further investigation and CQC were also notified of these.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people's health and safety were assessed and well managed. Staff followed risk assessments and received training that was individualised to people, for example, moving and handling, which helped to manage risks and keep people safe.
- A relative commented, "It's a safe environment, I have peace of mind that [Name] is safe and well looked after."
- A system was in place to ensure accidents and incidents were recorded. Information was reviewed and shared with staff to help ensure risk to people was effectively managed and mitigated.

Staffing and recruitment

- Staff rotas showed there were sufficient numbers of suitably qualified and skilled staff deployed. People told us they received care from a consistent team of staff who knew them well.
- All relatives we spoke with told us they felt there were enough staff to meet people's needs. One said, "There's always sufficient carers around to make sure she's safe." And another said, "Staff are always busy, but they come when he presses his buzzer, practically straight away."
- Some relatives commented about there being no activity coordinator. The manager told us they had recently advertised for an activity coordinator to increase the range of activities offered to people.
- Staff were recruited safely. Pre-employment checks were completed to help ensure staff members were safe to work with vulnerable people.

Using medicines safely

- Medicines were managed safely, and people received their medicines as prescribed. One person told us, "I have a lot of medication, staff give me it on time and stay until I have it." And a relative told us, "They are wonderful with his medication; it gets reviewed and has been changed."

- Staff received training on safe medicines management and had their competency checked on a regular basis. This ensured they maintained appropriate records for the receipt, administration and disposal of medicines. Written protocols were also in place to guide staff on the administration of medicines prescribed 'as and when' required.
- Regular audits helped ensure medicines were administered correctly and any issues found were addressed. Recent improvements had been introduced for the use of topical creams.

Preventing and controlling infection

- People were protected from the risk of infection, including for COVID-19. Staff were trained in preventing infection and using personal protective equipment (PPE) effectively to reduce the risk of infection.
- The provider had processes to admit people safely to the service across the pandemic. Systems were in place for regular testing for people living in the home, staff and visitors. The administrator had robust procedures for monitoring testing and the manager had ensured all relevant people and professionals were aware they had to demonstrate proof of vaccination before entering the home.
- All staff had complied with regulatory requirements in relation to COVID-19 vaccines.
- The home was clean and hygienic. The manager told us of the measures and audits in place, that included competency checks and training for domestic and laundry staff. One relative told us, "It's always very clean and the laundry service is very good."

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.

At the last inspection this key question was rated as good. At this inspection this key question remained the same. 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

- People we spoke with described a positive, caring culture at the home. One person said, "Everyone is kind and cannot do enough for me."
- Relatives said they felt able to speak up and were listened to. One relative told us, "The manager, [name], is lovely, really good and very accessible. The home is well run, I feel like they are my family as well. The home is always clean, looks spotless, with nice touches like flowers on the dining room table."
- Staff told us there was an open and inclusive culture within the service and spoke positively about the manager, comments included, "[Name] is a very good manager, approachable and supportive" and "[Manager] is brilliant, I can speak to [Manager] at any time for support or advice."
- The manager, in the short time she had been there, had brought in changes that had led to more person-centred outcomes for people. Such as using feedback termed "You said, We Did" that led to improvement in activities in the home and to move a lounge to a more suitable location so that people had more positive interactions.

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

- The manager demonstrated a good understanding of their roles and responsibilities and sent us statutory notifications to inform CQC of any significant events that placed people at risk, meaning that CQC were alerted to the current level of risk at the service.
- The manager understood and acted on the duty of candour and relatives told us they were kept up to date with any issues or concerns. One relative told us, "They are very good at communicating, if she is not well, if I need updating, I can't fault them on that. She had a fall a while ago and I got updated at every stage. I've been told I can always ring if I need to."
- Robust systems were in place to learn from incidents and these were shared with staff in flash meetings, supervisions and by the use of a secure social media platform.
- Systems for supporting staff including inductions, supervision and appraisals were implemented to help support the delivery of safe and high-quality care.
- Audits and governance processes were in place to ensure that the safety and quality of care was monitored and analysed. The new manager had introduced audit tools to allow for more effective analysis of risks across the home, such as for falls and infections. This meant people experienced improved

outcomes in their general health as more timely referrals were being made to external healthcare professionals for advice.

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

- The service actively engaged people to ensure they had a say in the running of the home. Feedback from people, staff and relatives was welcomed by the provider and was used to help make further improvements. One relative told us, "I have brought things to their attention, and I have felt listened to, and they were rectified straight away."
- However, some relatives had told us that more formal feedback about the running of the home had been limited across 'lockdown'. The manager said she was planning on sending out surveys in place of relatives' meetings, due to current restrictions on visits.
- Regular staff meetings were held which enabled the manager and provider to continuously monitor and improve people's experiences of the care and support provided.
- Staff told us communication by the management team was good with regular staff meetings and that their views were listened to. They told us they looked forward to coming to work. One told us, "We have such a good rapport with the residents, it's a happy home and there is a good atmosphere." Another staff member told us, "It's a lovely staff team and we all work so well together, we all have the resident's best interests at heart."
- The service worked effectively with external agencies such as commissioners, safeguarding teams and health and social care professionals.