

Winnie Care (Macclesfield) Limited Genesis Care Home

Inspection report

197 Peter Street Macclesfield Cheshire SK11 8ES

Date of inspection visit: 30 May 2018 05 June 2018

Good

Tel: 01625421623 Website: www.winniecare.co.uk Date of publication:

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Ratings

Overall rating for this service

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

The inspection took place on May 2018 and 5 June 2018 and was unannounced.

Genesis Care Home 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.

Genesis Care Home accommodates up to 42 people in one purpose built building. On the days of our inspection there were 40 people living at the home. Genesis Care Home is a three storey building with single bedrooms that all have ensuite facilities. Each floor has a lounge and dining area and a passenger lift is available.

The home has a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers they are 'registered persons'. Registered persons have a legal responsibility for meeting the requirements of the Health and Social Care Act 2008 and associated Regulations about how the service is run.

At the last inspection the home was rated Good. At this inspection we found the home remained Good. The home is rated Good as it met all the requirements of the fundamental standards.

Safe and robust recruitment procedures were in place and sufficient staff were employed to meet people's assessed needs. All staff had completed an induction and completed mandatory training for their roles. Staff supervision took place regularly and also an annual appraisal. Staff attended team meetings.

People's needs were assessed prior to moving in to the home and this information was used to develop risk assessments and person centred care plans. These documents were regularly reviewed and updated as required. People were offered choice and their independence promoted where possible.

People's needs that related to age, disability, religion or other protected characteristics were considered throughout the assessment stage and care planning development.

The dining experience at the home was positive. People were complimentary about the food and drink and told us they were always offered a choice. Staff offered appropriate support as required and demonstrated good interaction throughout mealtimes.

We observed people being treated with dignity and respect. Positive interactions between people and staff were consistently observed throughout our visit. Staff were caring and demonstrated kindness and empathy.

Activities were available for people to participate in if they chose to and they told us they enjoyed these.

A safeguarding policy and procedure was in place. Staff had received training in safeguarding and were confident to raise any concerns they had.

The registered provider had medication policies and procedures were in the place. medicines were ordered, stored, administered and disposed of in accordance with good practice guidelines.

Governance systems were in place and included regular audits of key areas across the home. The information from the audits was analysed to identify areas for development and improvement and these areas were actioned in a timely manner.

The home operated in accordance with the principles of the Mental Capacity Act 2005 (MCA). Records showed that capacity assessments were in place when required. Consent was sought for care and treatment.

A complaints procedure was in place and people and their relatives told us they knew how to raise a concern or complaint.

Genesis Care Home was well maintained and all equipment was regularly serviced. All required health and safety checks and documentation were in place as well as fire safety equipment checks.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe? The service remains Good.	Good ●
Is the service effective? The service remains Good.	Good ●
Is the service caring? The service remains Good.	Good •
Is the service responsive? The service remains Good.	Good ●
Is the service well-led? The service remains Good.	Good ●



Genesis Care Home

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This was a comprehensive inspection carried out by one adult social care inspector. The inspection was unannounced and took place over two days on 30 May 2018 and 4 June 2018.

Prior to the inspection the provider had completed a provider information return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and any improvements they plan to make. We used this information as part of our inspection planning and throughout the inspection process.

We checked the information that we held about the service and the registered provider. This included statutory notifications sent to us by the registered manager about incidents and events that had occurred at the service. A notification is information about important events which the service is required to send us by law.

During the inspection we spoke with eight people living at the home, two people's relatives, one health and social care professional, two support workers, two senior support workers, the principal care, the registered manager and the deputy manager. We also spent time looking at records, including four care plan files, five staff recruitment and training files, medication administration records (MAR), complaints and other records relating to the management the service.

We contacted the local authority quality monitoring and safeguarding teams who told us they did not have any concerns about the service.

Is the service safe?

Our findings

People told us that they felt safe and supported living at the home. Comments included, "It is reassuring that staff check on me at night" and "I feel safer here than I did living in my own home."

We reviewed staff rosters and they confirmed enough staff were available to keep people safe, meet their needs and offer the correct level of support. The recruitment procedures put in place by the registered provider continued to be robust and records confirmed this. Each staff file held a fully completed application form with gaps in employment explained and at least two references that included the applicants most recent employer. An up-to-date disclosure and barring check (DBS) was held for each person employed.

The service continued to have systems in place to safeguard people from abuse. Staff had all received training in this area and demonstrated a good understanding of what abuse is. Clear procedures were in place for the reporting of suspected abuse and all the staff understood this.

Risk assessments were in place where areas of risk had been identified and included clear guidance for staff to support people. Risk assessments were regularly reviewed and updated following any changes. This meant staff provided the correct level of support relevant to the individual.

Staff used personal protective equipment (PPE) when providing personal care. All staff had completed infection control training and described the importance of PPE as well as hand washing between tasks. Staff followed safe working practices that reduce the risk of the spread infection.

Policies and procedures were in place for the safe management of medicines. People's medicines were ordered, stored, administered and disposed of in accordance with best practice guidelines. All staff that administered medicines had received training and had their competency checked at least annually. Medication administration records (MAR) were fully completed and regular audits were undertaken. Comments from people included "Staff help me with my medicines that I can't do this anymore" and "I always get my medicines on time."

Incident and accident records were fully completed by staff. These were regularly reviewed by the registered manager to identify any actions to be taken as well to identify any trends, patterns or development opportunities.

Genesis care home was well maintained and free from any offensive odours. All equipment was well maintained and regularly serviced. All health and safety checks were in place.

Is the service effective?

Our findings

People spoke positively about the food and drink at the home. Their comments included "The food is always lovely", "The meal that have been very tasty and varied" and "The staff manage my diabetes very well and I still have really nice meals."

People were supported to eat and drink in accordance with their assessed needs. Staff worked closely with healthcare professionals to ensure that people had access to nutritious meals that met their preferences. The service worked with dieticians and speech and language therapists where concerns had been identified around weight loss or swallowing. One person told us they had put on some much-needed weight as their meals were fortified and extremely tasty.

People were supported to maintain their health and well-being with the support of a wide range of community healthcare services. The registered provider worked closely with the local GPs, district nurses, physiotherapists and occupational therapists.

Communication between staff and people living at the home was good. People were consistently acknowledged when staff walked past them and comfortable conversation was seen taking place throughout the visit. Staff had a good understanding of people's histories, likes and dislikes. A healthcare professional told us that communication between them and the staff was very good.

All new staff completed The Care Certificate which is a nationally recognised qualification based on a minimum set of standards that social care and health workers follow during their daily working life. The standards give staff a good basis from which they can further develop their knowledge and skills. All staff undertook regular mandatory training to meet the requirements of their roles. Staff told us and records confirmed they received regular supervision and an annual appraisal. The management team undertook regular observations while staff were working and fed this back in their supervision sessions. This meant staff were supported to continually learn and develop through the supervision process.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the mental capacity (MCA). The procedures for this in care homes and hospitals are called the deprivation of liberty safeguards (D0LS). DoLS were evidenced within the care plan files.

The home operated in accordance with the principles of the Mental Capacity Act 2008 (MCA). The registered manager was knowledgeable about the MCA and DoLS and knew the CQC (Care Quality Commission) needed to be notified when the outcome of any application was known. Care records demonstrated that people were offered choice and always consulted. Capacity assessments were in place and fully completed. Consent was clearly evidenced and best interest decisions were in place within the care plan files.

Our findings

People and their relatives spoke positively about the staff and management team. People's comments included "Nothing is too much trouble for any of the staff", "The staff treat me really well", "The staff are lovely and they meet all my needs" and "The staff are very kind and caring."

People told us that staff always respected their privacy and dignity. Their comments included "Staff knock on my bedroom door before entering" and "Staff keep me covered up where possible when supporting me with personal care." Staff described the importance of respecting people's privacy wherever possible. Staff did not rush people when undertaking tasks and always worked at each person's own pace.

Throughout our inspection staff all demonstrated a very good understanding of the people they supported. They described people's histories, likes and dislikes and appeared to have developed very positive relationships with them. Staff were observed demonstrating reassurance, direction, kindness, patience and empathy throughout our visit.

People's communication needs were considered throughout their care plans. This included details about any sensory loss and included clear guidance to staff about how to support each person's individual need. For example, one person needed reassurance when finding it hard to express what they were trying to say. Staff were advised to allow the person time and to offer support and encouragement during any difficulty.

We saw staff promoting people's independence when they supported them. People were offered choices they included where they would like to sit in the dining room, if they would like to sit in one of the lounges or would they like time in their bedroom.

People's records with stored securely to maintain the confidentiality. Records were stored within an office that had a key code for access. Staff ensured daily records were completed in privacy to protect people's personal information.

Is the service responsive?

Our findings

People told us that the enjoyed the activities available at the home. Comments from people included "I thoroughly enjoy Holy Communion", "I enjoyed the trip on the canal boat" and "The singers that visit are very good and I enjoy listening to the old songs."

People told us they have the choice to join in activities or not. One person told us they chose not to participate in activities as they went out regularly with their family. A display board at the home promoted activities and used large print word descriptions and pictures to promote accessible information.

An assessment of each person's needs was undertaken prior to them living at the home. People and their relatives where appropriate were included in this process. The information gained during the assessment was used to develop people's individual care plans. Information held within the care plans reflected people's individual needs and included information about their medical history, interests and activities, personal care, mobility, continence and memory. These documents were reviewed regularly and updated as required. People and their chosen relatives were included in this process. Any changes to care plans were promptly shared with staff to ensure continuity of care.

The home had specific end-of-life care plans that they used within people's care plan files at the appropriate time. People's choices and preferences were clearly documented. The staff and management team spoke positively about continuing to support people to the end of their life if they chose and were able to stay at the home.

People living at the home had specific needs in relation to equality and diversity. Care plans showed that people's needs were considered during the assessment process and as part of the care planning in relation to; age, disability, religion as well as other protected characteristics.

The registered provider had a clear complaints policy and procedure in place. People and their relatives told us that they knew how to raise a concern or complaint and felt confident to do so. There had been two complaints during 2017 that had been fully investigated and responded to and no complaints during 2018.

Is the service well-led?

Our findings

People and their relatives spoke positively about the management team. Their comments included, "The management team are very visible around the home" and "The managers are very approachable and will always listen to my worries."

A healthcare professional told us that they had developed positive relationships with the home and the management team were responsive. They said that three people had chosen to stay at the home following a period of rehabilitation rather than return to their homes in the community. One person who had a period of two weeks respite and rehabilitation told us it had been a very positive experience.

The registered manager had been in post since 2016. People told us they knew who the manager was. Staff said the manager was approachable and supportive.

The registered provider undertook daily, weekly and monthly audits at the home. Topics reviewed for quality monitoring purposes included care plans, falls, health and safety, medicines management, accidents/incidents and daily records. There was evidence of analysis and actions identified to highlight and address any areas for development and improvement. The medicines audits had highlighted ongoing issues that related to the organisation providing medicines at the home. The registered manager had introduced a new organisation that met the home's specific needs more fully to ensure the safe management of medicines.

The staff and management team spoke with enthusiasm about their roles in the service that they offered to people living at the home. During all discussions they demonstrated an open and transparent approach. They spoke about continual development and opportunities to learn through the people they supported and their relatives. The management team regularly held meetings with staff.

Residents' meetings were undertaken and people were invited to give feedback about their experience of living at the home, the support they received from staff, the cleanliness of the home and activities available. A recent meeting had highlighted that people would like more day trips as the weather improved and plans were underway to arrange these. People had been very complimentary about the staff team and also housekeeping arrangements.

The registered provider had developed a comprehensive set of policies and procedures that were regularly reviewed and updated. These gave guidance to staff in all areas of their work and employment.

The ratings from the previous inspection were clearly displayed at the home.