

Mrs Vivien Perry

Westholme

## 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

The inspection visit at Westholme was undertaken on 15 December 2016 and was unannounced.

Westholme provides care and support for a maximum of 26 older people. At the time of our inspection there were 24 people living at the home. Westholme is situated in a residential area of Lytham St Annes close to local amenities. Accommodation is spread over three floors, with lift access for people's ease of use. Communal areas consist of lounges, a dining area and a conservatory with access to a comfortable decking area.

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

At the last inspection on 23 September 2015, we rated the service as Requires Improvement under well led. This was because breaches of legal requirements were found. The provider failed to ensure quality assurance systems effectively monitored people's safety. This was because the management team did not have required care documentation or an up-to-date fire risk assessment in place. This meant staff had no guidance about the safest and most appropriate method for protecting people in the event of a fire.

During this inspection, we found the provider had introduced fire evacuation plans personalised to each person's requirements in the event of a fire. Additionally, they had implemented a new, updated fire risk assessment. This showed improvements had been made to maintain everyone's safety.

People and their relatives told us they felt safe and secure at Westholme. One staff member said, "I am passionate about my job and I try my hardest to make sure everyone's safe and comfortable." Staff received safeguarding training to underpin their knowledge about protecting people from abuse or poor practice.

Records we looked at evidenced the provider had safe procedures to ensure they recruited suitable staff to support vulnerable people. We found staffing levels were sufficient to meet people's requirements in a timely manner. Staff had training and regular supervision to support them in their work.

Staff concentrated on one person at a time when administering their medication. The management team provided relevant training to underpin their knowledge and competency. This demonstrated the provider protected people from the unsafe management of their medicines.

Staff received training and demonstrated a good understanding of the principles of the Mental Capacity Act 2005 and associated Deprivation of Liberty Safeguards. Throughout our inspection, we observed they asked people for their consent before undertaking any assistance. One relative told us, "Even though [my relative] doesn't always understand, they still ask her first. They explain things in simple, brief terms without

patronising her."

We observed meals were presented well, of ample portion and contained fresh produce. People spoke highly of the chef and we noted staff updated care plans in line with the effective management of the individual's nutritional support.

Staff were friendly, caring and kind when they interacted with people and their relatives. One family member told us, "The carers are wonderful." Care records included details about each person's preference in relation to the maintenance of their dignity and privacy. We found people and their representatives were fully involved in their care planning.

Staff had a good level of information about each individual's abilities, recognised needs and agreed support methods. The registered manager had guided staff to assist individuals to maintain their personality as part of living a meaningful life.

People and their relatives were encouraged to complete surveys to check their satisfaction levels with the service. The registered manager and staff worked closely together on a daily basis so that any issues could be addressed immediately. We reviewed recent audits the registered manager completed and found they had taken action to address identified issues to maintain people's welfare.

## 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.

Staff had a good awareness about how to protect people from abuse and poor practice. People and their representatives told us they felt safe and secure at Westholme.

The manager had safe processes to protect people from the employment of unsuitable staff. People and their relatives told us staffing levels were sufficient to meet their needs.

We observed people received their medicines when required. The registered manager had systems to manage them safely.

### Is the service effective?

Good ●

The service was effective.

The provider had a range of training to assist staff development, skills and understanding.

Staff files we looked at contained evidence they received relevant training. When we discussed the Mental Capacity Act 2005, they demonstrated an in-depth awareness.

People told us they enjoyed their meals and were offered choice of what to eat and drink. They spoke highly of the chef's skills.

### Is the service caring?

Good ●

The service was caring.

The provider ensured staff had dignity in care training to underpin their roles and responsibilities.

Staff used a friendly and caring approach when they engaged with people who lived at Westholme. Those who lived at the home and their relatives told us staff were kind and respectful.

### Is the service responsive?

Good ●

The service was responsive.

We saw care planning was personalised to the individual's own needs. People and their representatives told us staff were responsive to their requirements.

A programme of activities was available to engage and stimulate those who lived at Westholme.

Up-to-date information was made available to people to assist them, if they chose to, to make a complaint.

**Is the service well-led?**

**Good** ●

The service was well-led.

Staff told us the management team were supportive and assisted them in their roles.

The registered manager had suitable arrangements to monitor the environment and maintain everyone's safety. They supported people to provide feedback about their experiences whilst living at Westholme.

# Westholme

## **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 was planned to check 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.

The inspection team consisted of one adult social care inspector.

Prior to our unannounced inspection on 15 December 2016, we reviewed the information we held about Westholme. This included notifications we had received from the provider. These related to incidents that affect the health, safety and welfare of people who lived at the home.

We were only able to discuss care with three people who lived at Westholme. Therefore, during our inspection, we also used a method called Short Observational Framework for Inspection (SOFI). This involved observing staff interactions with people in their care. SOFI is a specific way of observing care to help us understand the experience of people who could not talk with us.

We spoke with a range of people about Westholme. They included three people who lived at the home, one relative, two members of the management team and three staff members. We did this to gain an overview of what people experienced whilst living at Westholme.

We also spent time looking at records. We checked documents in relation to three people who lived at Westholme and two staff files. We reviewed records about staff training and support, as well as those related to the management and safety of the service.

# Is the service safe?

## Our findings

People and their representatives told us they felt safe and secure at Westholme. One person who lived with their relative at the home stated, "I am happy here. We are both kept safe." A relative added, "[My relative's] safe here and I can go home feeling relaxed."

The registered manager recorded accidents and incidents and retained them in the individual's care file. They attached body maps to the accident form to assist staff to monitor associated injuries more closely. Staff further documented an outline of the incident and any equipment involved. The management team reviewed follow-up actions and outcomes to assess their efficiency at minimising environmental risks.

We observed the home was clean, tidy and smelt pleasant. Hot, running water was available throughout Westholme and the management team checked this was delivered within a safe temperature range. When we looked around the home, we saw window restrictors were not always attached to windows to protect people from potential harm or injury. However, this had been attended to before we completed our inspection. The management team told us a new audit form would be introduced to ensure this did not reoccur. The service's electrical, gas and legionella safety certification was up-to-date. The registered manager had these processes to assist people to live in a safe environment.

Care records contained assessments to guide staff to protect people from the risks of inappropriate or unsafe support. They covered risks associated with, for example, mobility, personal care, pressure area care, physical and mental health, falls and fire safety. Documentation included levels of risk and actions taken to manage them. We noted these records were regularly reviewed to ensure they continued to maintain people's safety and wellbeing.

Staff had a good awareness about how to protect people from abuse and poor practice. They received related training and understood their duties to report or whistleblow concerns. The manager provided easy access information to guide staff to reporting procedures. One staff member explained, "I go straight to the managers and report any concerns. I would also report to safeguarding and CQC and log everything."

We found staffing levels were sufficient to meet people's requirements in a timely manner. We observed staff were patient and unhurried in their duties and responded to call bells quickly. Rotas evidenced staffing was deployed appropriately to ensure good skill mixes to support each person's complex needs. Staff, people and visitors said staffing levels were good and helped them to be safe whilst living at Westholme. One person who lived with their relative at the home stated, "I've never had to wait for anything. There seems to be enough staff." Another relative stated, "They've got good staffing levels. They take their time and are very patient." Staff confirmed there were sufficient staffing numbers to help them to take their time to sit and chat with people. One staff member told us, "The staffing levels are alright. It's steady and gives us time with the residents to give them quality time."

Records we looked at evidenced the provider had safe procedures to ensure they recruited suitable staff to support vulnerable people. Records we looked at included references and criminal record checks obtained

from the Disclosure and Barring Service (DBS). The manager additionally verified staff had a full employment history and explanations of any gaps. One recently recruited staff member told us, "I absolutely did not start working until my DBS and references were in place. My recruitment was very professional." A relative told us newly employed staff were enthusiastic, experienced and caring. They added, "The managers obviously recruit well."

We observed people received their medicines when required and the responsible staff member completed processes whilst focusing on one person at a time. A person who lived with their relative at the home told us, "We are on a lot of medicines. The staff always make sure we get them on time." We saw associated records were completed accurately. For example, Medication Administration Records (MARs) were signed after the person took their tablets to evidence the processes were done correctly.

The registered manager provided patient information leaflets and other guidance to assist staff to keep up-to-date with medication. They further provided relevant training to underpin their knowledge and competency. One staff member we spoke with demonstrated an in-depth understanding of different medication and all the procedures involved. The management team undertook regular audits and staff spot checks to assess the ongoing safety of all related processes. The medication file also contained protocols, such as those associated with when required medicines, to give staff immediate reference. We found staff stored medicines securely and retained them in a clean environment. This demonstrated the provider protected people from the unsafe management of their medicines.



# Is the service effective?

## Our findings

People and relatives we spoke with told us experienced and well-trained staff supported them. One person who lived with their relative at the home said, "They know what they are doing. They are very experienced." A relative added, "The carers are consistently good. They really do know what they are doing." Another relative confirmed, "The staff are well trained."

The provider had a range of training to assist staff development, skills and understanding. This covered, for example, fire safety, infection control, challenging behaviour, end of life care, nutrition, dementia awareness, manual handling and first aid. Additionally, a training matrix was kept up-to-date to give the management team oversight of when refresher guidance was due. Staff also completed recognised qualifications in health and social care. A staff member told us, "I've had the training and there's plenty of guidance available." Another staff member said, "I love the training." This showed the registered manager recognised their duty to train staff to a good standard to protect people from poor practice.

The management team provided regular supervision for staff to support them in their work. Supervision was a one-to-one support meeting between individual staff and the management team to review their role and responsibilities. The format began with any problems, followed by actions planned, objective setting and training needs. Staff told us they received supervision and found it a useful tool in their development.

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 Act 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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty were being met.

A member of the management team told us one person was deprived of their liberty in order to safeguard them. We saw appropriate people were involved in this process, including the Relevant Person's Representative (RPR). This ensured decisions were made in line with the individual's best interests. Staff files we looked at contained evidence they received relevant training and when we discussed the MCA they demonstrated an in-depth awareness. One staff member said, "If someone refused we would try again a bit later. If they still refuse then that's up to that person at the end of the day. I can't force them." People who lived at the home told us they felt in control of their lives and were supported to make their day-to-day decisions. One person commented, "The staff are polite and ask us before they do anything if we agree to it."

Staff worked with people and their relatives in discussing and agreeing their support requirements. We observed they continuously assisted people to make their day-to-day decisions. People and their relatives

confirmed they were assisted to make their own decisions and retain control over their lives as much as possible. A relative said, "They don't interfere or take over. I like to do things for my [family member], which they encourage me to do." Throughout our inspection, we saw staff consistently explained tasks to people and checked for their agreement before proceeding.

We found kitchen cleaning records in place and noted the kitchen and food storage areas were clean and tidy. Staff had maintained records of food and appliance checks, as well as cleaning schedules, to maintain effective food safety. All staff who prepared food had completed food hygiene training to assist them to maintain food safety standards. The Food Standards Agency had awarded Westholme a rating of five following their last inspection. This graded the service as 'very good' in relation to meeting food safety standards about cleanliness, food preparation and associated recordkeeping.

Staff supported people to eat their lunch wherever they wished and promoted the event as a social occasion. They spoke with individuals whilst supporting them and encouraged others who lived at the home to join in the general conversation. The meals were presented well, of ample portion and contained fresh produce. People told us they enjoyed their meals and were offered choice of what to eat and drink. One person said, "The food is excellent. I'm lactose intolerant and [the chef] meets all my needs and demands. He's very good." Another person commented, "The food is great. They always ask if we want more." Staff monitored people's weights regularly and updated care plans, where applicable, as part of their effective management of the individual's nutritional support.

We saw healthcare services' contact details were recorded in each person's care file. This included information about when individuals accessed, for example, GPs, social workers, opticians and their RPR where required under the MCA. Staff completed a separate form to outline the purpose, outcome and ongoing actions of professional visits and appointments. A relative confirmed, "[My relative] was wasn't very well one time, but they got the doctors out really quickly." This showed the management team supported people to access healthcare professionals in the maintenance of their continuity of care.

## Is the service caring?

### Our findings

People and their relatives said staff were caring, kind and friendly whenever they engaged with them. One person told us, "The staff are fabulous. I love them." Another person who lived with their relative at the home commented, "We have comfortable lives." A relative added, "I'm very happy with [my relative's] care." Another relative said, "The staff have time to sit and chat."

Staff used a friendly and caring approach when they engaged with people who lived at Westholme. We observed individuals were chatting happily with each other, as well as smiling and laughing with staff. For example, a staff member assisted one person with visual impairment to mobilise with their walking frame. They were patient and enabled the individual to take the lead in how they moved forwards. The staff member was reassuring and gave encouragement, whilst making appropriate use of humour. One person told us, "The carers are exceptional." A relative added, "What I think is amazing is how the young staff have such a caring nature. It's unbelievable how the youthfulness of the staff brings a real vibrancy to the home." A member of the management team told us about people who stayed at the home regularly on a number of occasions for respite care. They added, "It's nice because it shows us the family trust us."

Staff maintained people's dignity and respect throughout our inspection. For example, they knocked on bedroom doors before entering and communicated with a polite response, saying, "You're welcome" and, "Not a problem." A person who lived at Westholme said, "The staff are very respectful and kind." Care records included details about each person's preference in relation to the maintenance of their dignity and privacy. We observed staff were patient and supported people to retain their self-esteem. Furthermore, the provider ensured they had dignity in care training to underpin their roles and responsibilities. One staff member stated, "It's absolutely pivotal that we are patient, use lots of eye contact and give residents time and space."

We saw care records contained evidence to demonstrate people and their representatives were fully involved in agreeing and developing support plans. Documentation included details about assisting individuals to maintain their independence and personality as part of living a meaningful life. For example, staff recorded their preferences and information about their backgrounds. A family member stated, "They respect me and involve me in my [relative's] care." Another relative said, "They ask me how I like things to be done."

A programme of redecoration and refurbishment was ongoing at Westholme to enhance people's relaxation and wellbeing. The management team said people were involved in choosing colours and the purpose was to modernise Westholme, whilst retaining comfort. They added, "We are in the process of changing the lounge furniture from old-style high back chairs to nice sofas. It gives it more of a modern feel and makes it more homely." We saw people were supported to bring their own belongings, such as pictures, ornaments and photographs. This aided them to have familiarity within their own living spaces.

We observed staff supported people to retain vital links with friends and families as part of their social needs. For example, they were friendly to visitors, offering them a drink and private space to spend time

together with their relative. A relative commented, "I like the fact that we can visit any time. We are then able to keep our relationship going as much as possible." Care records we looked at held information about the individual's important relationships and their related wishes.

The registered manager made information available to people about advocacy services, including contact details and reference to their purpose. The management team were more proactive when a DoLS application was being considered, such as accessing Independent Mental Capacity Advocates (IMCAs). Consequently, people could access advocacy if they required support to have an independent voice.

## Is the service responsive?

### Our findings

People and their representatives told us staff were caring and treated them as individuals. They added staff were responsive to their needs. A relative said, "[My relative's] the best she's been for a long time. That shows how good the care is."

The management team completed an assessment of people's needs to ensure the home was suitable to maintain their care. This included checks of, for example, nutrition, medication, physical health, mental health, mobility and personal care requirements. They then transferred identified needs to the person's care plan. With this approach, staff had a good level of information about each individual's abilities, recognised needs and agreed support methods. For example, where staff assessed someone as having reduced mobility, the management team recorded actions to manage this. This assisted staff to respond better to each person's requirements.

We saw care planning was personalised to the individual's own needs. For instance, the registered manager documented people's backgrounds and their preferences in relation to their support. This covered what they wished to be called, their personal care, nutrition, privacy and activities. We observed staff supported people in ways that matched their care plans. The registered manager ensured staff were knowledgeable and skilled in the provision of person-centred care through in-depth care plans. We saw staff provided choice whenever they engaged with people who lived at the home. This included what they wanted to eat or drink, where they wanted to go and where they wished to sit.

The management team completed regular updates of each person's care planning and risk assessment. They involved the person or their relative in this process. We found reviews were detailed and guided staff to the person's updated, for example, personal safety, personal care and nutritional needs. This meant the registered manager guided staff to meet people's ongoing requirements with a consistent approach. A relative explained staff and the management team were inclusive of them in the review of their family member's care. They told us, "I'm fully involved. We chat regularly about his care and agree a way forward."

Care files we looked at held information about the person's preferred daily routines, hobbies and interests. This gave staff an insight into how people liked to keep themselves fully occupied. A programme of activities was available to engage and stimulate those who lived at Westholme. This included, a dog petting company, hair and beauty therapy, musicians, birthday and other special events parties, movies and reminiscence activities. One person said, "We've got an accordionist coming this afternoon, which is my favourite entertainment. They provide a good programme."

A large fish tank was built into the dining room to provide distraction and relaxation to people who lived at the home. Two cats lived at Westholme and were a source of comfort. For example, we saw people stroking and talking with them. One person told us, "I love the cats." Music from the 1950s and 1960s played quietly in the background and we heard people singing along to it. Whenever staff entered communal areas, they took their time to discuss meaningful topics and took an active interest in what they had to say. The conservatory led out to a decked patio area where people could sit in a quiet, restful space. A member of the

management team told us a married couple who lived at the home recently had their 70th wedding anniversary. They organised a party and the local press attended to celebrate the event. They added, "It was a lovely celebration."

Up-to-date information was made available to people to assist them, if they chose to, to make a complaint. This included details about how the provider would respond to their concerns and the timescales they were required to meet. The management team told us they had not received any complaints in the last 12 months. One relative said, "I have never had any complaints, but I have no doubt the manager would sort it."

## Is the service well-led?

### Our findings

We observed Westholme had a calm and relaxed atmosphere. Relatives and those who lived at the home approached staff and the management team in a relaxed, friendly way. One person said, "The bosses are great. They lead a good home and really care about us by achieving all the standards." A relative commented, "The managers are wonderful."

At our last inspection on 23 September 2016, we found the provider failed to ensure quality assurance systems effectively monitored people's safety. This was because the management team did not have Personal Emergency Evacuation Plans (PEEPs) in place for everyone who lived at Westholme. This meant staff had no guidance about the safest and most appropriate method for protecting people in the event of a fire. Additionally, the provider did not have an up-to-date fire risk assessment. Consequently, they had not ensured identified changes were acted upon or that they had complied with all relevant legislation.

This was a breach of Regulation 17 Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 Clinical Governance.

During this inspection, we found the provider had made improvements to people's fire and environmental safety. They had introduced detailed PEEPs personalised to each person's requirements in the event of a fire. Additionally, we saw evidence the management team utilised the expertise of a specialist company in developing a fire risk assessment. We found this was completed in January 2016.

Staff told us the management team were supportive and assisted them in their roles. One staff member explained, "I've just started my level 5 NVQ (in health and social care). I get a sense of progressing all the time. The management team help me to do this." We observed they were hands-on in their approach and worked alongside staff. Another staff member said, "The managers are very supportive. They're there when you need anything."

Regular team meetings took place to offer staff the opportunity to explore any concerns or ideas to improve the home. The registered manager and staff worked closely together on a daily basis so that any issues could be addressed immediately. One staff member told us the team members often contacted each other, even those not on duty, to check out any queries. They added, "We're a great support network within the team."

The management team supported people to provide feedback about their experiences whilst living at Westholme. They and their relatives were encouraged to complete surveys to check their satisfaction levels with the service. Areas covered included internal décor, the home's atmosphere, staff attitude, cleanliness, information update for relatives, dignity and whether anything could be improved. Outcomes from the last survey in August 2016 were favourable about Westholme. Comments seen included, 'Very happy with all the staff' and, 'We appreciate all they do.' The management team told us they would act upon any concerns and review suggestions for improvement.

The registered manager had suitable arrangements to monitor the environment and maintain everyone's safety. These included DoLS authorisation renewal, fire safety, care files, medication, staff training and infection control. We reviewed recent audits and found the registered manager had taken action to follow up on any identified issues to maintain people's welfare.

The service had on display in the reception area of the home their last CQC rating, where people who visited the home could see it. This is a legal requirement from 01 April 2015.