

Leonard Cheshire Disability

Westmead - Care Home Physical Disabilities

Inspection report

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Date of inspection visit:
19 October 2017

Date of publication:
08 November 2017

Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Good 

Summary of findings

Overall summary

We completed a comprehensive inspection of Westmead in March 2017 where we found the safe domain to be requires improvement with breaches in regulation 19 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014- safe recruitment. This was the second breach of this requirement so we issued a warning notice. We also found staffing levels were not sufficient to ensure people's safety. We issued a requirement in relation to regulation 18- staffing. The provider had sent us updated action plans to show how they had changed recruitment processes to ensure this was robust. They also showed what actions they had taken to employ more staff and in the interim to ensure agency staff were being used to keep people safe.

We completed this focussed inspection on 18 October 2017 to check the service was meeting the warning notice and requirements in relation to recruitment and staffing levels being appropriate and safe for people. This report only covers our findings in relation to those topics. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Westmead on our website at www.cqc.org.uk.

Westmead is a care home without nursing which is registered to accommodate up to 19 people with physical and learning disabilities. At the time of the inspection there were 16 people living at the service.

There was a manager at Westmead, who had worked for the provider for a number of years and been a registered manager for one of their other services. She was awaiting an interview with CQC to become the registered manager for this service. 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 legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The provider had informed us that another manager had been recruited who will eventually take over from the current manager. The plan was for there to be an extended handover between the two managers. This would help to ensure the service did not go for a further long period without a registered manager in situ.

People said they felt safe and well cared for. Two people said there were new staff and there had been lots of changes in staffing, but believed their needs were being met in a timely way. One person said they had been trying out more activities including Thai-chi, music sessions and going out more. One person spoke

about how much they had enjoyed a recent local event hosted by Westmead called 'Westfest', which was held locally. This was a full day of music, crafts and food and drink open to the public as well as people living at the service.

Staffing rotas showed staffing levels were being maintained at the providers preferred levels. They had introduced a tool to review people's dependency levels and look at staff hours needed to ensure the assessed needs of people, were being met.

Recruitment practices had been changed to show that potential new staff members were asked to declare if they had any convictions or cautions prior to being offered employment. Recruitment files showed safe recruitment practices were taking place.

Since the last inspection there had been three safeguarding alerts raised. These were discussed with the manager. We saw these had been handled appropriately and people were kept safe by measures put in place. These included adjustments to risk assessments for one person and staff being asked to complete further training in understanding safeguarding processes and when to report issues of concern.

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.

Improvements had been made to ensure recruitment processes protected people from staff who may be unsuitable to work with vulnerable people.

There were sufficient staff available to ensure people's safety and their needs were being met.

Further training had been arranged to ensure all staff understood the safeguarding processes.

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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 unannounced focussed inspection was completed on 19 October by one adult social care inspector.

Before the inspection, we looked at information the Care Quality Commission held about the service. This included statutory notifications. A notification is information about important events which the service is required to tell us about by law. We also looked at recent safeguarding information.

We spoke to six people living at the service, three staff and the manager. We also reviewed the recruitment files of three staff recently employed as well as staffing rotas for the last two months.



Our findings

When we inspected this service in March 2017 we rated this domain as requires improvement. This was because we found recruitment practices had not always been robust in ensuring new staff had all the right checks and references in place to ensure they were suitable to work with vulnerable adults. This had been the second time we had found a breach in this regulation. At the previous inspection completed in September 2015 we had issued a requirement in relation to staff recruitment. At the March 2017 inspection we therefore issued a warning notice. This set out what the provider had failed to do. The provider had been keeping us up to date with what action had been taken since receiving this warning notice. This included ensuring potential new staff declared any convictions or cautions. They also ensured processes to ensuring new staff were of fit character by seeking references and more detail about their suitability. The staff recruitment files showed effective recruitment practices were taking place to keep people safe. This included ensuring references and checks were completed before a potential new staff member began working at the service.

The previous inspection also found there were not always sufficient staff on duty to keep people safe and ensure their needs were being met. We issued a requirement in relation to this breach. The provider had kept us up to date on staff recruitment via action plans. The most recent action plan showed since the last inspection they had recruited two team leaders and promoted one support Worker to Team Leader. A further two Support Workers had also been recruited. They also included staffing rotas with their action plan. This showed sufficient staff were available each shift to keep people safe and meet their needs.

At this focussed inspection people told us they felt safe and well cared for. One person said "We have had a lot of new staff, some pretty good. Yes I think we have enough staff on duty now." Another said they felt it could be short on weekends but overall believed the staffing levels had improved and this had impacted positively for them and other people living at the service. In addition to support worker hours being increased they had also gained further hours for the volunteer coordinator. This was to work an additional day to help set up new activities. One person said they had recently been doing Thai-chi which they were really enjoying. Another person said they enjoyed the craft and music sessions. One person spoke about how much they had enjoyed a recent local event hosted by Westmead called 'Westfest', which was held locally. This was a full day of music, crafts and food and drink open to the public as well as people living at the service.

The staff rotas showed that staffing levels remained at the providers preferred levels. This was usually six support workers each morning shift and five each evening shift. In addition there was a

communication/computer staff member who worked six hours each week day. There was also a full time cook, maintenance person, volunteer coordinator, part time physiotherapist and cleaning staff. The manager worked each week day and was supported by an administrator.

The rota tool used at the service had been developed by the provider to ensure that the manager and team leader could easily review staffing levels, see where shortages were occurring and address these. There were still some shifts being completed by agency staff. The manager said that they had been successful in attracting a number of potential new staff and they were in the process of interviewing for the last few support worker vacancies. It was clear the improved staffing levels had impacted positively for people in ensuring their care needs were being met in a timely way and also ensuring people had more opportunities to do more regular activities. This included outings as well as in-house activities.

Since the last inspection there had been three safeguarding alerts raised. These were discussed with the manager. We saw these had been handled appropriately and people were kept safe by measures put in place. These included adjustments to risk assessments for one person and staff being asked to complete further training in understanding safeguarding processes and when to report issues of concern. This was because the manager felt some staff may need updated training and reminding about what they should report as a concern to help people keep safe. The provider had an independent person who visited and spoke with people individually. Their most recent visit had been the day before the inspection. Areas of concern raised by individuals were discussed with the manager. She spent more time talking with individuals about what their concerns were and how they wished these to be addressed. One person said they preferred their personal care not to be delivered by younger staff. The manager said they would try to accommodate this request wherever possible.

We did not look at medicines management or risks assessment processes during this inspection as we found these to be satisfactory at the comprehensive inspection completed in March 2017.