

Infinite Care (Lincs) Limited

Waltham House Care Home

Inspection report

Louth Road
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Grimsby
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Tel: 01472827725

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22 March 2023

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30 March 2023

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

Waltham House Care Home is a residential care home providing personal care to up to 33 older people, including people living with dementia in 1 adapted building. At the time of our inspection there were 23 people using the service.

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

Quality monitoring systems were in place which helped to check various areas of the home. Any actions identified were carried out to make sure the service was continually improving. However, some improvements in relation to monitoring records were required.

People were happy with the care they received, they felt safe and well looked after.

People had support from staff who had been safely recruited. Staff received training in safeguarding and understood their role and responsibilities to protect people from abuse. People and staff spoke positively about the management of the service. Staff received guidance and support from management regularly and when required.

Staff followed care plans and risk assessments which were in place for known risk, up to date, and regularly reviewed. People were supported to take their medicines safely as prescribed.

People were regularly asked their views on the service provided and action had been taken when suggestions were made.

People were supported to have access to healthcare services to monitor and maintain their health and well-being. People were encouraged to maintain a healthy diet, where people had specific dietary requirements, these were catered for.

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.

The home was clean and tidy. Staff had access to and followed clear policies and procedures on infection, prevention and control that met current and relevant national guidance.

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

Rating at last inspection

The last rating for this service was good (published 30 March 2022).

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.

This report only covers our findings in relation to the Key Questions safe and well-led which contain those requirements. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has remained good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Waltham House Care Home on our website at www.cqc.org.uk.

Recommendations

We have made a recommendation in relation to information recording systems.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

Waltham House Care Home

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

The inspection was completed by 1 inspector.

Service and service type

Waltham House Care Home 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. Waltham House Care Home is a care home without 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. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. We used all of this information to plan our inspection.

During the inspection

We spoke with 2 people who used the service and 2 relatives about their experience of the care provided. We spoke with 8 members of staff including the registered manager, deputy manager, senior care staff, care workers and administrator.

We reviewed a range of records. This included 4 people's care records and 5 medication administration records. We inspected 3 staff files in relation to their recruitment. A variety of other records relating to the management of the service, including audits and policies and procedures, were also reviewed.

We inspected the environment and spent time observing interactions between people and staff, and infection prevention and control practices.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Temperature records to ensure the safe storage of medicines were completed in accordance with national guidance. However, medicines were not always stored in this temperature controlled room. The provider gave assurances this would be addressed immediately.
- Medicines were safely received, administered and destroyed if they were no longer required.
- Staff received medicine management training and checks on their competency to administer people's medicines were completed.
- Medicines management was audited regularly with systems in place for investigating any potential medicine errors.
- Where people were prescribed pain relieving medicines, on an 'as required' basis, clear guidance was in place to ensure staff had information about when these medicines should be given.

Systems and processes to safeguard people from the risk of abuse

- People we spoke with told us they felt safe at the service. Comments included "I am absolutely safe here" and "The staff do look after you which makes you feel safe."
- The registered manager worked with the local safeguarding team to address concerns when they were raised.
- Staff had training on how to recognise and report abuse and they knew how to apply it. One staff member told us they always reported incidents involving people immediately and that the registered manager took action.

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

- The premises were well maintained. Regular checks of the environment were completed to make sure it was safe. For example, checking the fire panel, fire exits, security and water temperatures to minimise risks to people. There was an ongoing programme of servicing, repairs and maintenance.
- Risk assessments were in place and reviewed regularly to minimise risks. These provided staff with a clear description of any risks and guidance on the support people needed.
- Staff recorded all incidents. The registered manager monitored and analysed accidents, incidents and safeguarding concerns. This aided learning and reduced the risk of reoccurrence.
- Learning was shared through discussions at staff meetings and regular staff newsletters.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- Staff were recruited safely. Recruitment files showed all pre-employment checks had been made to ensure only staff who were suitable to work with vulnerable people were employed.
- Staff recruitment and induction training processes promoted safety.
- Staffing levels were safe and the option to increase staffing in specific circumstances was considered, for example if specific increased support was required.

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was supporting people living at the service to minimise the spread of infection.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was responding effectively to risks and signs of infection.
- We were somewhat assured the provider was promoting safety through the layout and hygiene practices of the premises. Some areas of the care home required refurbishment to enable more effective cleaning.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

We have also signposted the provider to resources to develop their approach.

Visiting in care homes

The provider supported visits to the home in accordance with government guidance. The provider had a visiting policy to support people to receive visits safely.

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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Records did not always evidence important information about people using the service. For example, food and fluid charts did not always evidence requirements as identified in care files.

We recommend the provider develops a system to ensure records are reflective of the people's needs.

- Auditing processes were in place and were carried out or were overseen by the registered manager. All aspects of the service were subject to audits including, medicines, training, care planning and health and safety.
- Governance processes were effective and helped to hold staff to account, keep people safe and provide good quality care and support.
- The provider was aware of regulatory requirements. For example, they had employer's liability insurance cover in place. The registered manager was knowledgeable about their responsibility to notify CQC of significant events.
- Staff and the management team understood their roles. Staff were proud to work for the service. Staff said, "I actually love coming to work and making a difference."

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- The registered manager knew people well including their needs and preferences. We observed interactions between people and the registered manager that were positive.
- The registered manager was a visible presence at the home and people and staff all told us they were approachable. Staff told us, "I know if there is anything I need or suggest, help and advice is always there".
- Joint communal meetings with people using the service took place. Topics discussed ranged from menu planning to raising concerns. This promoted inclusion within the service.
- Waltham House Care Home was welcoming, and the atmosphere was warm and supportive. People were treated with respect and in a professional manner.

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 provider was committed to providing good quality care to people.
- Staff told us they felt listened to and that the registered manager was approachable. A staff member said,

" [Registered manager's name] is always there to speak to and always open to suggestions."

- The provider and registered manager were clear of their role and responsibilities to be open, honest and apologise if things went wrong.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Staff had team meetings and individual supervision.
- The management team engaged with people and staff to gather their views. People and their relatives were asked about their experience of care delivered and the provider was able to use this information to establish improvements in quality and care.
- Staff were consulted and involved in decision making and were encouraged to contribute ideas and raise issues at regular staff meetings.

Continuous learning and improving care; Working in partnership with others

- Monitoring systems in place included unannounced spot checks of staff to help ensure they were upholding the provider's values of good quality care. Staff were then given feedback on what they did well and any areas to be improved upon.
- We saw evidence that when things went wrong these were discussed with the staff team to allow reflection and lessons learnt to help reduce the risk of recurring themes.
- The registered manager worked in partnership with other agencies. This included placing local authorities to ensure people's needs were regularly reviewed. Where people received specialist support, such as speech and language therapy, joint working was in place.