

The Leaders Of Worship And Preachers Homes Westerley Residential Care Home for the Elderly - Westcliff-on-Sea

Inspection report

Westerley
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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 unannounced inspection took place on the 15 June 2016.

Westerley Residential Care Home for the Elderly provides accommodation which offers personal care to older people. There were 19 people using the service at the time of the inspection.

The service had 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 legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The service was in need of maintenance and re-decoration but the manager confirmed that a plan was in place and in some areas improvements had already commenced.

Staff had good knowledge of their responsibilities and how to keep people safe. People's rights were also protected because management and staff understood the framework of the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS). Management applied such measures appropriately. Applications for DoLS referrals had been completed when required.

Effective support was delivered by staff. People's safety was ensured whilst personal choice and wellbeing was promoted by the staff providing the care. As part of a robust recruitment process staff were recruited and employed upon completion of appropriate checks. There were sufficient staff to meet people's individual needs. People's medicines were managed safely by trained staff.

People had enough to eat and drink and staff understood and met their nutritional needs. Staff and managers ensured access to healthcare services were readily available to people and worked with a range of health professionals to maintain good health of the people.

Privacy and dignity was valued by staff and they were respectful and compassionate towards people. Staff understood their roles in relation to encouraging people's independence. People were well cared for and they enjoyed full and meaningful activities and interests.

The service was well led. The service ran effectively using quality monitoring audits which the registered manager and provider carried out to identify health needs and any improvements to the service. A complaints procedure was in place and had been used appropriately by management. Systems were in place to make sure that people's views were gathered.

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.

There was enough staff to meet people's needs. Appropriate checks had been carried out to ensure a robust and effective recruitment process was in place.

People felt safe living at the service. People's safety was risk assessed appropriately. Care plans were in turn implemented to ensure people's safety and autonomy.

Medicines were administered safely.

Is the service effective?

Good ●

The service was effective.

Management and staff had good knowledge of legislative frameworks i.e. Mental Capacity Act 2005 to ensure people's rights were protected.

Staff received an initial induction. Staff attended various training courses specific to people's needs.

People were supported to access healthcare professionals when required.

Is the service caring?

Good ●

The service was caring.

Staff and people had developed positive caring relationships and staff were kind and people received good care. Privacy and dignity was respected.

People's choices were listened to and people felt able to express their views, wants and needs.

Is the service responsive?

Good ●

The service was responsive.

People had choice of activities and pastimes that interested them. They were supported to remain independent.

People's needs had been assessed before they moved into the service. People were included in the review of care plans which contained detailed information required to meet people's needs.

Complaints were investigated and acted upon appropriately.

Is the service well-led?

Good ●

The service was well-led.

Management were respected by staff and people. They were open and approachable.

There were quality assurance systems in place to identify and make improvements to the service.

The service had an open culture and they gained people's views of the service to continually improve.

Westerley Residential Care Home for the Elderly - Westcliff-on-Sea

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.

We inspected Westerley Residential Care Home for the Elderly on 15 June 2016 and the inspection was unannounced. The inspection was carried out by one inspector.

Before the inspection we reviewed previous reports and notifications that are held on the CQC database. Notifications are important events that the service has to let the CQC know about by law.

We spoke with three people, two relatives, two members of staff, one assistant manager and the registered manager. We observed interactions between staff and people. We looked at management records including samples of rotas, four people's individual support plans, risk assessments and daily records of care and support given. We looked at four staff members' recruitment and support files, training records and quality assurance information. We also reviewed people's medical administration record (MAR) sheets.

Is the service safe?

Our findings

Areas of the service were run down and required attention. For example, in the top floor bathroom we found areas with mould growing and broken areas. Other rooms had areas of damage caused by damp and paint was coming away and some carpets were stained and in need of replacement. The manager was aware of this and showed us their plan for redecoration and improvements to the service. One person's room had already been completed with their involvement. Additionally, plans were in place to replace all carpets in the service. All other health and safety checks were completed appropriately by a competent person and any actions recorded and actioned where required.

People told us they felt safe, one person saying, "I do not think about being safe as I am safe." Another person told us they felt, "Very safe." The home manager and care workers all had a good understanding of their responsibility to safeguard people and dealt with safeguarding concerns appropriately and had received appropriate training. A recent audit by the Local Authority rated the service as 100% compliant for safeguarding people.

Staff had the information they needed to support people safely. Care plans and risk assessments showed current risks and practical approaches to keep people safe and to mitigate risk. For example, risk assessments covering areas such as people's risk of falls, specific medical conditions, moving and handling and risks in relation to pressure care had all been recorded.

Staff were trained in first aid. If there was a medical emergency staff knew to call the emergency services. Staff were also trained in the event of a fire and how to respond to any emergency situations.

There were sufficient staff on duty to meet people's assessed needs. Care staff communicated via two way radios between floors and two assistant managers worked on opposite shifts to each other to ensure consistent support. One relative told us that there always appeared to be enough staff and that although staff were busy they took their time when supporting their family member. One staff member said there was enough staff on shift. Another staff member also confirmed that although they could be busy, there were enough staff on duty. People had dependency tools on their care plans to determine the amount of staff support they required to meet their needs.

An effective system was in place for safe staff recruitment. This recruitment procedure included processing applications and conducting employment interviews. Relevant checks were carried out by the provider before a new member of staff started working at the service. These included obtaining references, ensuring that the applicant provided proof of their identity and undertaking a criminal record check with the Disclosure and Barring Service (DBS).

People received their medications as prescribed. Medication was clearly prescribed and reviewed by each person's General Practitioner (GP). Care workers who had received training in medication administration and management dispensed medicines to people. People were supported to be as independent as they can be in administering their own medications, where this was requested by people, risk assessments were in

place. Staff supported some people by dispensing their medications and then allowing them to take these themselves as they were fully aware of their medication needs. Staff stayed around but at a respectful distance with people's consent to confirm that they had taken their medications so that they could sign the person's records correctly. Information regarding prescribed medication was also documented at the front of each person's MAR for ease of reference and refreshment. This helped to ensure medicines were administered in a person centred way. The service carried out regular audits of the medication and staff were regularly supervised to review their competency and skills.

Is the service effective?

Our findings

People received effective care. Care workers were supported to obtain the knowledge and skills to provide continuous person centred care. One person told us, "Staff are very good, very nice. We are well looked after."

Staff received an induction which included the Care Certificate. No new staff had joined the service recently but all staff had previously undertaken the Common Induction Standards as part of their induction. Staff completed all training required for their roles regularly and as required. One staff member said, "We do training all the time." Supervisions had been completed on a regular basis allowing staff the time to express their views and reflect on their practice. One staff member said, "I feel supported in my work; wouldn't change a thing."

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. All assessments of people's capacity had been completed as required.

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). Therefore we looked at whether the provider had considered the MCA and DoLS in relation to how important decisions were made on behalf of the people using the service. The home manager assured us that they had assured themselves, that freedom was not being inappropriately restricted. We saw that care records contained applications for DoLS and liaisons with the local authority were ongoing to apply DoLS where necessary.

People had enough to eat and drink and received good support with their nutrition and hydration needs. One person told us, "The food is very good. No complaints." A relative when asked about the quality of the food told us, "Really good." People were offered choices of what they wanted to eat the evening before and they were all aware of the alternative menu available. The chef in the kitchen completed the evening tea round so that they could communicate with people and interact with them to gain their views and preferences. The service had a 5 star rating from Environmental Health for the cleanliness and infection control processes in their kitchen. This is the highest awarded rating. The kitchen was well stocked and foods well stored and maintained. Information regarding people's specific dietary and healthy eating and drinking needs were clearly identified within the kitchen and in people's care records. People's weights were monitored where required to ensure they remained healthy and so that interventions could be implemented should it become necessary.

People had access to healthcare professionals as required and we saw this recorded in people's care records. One relative told us that the service always assisted with their family member's medical appointments and regular physiotherapy visits. They confirmed that when needed they had involved the

falls team in their relative's care.

Is the service caring?

Our findings

Staff had positive relationships with people who reported that they felt very well looked after. One person said, "I am very grateful that the carers are so kind." Another person told us, "They are looking after me well; wouldn't be without them."

Care workers showed concern for people's wellbeing in a caring and meaningful way. A relative we spoke with told us that their family member received good care and staff were kind and attentive. One staff member that only worked occasional shifts told us, "It's a very good home" and that people were cared for well. Another relative told us that their family member was, "well cared for" and that staff were very caring.

People were supported to be as independent as possible. People had telephones in their rooms at no extra charge to communicate and keep in contact with their families and friends and live their lives. People were supported and encouraged to maintain relationships with their friends and family. The library provided internet access for people should they wish to use this to keep in touch or just browse the internet. People also used face to face internet programmes to stay in contact with those that were important to them.

People felt their dignity and privacy was respected. One staff member told us about how they supported people with dignity and that all staff "Always treat people with respect." The latest audit from the Local Authority also confirmed that the service rated high in terms of respecting and involving people. People were supported to access the help of an advocate to help them make decisions when needed. Information was available on how to access the support of advocacy and the service was in the process of supporting one person to access the service.

Is the service responsive?

Our findings

People were supported to live full lives and partake in pastimes that interested them. The service had a variety of activities available to people weekly including Tai Chi and exercise activities. People were supported to access the community and families were encouraged to be involved through family days and picnics. People also received one to one support in the form of regular chats when they chose to remain in their rooms. People were supported to access religious services regularly to practice their faith. One person told us they enjoyed the quizzes that took place.

Before people came to live at the service their needs were assessed to see if they could be met by the service. People and their family members confirmed they were involved in the initial assessment of their needs and decisions regarding their care.

People and their relatives told us they were involved in the review of their care and this took place regularly. One relative confirmed their involvement in the regular review of their family member's care and told us that although they attend their family member preferred to be involved and comment for themselves.

Care plans reflected how people would like to receive care. Care records contained personal people's individual preferences and interests. Care plans were detailed and provided information about all aspects of people's care needs including their mobility and communication needs and how to care for them at night. People's care plans included a section called 'All about me' that gave information about them as a person including their life histories and other relevant information that would aid staff in supporting people in a person centred way.

The registered manager had effective policies and procedures in place for receiving and dealing with complaints and concerns received. A complaint received in 2015 was investigated and responded effectively and recorded appropriately. Staff knew about the complaints procedure and that if anyone complained to them they would notify their supervisor or manager to address the issue. Details of how to raise a complaint were clearly available at the front entrance and also in the service user handbook for people to access. One relative told us that they had, "No worries or concerns."

Is the service well-led?

Our findings

The service had a registered manager in post. An open and positive culture was promoted within the service. One member of staff told us that the manager was, "Approachable" and that they listened to them. One relative told us that the manager was approachable and that they were listened to and any comments they had were acted on. Staff felt very supported by the management team. One member of staff said, "I like it here, everyone is very supportive."

People were actively involved in improving the service they received. People's views on the service were gathered by management not only through regular meetings and annual surveys but by sending out newsletters to keep people up to date. People's feedback was used to further improve the service, for example, redecoration of the service was due to take place and people's views on how to do this has been taken into account to reflect their wishes. Staff were supported and were involved in the running of the service through regular staff meetings.

The registered manager completed regular quality monitoring of all areas to continually review and improve the quality of the service provided to people. For example, they carried out regular audits on people's care plans, medication management, equipment, and the environment. The service's head office also completed regular inspections and any actions were taken forward and addressed as required. The service is planned to undergo extensive redecoration and this was as a result of listening to people and review of the quality of the service. Some rooms have already been redecorated with the involvement of people to include their personal choices. An audit of the service by the Local Authority in October 2015 rated the service as good overall.