

Wentworth Rest Home Limited

Wentworth House

Inspection report

283 Clifton Drive South
Lytham St Annes
Lancashire
FY8 1HN

Date of inspection visit:
21 March 2023

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02 May 2023

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Wentworth House provides residential accommodation for up to 14 older people who do not require nursing care. The home has two floors. Two lounges and dining areas are available on the ground floor. Parking is available on the forecourt of the home. At the time of the inspection 8 people lived at the home.

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

We found shortfalls in the procedures for the recruitment of staff. We have made a recommendation about this. In addition, not all maintenance checks had been completed and were out of date. The manager was aware of this and took steps for the checks to be completed during the inspection process. There were sufficient staff to meet people's care needs. Safeguarding training was mandatory, staff were aware of the processes to follow to enable people to be safe. Designated staff kept the building clean and tidy. Staff were seen to wear appropriate personal protective equipment (PPE) as latest guidance stated. Risks were assessed and monitored to ensure individuals safety and promoted their independence within a risk framework. People received their medicines safely.

The manager had a training programme to support staff to improve their skills and knowledge. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice. The manager had systems to reduce the risk of malnutrition and monitor people's food and drink intake to ensure people received appropriate care.

There were auditing systems to maintain ongoing oversight of the service and make improvements where necessary. Surveys had recently been sent out to people, relatives and health and social care professionals. Quality assurance systems ensured people were able to give their views of the service. People spoke positively with the way the home was managed, one person said, "The manager is around now all the time which is helpful."

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

Rating at last inspection

The last rating for this service was Good (published September 2019).

Why we inspected

This inspection was prompted by a review of the information we held about this service. We undertook a focused inspection to review the key questions of safe, effective and well-led only.

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.

We found no evidence during this inspection that people were at risk of harm. Please see the safe, effective and well-led sections of this full report.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

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 effective?

Good ●

The service was effective.

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

Wentworth House

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 Care Act 2014.

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 carried out by 1 inspector.

Service and service type

Wentworth House 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.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission (CQC) to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided. At the time of the inspection there was not a registered manager in post. A new manager had been in post and applied to register with CQC. We are currently assessing this application.

Notice of inspection

This inspection was unannounced. Inspection activity started on 21 March 2023 and ended on 24 March 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and commissioners who work with the service. We also looked at information we had received and held on our system about the home, this included notifications sent to us by the provider and information passed to us by members of the public. The provider did not complete the required Provider Information Return (PIR). This is information providers are required to send us annually with key information about the service, what it does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 4 people who lived at Wentworth House, a relative, 4 members of staff and the manager. We observed staff interaction with people. We also reviewed a range of records. These included care records of people, medication records, and two staff files in relation to recruitment. We also reviewed a variety of records relating to the management of the service. We had a walk around the premises and looked at infection control measures.

After the inspection

We continued to seek clarification from the manager to validate evidence found. We looked at their quality assurance systems the provider had in place and staff training records. In addition, evidence was provided to ensure all maintenance checks were in place.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as 'Good'. At this inspection, this key question remains the same. This meant people's outcomes were consistently good, and people's feedback confirmed this

Staffing and recruitment

- Staff recruitment processes were in place. Pre-employment checks were completed to help ensure people were employed safely. However, not all checks had been obtained to ensure staff were suitable. There was no evidence this impacted on the care of people. Following the inspection visit the manager implemented systems to ensure recruitment procedures were more robust.

We recommend the service review their recruitment processes to ensure all checks were completed prior to employment.

- Sufficient numbers of staff were on duty to support people's care and social needs and promote their independence. People we spoke with told us they felt safe with the number of staff around to help them. One person said, "No issue with the staff they are around if needed and are so nice."

Using medicines safely

- Records for the receipt, administration and disposal of medicines were kept. There were written protocols to guide staff on the administration of medicines prescribed 'as and when' required. People received their medication safely by trained staff. A staff member said, "Medicines training is in place and regular guidance provided."
- Auditing processes to monitor medicines identify any issues were seen to be effective.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and confident with staff that cared for them.
- There were effective safeguarding processes in place. The management team and staff had a good understanding of safeguarding people. They understood their responsibilities for keeping people safe and the processes for reporting any concerns.
- Staff told us they had received training in areas of safeguarding adults which was now updated. Records confirmed this.

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

- The management team had recently updated processes to manage people's safety and reduce risks. Risks to people and the service were assessed and managed. These included for example, medication and nutrition. This helped to protect people's safety.
- The manager reviewed incidents as part of lessons learned, to ensure risks were assessed to prevent reoccurrence where possible.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider had processes to admit people safely to the service.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- The provider was making sure infection outbreaks can be effectively prevented or managed. The provider was facilitating safe visiting in line with government guidance. This meant people could visit their relatives all days of the week in line with government guidance.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as 'Good'. At this inspection, this key question remains the same. This meant people's outcomes were consistently good, and people's feedback confirmed this

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs and choices were assessed to ensure their care, treatment and support was delivered in line with current legislation, standards and evidence-based practice to achieve effective outcomes. The views of the people were also considered, care records reflected this. A relative said, "We are involved in the care of [relative]." A senior staff member told us they were updating all care plans for people and we saw evidence of this.
- People's care records reflected their current care and support requirements and they were now being reviewed.

Staff support: induction, training, skills and experience

- Staff were competent and knowledgeable and access to training programmes had been developed to ensure staff were appropriately trained and had access to courses. Each staff member had been provided with a training programme which was ongoing throughout 2023 and 2024. A staff member said, "A lot better training is now available and we have accessed training we are required to complete."
- A new formal induction process was in place when staff commenced work to support staff in their role.

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- People were supported with their healthcare needs. Staff had developed relationships with other agencies and professionals to provide a flexible and effective service.
- People were provided with meals of quality and choice. Comments from people were positive and included, "The food is top notch." Also, "I look forward to salmon on a Wednesday, the cook makes it absolutely lovely, I really enjoy it."
- The manager had good systems to reduce the risk of malnutrition and manage people's food intake. They continued to focus on helping people to improve their nutrition in ways that offered choice and maximised their independence.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA.

- Staff had received training and understood the relevant requirements of the MCA. Staff confirmed they asked for people's consent before providing support, explaining the reasons behind this and giving people enough time to think about their decision before taking action.
- People's capacity to make decisions was considered as part of the assessment process. We saw evidence of this in care plans.
- The manager was aware of the process to submit applications for DoLS authorisations, as appropriate.

Adapting service, design, decoration to meet people's needs

- Accommodation was accessible, safe and homely. Bathrooms could accommodate people who required support with moving and transferring to the bath.
- A plan of refurbishment for the premises was ongoing. One person said, "It's a lovely place very homely."
- People were able to bring their own items into their rooms and to personalise their rooms as they wanted to. We saw good examples of this where people had put up family pictures and artwork that were special and individual to them.

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 the last inspection this key question was rated as 'Good'. At this inspection, this key question remains the same. This meant people's outcomes were consistently good, and people's feedback confirmed this

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

- There was a positive culture evident and from comments we received this was only recent. Staff told us they felt supported and valued by the new manager. One person said, "The manager is around now all the time which is helpful."
- People spoken with described a caring, relaxed environment to live in. A relative said, "It seems more settled now."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care; 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 service is in the process of registering a manager with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.
- The manager had introduced a number of auditing systems to maintain ongoing oversight and continued development of Wentworth House. They had systems in place to address any issues or shortfalls to improve the home. A senior staff member said, "We are continuously monitoring our performance and the new auditing systems is helping."
- There was a positive culture evident and from comments we received this was only recent. Staff told us they felt supported and valued by the new manager A staff member said, "Yes things are lot better [manager] is really nice and approachable." Also, "We have a very competent manager and things are so much better."
- The manager encouraged candour through openness. The manager and staff were clear about their roles, and understanding of quality performance, risks and regulatory requirements. It was evident if any complaints were made, they would be listened to, and their concerns and worries would be investigated a new system had been introduced to enhance this.

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

- The manager encouraged people to provide their views and about how the home was performing, for example recent surveys had been sent to relatives, health and social care professionals and staff. Early responses were positive and coincided with what people told us. For example, one person said, "Surveys have been passed on now for me to do, and things are going well here."
- The management team hold 'resident' and staff meetings for the exchanging of views and ideas.

Working in partnership with others

- Records highlighted advice and guidance was sought from health and social care professionals when required.
- The manager worked with other agencies and relatives to share good practice and enhance care delivery.