

## Wigan Council

# Heathside Residential Home

### **Inspection report**

Heathside Residential Home Plank Lane Leigh Lancashire WN7 4QE Tel: 01942 602328 Website: www.wigan.gov.uk

Date of inspection visit: 22 July 2015 Date of publication: 26/08/2015

#### Ratings

### Overall rating for this service

Requires improvement



Is the service well-led?

**Requires improvement** 



#### Overall summary

We carried out an unannounced comprehensive inspection of this service on 20 November 2014. A breach of legal requirements was found. After the comprehensive inspection, the provider wrote to us to say what they would do to meet legal requirements in relation to the breach. We undertook this focused inspection to check that they had followed their plan and to confirm that they now met legal requirements. This report only covers our findings in relation to those requirements. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Heathside Residential Home on our website at www.cqc.org.uk

This inspection took place on 22 July 2015 and was announced. We called the service one hour before our visit to inform them of our inspection. This was done to ensure the registered manager was working that day as we wanted to discuss the services action plan and the changes made with them. At our inspection on 20 November 2014 we found the service was in breach of

regulation 10 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. This was because the service did not have effective systems in place to monitor the quality of service delivery. We found improvements had been made and the service was meeting the legal requirements in relation to this regulation.

Heathside Residential Home is based in Leigh and is owned by Wigan Council. The home can accommodate up to 30 elderly people with dementia. At the time of our inspection there were 27 people living at the home. All the bedrooms are single with 15 providing en-suite facilities. Communal space within the home includes two dining rooms, three lounges and a conservatory, all of which are suitably decorated and furnished. A separate hairdressing room is also available. There are two secure central garden areas that are easily accessible from the main building.

### Summary of findings

There was a registered manager in post at the time of our visit. 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.

We found a number of improvements had been made to ensure feedback was received from people living at the home and their relatives in order to monitor the quality of the service provided. Whilst there had not been any residents or relatives' meetings, the registered manager told us one was booked in for around two weeks after our visit. The service had sent out consultation surveys to people who used the service and their relatives. We were told the findings of the surveys would be discussed at the forthcoming residents and relatives meeting.

The service had sent out questionnaires in relation to meal-times and the food provided. The findings from this

had been used to develop a new menu. The registered manager told us a number of other changes had been made as a result of feedback from people, a visit from Healthwatch and as a result of CQCs last inspection. This included new events and activities. A relative we spoke with told us a lot more was now going on at the home.

The audits we looked at had been completed consistently and had identified where actions were required. We saw the service had involved family members and other professionals in carrying out audits of the meal-time. This would help other alternative and new perspectives to help identify where improvements could be made.

The registered manager told us there were no active complaints about the service. We saw the service was now keeping a record of any complaints, compliments or concerns. This provided a summary of any actions taken and who was responsible for providing feedback to the person raising the complaint or concern.

### Summary of findings

#### The five questions we ask about services and what we found

We always ask the following five questions of services.

#### Is the service well-led?

We found action had been taken to improve the monitoring of the quality of the service.

Audits were being completed in relation to areas including medicines, meal-times, mattresses and the environment. These had been completed on a regular basis.

Consultation surveys had been sent out to people living at the home and their relatives. Although there had not been a relatives' or residents meeting held, we were told this had been booked in. The registered manager said feedback from the findings of the consultation would be given at the meeting.

We could not improve the rating for well-led from 'requires improvement' because to do so requires consistent good practice over time. We also only looked at standards in relation to the breach of regulations rather than looking at the entire key question. We will check this during our next planned Comprehensive inspection.

#### **Requires improvement**





# Heathside Residential Home

**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 undertook an announced focused inspection of Heathside Residential Home on 22 July 2015. The service was given one hours' notice of the visit. This was to ensure the registered manager was working that day as we wanted to discuss the changes made to the service with them. This inspection was done to check that improvements to meet legal requirements planned by the provider after our 20

November 2014 inspection had been made. The team inspected the service against one of the five questions we ask about services: is the service well-led? This is because the service was not meeting some legal requirements.

The inspection was undertaken by one adult social care inspector. Prior to our visit we reviewed information we held about the service including notifications of safeguarding incidents and other significant events that the service is required to send us. We also reviewed the last CQC inspection report and the action plan that the provider sent to us following that inspection.

During our visit we spoke with the registered manager, one relative and one person living at the service. We looked at records including audits, surveys and questionnaires, records of complaints and three care files.



### Is the service well-led?

### **Our findings**

At our last inspection of Heathside Residential Home on 20 November 2014 we found the home to be in breach of regulation 10 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010. This was because the service did not have effective systems in place to monitor the quality of service delivery. At our last inspection we found audits and records of falls and medicines audits had not been completed consistently, which had left gaps in the monitoring of the service. We also found meal time audits had not been effective at identifying issues we had found, and there were no records kept in relation to complaints or concerns that might have been raised by people or their relatives.

At this follow-up inspection we found the service was now compliant with this regulation. We saw the service was consulting with people on the quality of the service in a number of ways. The registered manager told us that residents and relatives' meetings had not yet been held, but that one was scheduled for 4 August 2015, around two weeks after our visit. They told us meetings had not yet been held as the service was first seeking the views of people via surveys that had been sent out. The registered manager said the findings of these surveys would be discussed at the forthcoming meeting. We saw surveys had been sent to people living at the home and their relatives in order to seek feedback and views on the service. We looked at some of the completed surveys that had been received and saw that these were generally positive, although some less positive responses had been made in relation to involvement in care planning and in relation to the laundry. We discussed this with the registered manager who was aware of this feedback and had identified ways in which these areas of the service could be improved.

The service had also conducted a survey in relation to meal-time preferences. The registered manager told us the findings of the surveys had been used to develop a new

menu and changes had also been made to the times meals were provided as a result of feedback received. We saw meal-time audits were being carried out, which covered a range of areas including the environment and staff support. We saw these had been completed by both members of staff within the home as well as a relative and a quality assurance officer at the local authority. This would help ensure alternative perspectives were offered in relation to the meal-time experience and would help highlight where improvements could be made.

We looked at audits of medicines, mattresses, the environment and rooms. The records we reviewed had been completed consistently. Actions had been identified where improvements were required and these had been signed off when completed. We saw falls had been recorded consistently, although a monthly summary sheet of falls in the file had not been completed. This would have helped provide an overview of falls occurring and assist in monitoring of any trends.

We saw the service was now keeping a record of complaints and compliments received. The tracker in place identified when the complaint had been sent to Wigan Councils' customer care department, what actions had been taken and who was responsible for providing feedback. The registered manager told us there were no current complaints. We spoke with one relative and one person living at Heathside. They both spoke positively about the service and told us they did not have any complaints. The relative we spoke with told us they had seen a range of improvements at the home recently and said there was a lot more going on now. The registered manager told us a number of improvements to the environment of the home and in relation to activities had been made or were planned as a result of feedback received from people, and as a result of visits by Healthwatch and CQC. Healthwatch is the national consumer champion in health and care.