

## The Windmill Care Home

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### Inspection report

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### 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

The Windmill Care Home is a residential care home providing personal care to up to 35 people. The service provides support to older people who may be living with dementia. At the time of our inspection there were 31 people using the service.

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

Since the last inspection the provider and management team had made improvements, with support from the local authority, which had benefitted the people and staff who worked there. The governance structures were in place to oversee and manage the service and take forward actions identified following the last CQC inspection and from quality and infection prevention and control visits from the local authority.

There had been a major refurbishment programme which included two new shower rooms and people's bedrooms gradually being upgraded and the kitchen soon to be refurbished.

Staff understood how to protect people from harm or discrimination. There were sufficient numbers of staff deployed to meet people's needs and ensure their safety. Risks to people were assessed and their safety monitored and managed.

Staff enjoyed working at the service and acknowledged the improvements which had been made. One said, "The home has come on leaps and bounds and I am proud to be able to work here and be part of the team."

People who used the service were happy with the care and environment. One person said, "There's not a great difference between the Ritz and here." A relative was happy with the staff and how they treated people. They said, "The staff are very friendly, caring and approachable. They are polite to [person]. When I take [them] out, [they] can't wait to go back. [They] give more affection to the staff than [they] does to [their relatives]! [They] always looks immaculate."

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.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published on 21 July 2021). The service had breaches of regulations. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

### Why we inspected

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contained those requirements.

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.

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 changed from requires improvement to good based on the findings of this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for The Windmill Care Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

### 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.

# The Windmill 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

This inspection was carried out by 1 inspector and 1 medicines inspector. An Expert by Experience spoke to people who lived in the service and their relatives by telephone afterwards. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

The Windmill 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. The Windmill 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. Inspection activity started on 29 March 2023 and ended on 20 April 2023, when final feedback was given, with some aspects of the inspection being carried out remotely. We visited the location's service on 29 March and 3 April 2023.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We received feedback from the local authority. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

We used all this information to plan our inspection.

#### During the inspection

We spoke with 7 relatives, 7 people who used the service, 10 staff including the deputy manager, the registered manager, and the providers. We received feedback from 2 health care professionals. We observed people's care and support. We reviewed a range of records. This included 6 people's care records and multiple medication records. We looked at 2 staff files in relation to recruitment and a variety of records relating to the management of the service, including audits, policies and procedures were reviewed.

# 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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

At our last inspection the provider had failed to fully assess and management the risks relating to the health safety and welfare of people. This was a breach of regulation 12(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

- Environmental risk assessments had been completed and safety checks were being undertaken for fire, electrical and servicing of equipment. Systems had been put in place to ensure action was taken when regular checks on equipment identified faults and was potentially unsafe. This included for the temperature of water.
- Risks to people's wellbeing and health were assessed and measures put in place to mitigate risks. Staff were familiar with associated risk management plans for such things as health conditions, mobility, nutrition including management of diabetes.
- Maintenance systems were in place to ensure faults and repairs were identified in a timely way, including staff recording in a folder which was reviewed regularly by the maintenance staff and actioned.
- People's personal emergency evacuation procedures (PEEPs) were recorded to reflect support needed in an event such as a fire. These were available with a 'grab' bag in the main entrance which held useful information for use in those situations.

### Systems and processes to safeguard people from the risk of abuse

- The service had effective safeguarding systems, policies and procedures. There was a consistent approach to how safeguarding concerns were managed promptly in an open, transparent and objective way, using local safeguarding procedures whenever necessary.
- Staff had an understanding of safeguarding practice and had received training. They felt confident in raising any concerns and knew who to report to.
- People who lived in the service said they felt safe, saying, "I feel absolutely safe, no question of that." If they had any concerns they knew how to use the alarm system. One said, "When I press my buzzer, they [staff] come as soon as they can, usually within 5 minutes. They come quickly at night too."

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.
- Staff had completed training in the MCA and understood its principles.
- Staff were observed to ask people's consent before helping them or entering their room. This was confirmed by people who said the staff always knocked on their door before entering.

#### Staffing and recruitment

- The management team had recently created new and increased job roles. This included laundry assistant, housekeepers including a head housekeeper and more activities staff. They were also in the process of employing a care co-ordinator and a business administrator to support the management team and were recruiting staff from overseas on sponsorship. This was to provide more support to the care staff to free their time to care for people.
- There was sufficient staffing to meet the needs of the people who lived at the service. This was confirmed by our observations and people we spoke with said, "With the staff I don't think that I could have got better. They are always there when I need them. They're very helpful. I feel at home here. They always have the time to stop and talk to me." Another person said, "There are always staff on hand. They are helpful. They're good at their job and the atmosphere is quite good."
- There were robust recruitment processes in place with appropriate checks being made to ensure staff were suitable to work at the service, prior to them starting.

#### Using medicines safely

- Medicines were stored safely and at correct temperatures. Records showed people received their oral medicines as prescribed. Staff carried out regular checks of medicines and their records to ensure this.
- Staff authorised to give people their medicines had been assessed as competent and we observed that they followed safe procedures when giving people their medicines.
- Written guidance for medicines prescribed on a when required basis (PRN) was available for medicines prescribed in this way and there was person-centred guidance on how people have their medicines given to them.
- People who used the service had confidence with staff giving them medication. One person said, "I take medication. They're [staff] absolutely brilliant with meds. They never forget and are on time. If I'm in pain, they will give me paracetamol."

#### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the



premises.

- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- A recent Infection Control and prevention visit by the local authority had identified a number of areas for improvement. At inspection the improvements had been made. A head housekeeper had been employed whose role was to oversee the improvements.
- People who used the service said, "It's been refurbished. It is clean. They're particular about it being clean. They make regular checks and try to improve if possible."

#### Visiting in care homes

- The procedures in place for visiting the home were aligned to the Government guidance.
- Relatives told us they could visit whenever they want and were made to feel welcome. One relative said, "I'm free to visit anytime that I want night or day, 24 hours a day. They ask around dinner times to take more care." Another said, "They've [staff] said that we can go into eat with [person] too if we want to. They have a little room. The whole family could go."

#### Learning lessons when things go wrong

- Incidents, accidents and safeguarding were recorded and analysed to identify trends or patterns to reduce the likelihood of these events reoccurring and any lessons learnt.
- Lessons learnt were discussed with staff at team meetings, during supervision or at handovers to ensure they were implemented as soon as possible.
- There was an open culture in which staff felt they could raise any safety concerns, and this feedback was highly valued and led to learning and improvement.

# 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

At our last inspection there were continued concerns and risks relating to the governance arrangements in place to drive improvement at the service. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Management and quality assurance systems in place helped to ensure areas of improvement were identified and action taken to continuously improve the quality of service provided.
- The provider had oversight of the service and worked closely with the management team to plan for future needs and developments.
- Staff said they were well supported in their role with ongoing training and regular supervision which they found useful. They understood their responsibilities to keep people safe whilst respecting and promoting personalised individual care.
- Staff worked well as a team to ensure people received the care they required. Staff told us, "I think the team works well and can communicate effectively when there is a handover so people are sure what to do and how to do it."

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

- The service had a positive culture that was person-centred, open, inclusive and empowering.
- The registered manager was solution focussed in their approach and saw challenges as opportunities to drive improvements and achieve better outcomes for people and staff.
- People who used the service felt the registered manager was approachable. One person said, "I know the manager. I see [them] and talk to them. I can sit and have a chat with [them]. [They're] quite open. [They'll] sit and listen to me." Another person said, "The home is definitely well managed. They're a good bunch there's no problem with any of the staff they're lovely."
- Staff felt the management team was approachable if they had any concerns. They said, "I feel comfortable and welcome and not afraid to raise any questions or concerns." Another said, "The office door

is always open for us to report things confidentially."

- With the help of the activities staff, who cover 7 days a week, the staff were keen to encourage people's interests. Some people wanted to go shopping. To ensure everyone could be involved they had people come in selling clothes, which they could try on, as part of a pamper day.
- People were enthusiastic about what was provided for them. One person said, "We play board games, we also paint. They have a piano that one of the residents can play. That's a big thing. We're going to have a little show in a week or two and a friend of mine is coming to play the piano." A relative said, "[Person] enjoys taking part in the activities – pamper days, film days, arts and craft. They take them out to the shops and for lunches. They had a summer fete and everyone was included."

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; continuous learning and improving care

- The registered manager understood their responsibility in relation to the duty of candour and this was demonstrated in the records we reviewed. People, relatives and staff felt they were approachable, listened and responded appropriately in a timely manner.
- The provider and management team were committed to ensuring a culture of continuous learning and improvement. They had worked with the local authority and CQC following inspections and visits, responding promptly, which had led to improvements in the care provided and consequently feedback and ratings.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The management team had been keen to work with health care professionals to improve and build good relationships to ensure people received timely care, including being involved with a project with the local GP surgery to help monitor people's health.
- The management team worked with people to help achieve their goals. This had involved working with the local church for one person who had always wanted to be baptised, which was followed by a celebration party at the home, which they were really enjoyed. For other people they had worked with health care professionals and relatives to improve their mobility, so they had gone from being in bed all the time to sitting in a chair and walking again. This had given people their confidence and a feeling of independence back.