

Wentworth House Care Services Ltd

Wentworth House

Inspection report

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Wentworth House is a care home in Salford which is registered with CQC to provide care for a maximum of 25 people. There were 23 people using the service at the time of the inspection.

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

We found record keeping needed to improve and some care plans lacked important details about the care people required. Some people did not have appropriate care plans in place, despite living at the home for several months. Audits were carried out to monitor the quality of service, however these needed to improve to ensure gaps in record keeping were identified and addressed.

Some medicines were not stored securely, mainly creams and sluice room doors were not always locked to prevent people being placed at risk. Fire doors were seen to be held open by inappropriate means which could stop them closing properly. We raised these concerns with the care manager and these areas of concern were addressed.

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. However, an MCA/Best Interest decision had not been completed for one person with bed rails in place.

There were enough staff to care for people safely and correct staff recruitment procedures were followed. Staff understood about safeguarding and how to report concerns. Equipment and the premises were well-maintained

There were systems in place to seek feedback from people living at the home, including the use of satisfaction surveys. Out of hours spot checks were also undertaken and staff supervisions held.

Rating at last inspection

The last rating for this service was good (published March 2020).

Why we inspected

This inspection was prompted by a review of the information we held about this service. 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 (effective, caring and responsive) we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from good to requires improvement based on the findings of this inspection.

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.

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

Enforcement

We have identified a breach in good governance, particularly in relation to record keeping.

Please see the action we have told the provider to take at the end of this report.

Follow up

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

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

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 Health and Social Care Act 2008.

Inspection team

The inspection was carried out by 1 inspector and an expert by experience. 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

Wentworth 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. Wentworth House 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 service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission 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 our inspection, there was a registered manager in post.

Notice of inspection

This inspection was unannounced and we visited the home on 18 May 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 who work with the service, although did not review the provider information return (PIR) as part of this inspection. 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.

During the inspection

We spoke with 6 people who used service and 4 relatives about their experience of the care provided. We spoke with 7 members of staff including the provider, care manager, deputy manager and 4 care staff.

We reviewed a range of records. This included care plans, recruitment information, staff training records and records associated with the provider's quality monitoring systems.

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 as good. The rating for this key question has changed to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Assessing risk, safety monitoring and management;

- Not all risks were well managed. Safety checks of the building and equipment were completed, with certificates available of work and servicing undertaken. A fire risk assessment had been completed and reviewed, however we spoke with the care manager about ensuring fire doors were not held open by inappropriate means with large ornaments, as this could stop them closing properly.
- We found a sluice room to be unlocked, with the keys still in the door meaning people could place themselves at risk of harm, although there were no people in close proximity during this observation. We raised this with the care manager and this was addressed immediately.
- People had a range of risk assessments in place regarding their care which covered areas such as mobility, skin, nutrition and moving/handling. Where any risks were identified, control measures were in place about how to keep people safe.

Using medicines safely

- Medicines were not always managed safely. Medicines were stored in a locked trolley, although found some creams were not always stored securely and were accessible in people's bedrooms. We raised this with the care manager and these were removed immediately.
- Medication administration records (MAR) were completed accurately with no missing signatures. One person did not have a MAR in place for a drink thickener, although this was being discussed with the pharmacy for this to be amended and rectified.
- PRN plans (when required) were in place as needed if people needed medicines to be given in certain circumstances. One person's plan lacked detail about how they would communicate if they were in pain, as staff said they wouldn't be able to. We spoke with the registered manager about ensuring this was updated.
- Certain medicines needed to be stored in a fridge and we found regular temperature checks were carried out.
- People living at the home said they were happy with how their medicines were given, which was in a timely manner. Relatives commented how staff were knowledgeable and kept them informed of any changes.

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

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.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorized under the MCA. We checked whether the service was working within the principles of the MCA.

- One person living at the home had bed rails in place, which restricted their movements. A decision specific mental capacity assessment had not been completed to ensure this was in the person's best interests. This was put in place after the inspection.
- DoLS applications were submitted to the local authority as required if people were assessed as lacking capacity.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place to safeguard people from the risk of abuse. Both people living at the home and relatives said they felt the service was safe. One person said, "I do feel safe. The staff come quickly if I use the call bell." A relative added, "I have no concerns about safety. I have a good rapport with the staff too."
- Staff understood about safeguarding and said they had received training. One member of staff said, "Medication errors could be safeguarding concerns and types of abuse can be mental, financial or verbal. I have done safeguarding training and would report any bad practice."
- A safeguarding policy and procedure was in place, explaining what needed to be done if abuse was identified.
- Safeguarding and accidents/incidents were monitored, although we were told none had occurred since our last inspection.

Staffing and recruitment

- There were enough staff employed to care for people safely. Everyone we spoke with said there were enough to deliver the care people needed. One member of staff said, "Every care home could always use more staff, but we have enough and get things done. Staff always stay on and nobody goes without care." A relative said, "There could always be more, but staff are very capable and are very good with [person]."
- Staff were recruited safely, with all the necessary procedures followed including interviews, seeking references and carrying out DBS checks. Disclosure and Barring Service (DBS) checks provide information including details about convictions and cautions. The information helps employers make safer recruitment decisions.

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 minimize 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.
- The provider was following government guidance in relation to visiting, and relatives were able to see their family members safely and at times of their choosing.

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 as good. The rating for this key question has now changed to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

Continuous learning and improving care; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; 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.

- We found record keeping needed to improve, particularly in areas such as when people had been assisted with oral hygiene, personal care and re-positioning to prevent skin breakdown.
- Some people's care plans lacked important details about the care they required. For example, sight/hearing and aids required, pressure relieving equipment and personal care routines.
- One person living at the home had several care plans missing and another person did not have any care plans in place at all, despite living at the home for some time. Some people's care plans and risk assessments had also not been reviewed for several months.
- Daily walkaround checks were completed, although did not take into account some of the areas of concern we had identified at the inspection. For example, ensuring fire doors were not compromised and that sluice rooms were secure.

The failure to maintain accurate care records was a breach of regulation 17 of The Health and Social Care Act 2008 (Regulated Activities) Regulations 2014, regarding good governance.

- Audits were carried out and covered areas such as care plans, medication and infection control.
- Competency assessments were also carried out of areas such as medication to ensure this was done safely.
- Systems were in place to involve people, relatives and staff in how the service was run, including the use of satisfaction surveys to obtain feedback. Team meetings and staff supervisions were held to gather staff views and monitor performance and development. Residents meeting were held, although the last one was in November 2022.

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

- At the time of the inspection, the home there was a registered manager in post, who was also the nominated individual. There was also a care manager, who intended to register with CQC undertook the day to day management of the home. We liaised with them throughout the inspection and they were cooperative in providing us with the necessary documentation and listening to any feedback required.
- Statutory notifications were submitted for incidents such as serious injuries and deaths.

- It is a legal requirement for the ratings from the last inspection to be displayed on any websites operated by the provider and at the home. We saw these were displayed as required on a notice board within the home.

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

- The staff team spoke of a positive culture at the service and said they enjoyed their roles. One member of staff said, "It is great working here and I really enjoy my job. Everybody works so well together."
- Staff told us they felt the service was well managed and that there was good leadership at the home. One member of staff said, "I feel very well supported in my job and all the managers are very approachable."
- People achieved good outcomes whilst living at Wentworth House and the feedback about the care at the home was positive. One person said, "I feel I'm very well looked after." Another person said, "I am happy here and I like it. The staff are wonderful and patient."
- Relatives also spoke positively about the care provided at the home. One relative said, "The care here is excellent. Each time I visit, [person] is clean, well presented and seems very happy."

Working in partnership with others

- The service worked in partnership with other agencies as required including local authorities and social work teams.
- Prior to our inspection we sought feedback from the home from various health care professionals, who provided us with an update about their involvement with the home and any good practice they had identified.

This section is primarily information for the provider

Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 17 HSCA RA Regulations 2014 Good governance Appropriate systems were not in place to ensure good governance, particularly in relation to record keeping.