

Anchor Hanover Group

Millfield

Inspection report

Huddersfield Road
Waterhead
Oldham
Greater Manchester
OL4 3NN

Website: www.anchor.org.uk

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05 September 2023
13 September 2023

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27 September 2023

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

About the service

Millfield is a purpose-built residential care home situated in the Waterhead area of Oldham. The service is registered to provide care for 37 people. At the time of our inspection there were 35 people living at the home.

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

People and relatives were complimentary about the service and were very happy with the care and support given at Millfield. There were effective safeguarding systems in place and safeguarding concerns were managed appropriately. Staff understood their responsibilities in relation to reporting safeguarding concerns. Although we received mixed comments from people and relatives there were sufficient staff to provide care and support to people promptly and attentively. Staff had been safely recruited. Medicines were generally well-managed. Some minor concerns found on inspection were dealt with promptly. The home was clean and well-maintained, and staff followed good infection control practices.

Staff supported people with their healthcare needs and worked well with external healthcare professionals. The management team supported staff well and staff had the right skills and knowledge to meet their people's needs effectively. Food was of a high quality, with plenty of choice. The home was decorated and maintained to a very high standard and provided a very pleasant environment. 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.

Staff were kind and caring, respected people's privacy and dignity and promoted their independence. The service provided a range of activities for people to take part in.

The home was well managed with effective quality assurance processes in place. The registered manager and staff promoted a positive culture in the home; people's care was person-centred.

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 6 August 2018).

Why we inspected

This inspection was prompted by a review of the information we held about this service. 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.

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?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Millfield

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

The inspection was carried out by 2 inspectors 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.

Millfield 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. Millfield 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 5 September 2023 and ended on 15 September 2023. We visited the service on 5 and 13 September 2023.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We gathered feedback from the local authority and Healthwatch Oldham. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. 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 looked around the home and observed how staff interacted with people. We also observed the lunchtime meal. We spoke with 6 people who used the service and 3 relatives about their experience of the care. We also spoke with the registered manager, deputy manager, the chef, a team leader and 3 care assistants. We reviewed a range of records. This included 3 people's care records, medicine administration records and 3 staff recruitment files. A variety of other records relating to the management of the service were also considered as part of the inspection. These included audits, training and supervision records and checks of the equipment.

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 good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Using medicines safely

- Medicines were generally well managed. However, we found some minor issues with the way staff documented information on the medicine administration records (MAR), and fluid thickener was not correctly documented when it was used. These were rectified straightaway and processes put in place to prevent them reoccurring.
- Staff received medicines training and had their competencies assessed before being permitted to administer medicines.
- Medicines were stored correctly. The temperatures of the room and the fridge where medicines were stored were checked daily to ensure they were at the correct temperature. One person managed their own medicines. These were stored securely in their bedroom.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives were happy with the care and support provided at Millfield. Comments included, "I feel very safe and comfortable here. The other people who live here are lovely too. I would speak to the staff if something was wrong, but I've made no formal complaints. I don't feel restricted at all here. It's all open to us" and, "I'm very happy here. I feel safe because there's always someone here to help if needed and I have friends here who can chat with me."
- There was a system to document and report safeguarding incidents. This included reporting to the local authority safeguarding team and the CQC. Information about how to report safeguarding concerns was displayed in the entrance hall.
- Staff had received training on how to recognise and report abuse. Staff told us they felt confident they could raise any concerns and these would be listened to.

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

- People's care records contained risk assessments and management plans which addressed any risks associated with their health and well-being, such as their mobility, nutrition and hydration needs and risk of falling.
- Annual servicing of equipment was up to date and regular maintenance checks of the building and fire equipment had been completed and ensured the building was safe.
- Emergency evacuation plans outlined the support each person would need to evacuate the building in an emergency.
- There were processes in place to record, investigate and monitor accidents, incidents and complaints.

Staffing and recruitment

- Staff were recruited in line with best practice. Checks were made to ensure staff were of good character and suitable for their role. This included obtaining references from previous employers and checks with the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- We received mixed comments about staffing levels. They included, "There seem to be fewer staff in the mornings, and they seem more stretched than they used to be."; "I realise that they can be short staffed at times, but if I use the buzzer at night they come fairly quickly. I am very happy here" and "If I use my buzzer at night, the staff always come quickly." However, we found no evidence during our inspection of problems with staffing.
- The registered manager told us there was an on-going recruitment drive and when needed, regular agency staff were used to fill any gaps in the staffing rota.

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.
- In line with current government guidance, visits to the service were unrestricted and people were welcome at any time.

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 our last inspection we rated this key question good. At this inspection the rating has remained good. 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

- A thorough assessment of people's care and support needs was completed prior to their admission to the service. This information was used to devise care plans and risk assessments. The service used nationally recognised assessment tools, such as the malnutrition universal scoring tool (MUST) which is used to help identify people at risk of malnutrition, to help staff provide appropriate care for people.

Staff support: induction, training, skills and experience

- New staff completed an induction, mandatory training and a period of shadowing more experienced staff when they first started working at the service. There was on-going supervision.
- The training matrix showed good staff compliance with on-line training. This kept staff up to date with best practice. Staff were following correct moving and handling practices, supporting people to eat and drink appropriately and following good hygiene practices.

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

- The home was very well maintained and decorated to a high standard. Furniture and fittings were of a very good quality. This provided a very pleasant environment for people to live in.
- All bedrooms had en-suite facilities and people were encouraged to personalise their rooms. There were two dining rooms and several communal lounges which provided comfortable settings for people to relax in. The service had a well-maintained garden.
- The service had a small 'sweet' shop for the purchase of confectionary, toiletries and cards.
- There was clear signage to support people to find their way around the service.

Supporting people to eat and drink enough to maintain a balanced diet

- People were supported to maintain a healthy diet and fluid intake. Good quality 'home cooked' meals were provided, with home baking and fresh fruit available between meals.
- People's comments about the food were positive. One person said, "The meals are excellent, and there's plenty of choice." Another told us, "The food is good and there's good choice. There are always about six dessert choices, in fact."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Staff monitored people's health needs and made referrals to external healthcare services when appropriate.
- People and their relatives were happy with the way the service managed their health. One relative told us,

"I feel that the staff update me and are ready to answer my questions whenever I ask them. They make referrals to opticians. Bloods are taken regularly by the district nurses."

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 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 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- We found the service was working within the principles of the MCA and where required the appropriate legal authorisations were in place to deprive a person of their liberty.
- People who lacked capacity had mental capacity assessments undertaken and best interest meetings were held when specific decisions needed to be made on behalf of a person.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People were supported by staff who were caring and respectful towards them.
- Staff supported people carefully and patiently. Staff had chatty, positive interactions with people.
- We received many compliments about the care team. These included; "These carers are the best, and they never say a cross word or grumble about the work they do, even though they've often got a lot to get through", "The staff are very good, and you can have a joke with them, but they're also very professional and attentive" and "All the regular staff are kind and pleasant. They take their time with me and are patient."

Respecting and promoting people's privacy, dignity and independence

- Staff understood the importance of helping people remain as independent as possible. One person told us, "If you want to be independent, the staff will let you get on with things. For example, they'll let me make my own bed, which is good."
- Throughout our visit we saw many examples of how staff supported people to maintain their dignity, for example when supporting them with their mobility and at meal times.
- Staff valued people's privacy. Staff knocked on people's bedroom doors and waiting to be invited in.

Supporting people to express their views and be involved in making decisions about their care

- People were involved in making decisions about their care. One person told us, "They listen to me and support as much as they possibly can."
- Staff encouraged people to make day to day decisions, such as what they would like to eat, where they would like to sit and what they would like to do.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People's care needs were clearly documented in the care records in a personalised way. However, one person who had a catheter did not have the required care plan in place. The registered manager immediately rectified this issue.
- People and relatives felt staff knew people well and ensured their care was given in line with their preferences.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported and encouraged to take part in a number of different social activities at the service. There was a varied and interesting activities programme which included community involvement, intergenerational opportunities, visiting artists and entertainers and trips out.
- People told us they were happy with the social activities. Comments included, "I like doing the exercises, quizzes, the reminiscences, the singers and the ballroom dancing. I can garden. I have my own gardening tools in a box in the en suite, but there are also tools here for others to use if they haven't any."; "I enjoy the activities here, particularly bingo, but I really do like everything in the programme. We did Tai Chi in armchairs today" and "I enjoyed the Tai Chi exercises this morning. I also enjoy the music sessions with the Manchester Camerata group. I love the children's activities too. They come and dance for us."
- A visiting Church of England priest held a communion service once a month. One person told us, "I attend the St. John The Baptist Hey Church communion service here in this room every third Wednesday of the month and it's always well attended."

Improving care quality in response to complaints or concerns

- The service had a clear complaints policy and people and relatives knew who to raise concerns with if they needed to.

End of life care and support

- The service worked closely with community health professionals to care for people as they approached the end of their lives.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get

information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's communication needs were assessed, and their preferences and support needs detailed in their care plan.

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 good. At this inspection the rating has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- People and relatives were complimentary about the quality of the care, the registered manager and the staff team. One relative told us, "I like the manager – she's easy to talk with. All the regular staff know me well. I feel that the home is well run." Another said, "The manager is approachable, and the home seems to be well run. I would recommend this home because the staff are all great and it's clean and tidy. I can't think of anywhere else that I'd want my mum to be. For mum, this is perfect."
- There was a positive culture at the service. Staff told us there was good team work, and that everyone worked well together to provide the best possible care for people and to support each other.
- Staff were encouraged to take pride in their work through the 'Employer of the month' award.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager had good oversight of the service.
- The registered manager and senior staff carried out regular audits and checks. These were used to review the quality and safety of the service.
- The management team responded promptly to the areas we found needed improvement on this inspection.

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

- People's and relative's views were captured via resident and relative meetings, a relatives' WhatsApp group and through an annual survey.
- The service produced a colourful monthly newsletter called 'What a Palaver' which contained information and photographs about activities, events, birthdays and other items of news.
- People's health needs were regularly reviewed, and staff worked closely with external health and social care professionals to ensure their well-being was maintained.

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 registered manager understood their responsibility around the duty of candour. They were aware when they needed to share information when things went wrong, with other agencies including the CQC and the local authority.