

Croftwood Care UK Limited

Wealstone Residential Care Home

Inspection report

Wealstone Lane
Upton
Chester
Cheshire
CH2 1HB

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Ratings

Overall rating for this service	Good ●
Is the service safe?	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

Wealstone Residential Care Home was providing personal care to 38 people at the time of the inspection. The service can support up to 42 people across two separate wings, each of which has separate adapted facilities. One of the wings specialises in providing care to people living with dementia.

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

Since our last inspection, improvements had been made and the service was no longer in breach of regulations.

Systems were now in place to manage risks to people's health and wellbeing and medicines processes were safe.

Care plans contained detailed person-centred information to ensure staff could meet the preferences of people receiving care. There were now plenty of activities available for people to engage in. This enabled people to pursue their social and leisure interests and reduce the risk of social isolation. The communication needs of people were known, ensuring information could be presented to people in the most appropriate format.

People received a caring service and felt supported and valued as individuals. People told us they were treated with respect and staff upheld their privacy and dignity during personal care. People were supported by staff who knew them well and trusting relationships had been formed.

The service was well-led, and staff felt supported by an open and honest culture. Staff were motivated to deliver a high standard of care and received training appropriate to their job role. The registered manager worked with other professionals to ensure positive health outcomes were achieved for people.

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

Rating at last inspection (and update)

The last rating for this service was requires improvement (published 24 March 2020) and there were multiple breaches of regulation. 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 carried out an unannounced comprehensive inspection of this service on 04, 06 and 11 February 2020. Breaches of legal requirements were found.

We undertook this focused inspection to check the provider 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, Caring, Responsive and Well-led which contain 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.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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 caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Wealstone Residential 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 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

This inspection was carried out by one inspector.

Service and service type

Wealstone Residential Care Home 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.

The service had a manager registered 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.

Notice of inspection

This inspection was unannounced.

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 professionals who work with the service. This included Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We undertook a routine monitoring activity and sought assurances from the registered manager about the concerns we found at our last inspection. During this process we reviewed records and spoke with six people who used the service by telephone. We also received written feedback from eleven relatives about their experience of the care provided.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

We used all of this information to plan and inform our inspection.

During the inspection

We spoke with one professional who regularly visits the service. We also spoke with seven members of staff including the registered manager, assistant manager, senior care workers, care workers, an activity worker and domestic staff. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included six people's care records and multiple medication records. We looked at five staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection the provider had failed to ensure that the safe administration of medicines was effectively managed. This was a breach of regulation 12 (Safe Care and Treatment) 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.

- Medicines were now managed safely. Records of administration were maintained and in line with best practice. This included when people were prescribed creams.
- People told us they felt their medicines were managed safely. One relative said, "Since [name] has been in the home, I feel [person's medical condition] is more under control, due to the medication now being administered at the right intervals."
- Guidance was now in place for all prescribed medicines to be administered on an 'as required' basis. This helped staff to understand why certain medicines were prescribed; and under what circumstances they should be offered to a person.
- Medicines were stored securely and only administered by staff who were suitably trained.

Staffing and recruitment

At our last inspection we recommended the provider considers current guidance to review how staff members were deployed across the home to ensure people's individual needs and preferences were met. The provider had made improvements.

- Staffing levels were safe. Staff told us, "Staffing levels are much better and more reliable," and "We have changed routines in the day so it is more relaxed and people can get up at their leisure. We have more time to spend with people."
- Some people told us they felt the service would benefit from additional staff, however said staff responded to their needs in a timely manner. Comments included, "Sometimes it's a bit short, that happens everywhere especially with COVID," "I use my call bell as I need someone to help me change. They do come quickly," and "I don't know, they work pretty hard. Probably do with a few more [staff]. I have a bell I can press. Staff do come quickly if I press it."
- Staff were safely recruited. Appropriate checks were made before employment was offered.

Preventing and controlling infection

- The service was visibly clean and tidy; cleaning schedules were maintained. One relative told us, "The building itself is a very nice, comfortable environment to live in and is kept spotlessly clean."
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- 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 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.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Assessing risk, safety monitoring and management

- Risks to people's health, safety and welfare had been appropriately assessed; care plans been developed to safely manage identified risks.
- Relatives told us their loved ones received safe care and that people's health and wellbeing had improved since living at Wealstone Residential Care Home. Comments included, "[Name] has come on leaps and bounds, due to the care she is receiving. She has gained weight, and is looking a lot more healthier," and "It was a really safe environment for [name] to be in. Mum has thrived here. She's really happy and looks very fit and healthy."
- Routine checks on the environment and equipment were maintained. Certificates and audit documentation supported this.

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

- People were protected from the risk of abuse; policies and procedures supported this. Staff had completed training and knew how and when to raise concerns.
- Provider records demonstrated referrals had been made to the local authority safeguarding team and appropriate investigations to any allegations raised were completed.
- Relatives felt people were protected from the risk of abuse. We were told, "From my knowledge of the staff and procedures I feel quite confident in leaving my Mum to live there," and "We have trusted the staff with [name's] well-being and safety and they have done a great job of this."
- Systems were in place to record accidents and incidents. They were reviewed regularly by the registered manager to look for any trends; and identify whether future incidents could be prevented.

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 the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

At our last inspection we recommended the provider considers current guidance and reviewed their current care planning system to ensure the involvement of people was clearly documented. The provider had made improvements.

- Care plans were reviewed on a regular basis. People were also supported to access independent advocates to assist them to make decisions.
- People confirmed they were involved in decisions about their care.
- Not all relatives had seen copies of people's care plans, however told us they were kept informed of any changes in people's care needs and involved in key decisions.

Ensuring people are well treated and supported; respecting equality and diversity; Respecting and promoting people's privacy, dignity and independence

- We observed people being supported by staff who knew them well. One relative told us, "The staff seem to have a positive relationship with [name] and this is comforting."
- People spoke positively of the care they received. Comments included, "The staff are lovely, couldn't be kinder. They make me laugh as well," and "I think they do a good job in the situation we are in with COVID, I can't ask for anymore."
- Relatives also felt people were well cared for. One relative said, "I honestly cannot praise the home and the great team who work there high enough. From day one they have cared for [name] in such a lovely way, which is so reassuring knowing your loved one is being cared for so well and is completely settled and happy." Other relatives told us, "[Staff] go above and beyond to give [name] the best care possible and make her feel comfortable at all times," and "Our Mother and the family have always been very pleased with the exceptional care and kindness of the staff at Wealstone."
- At our last inspection we received mixed feedback about the quality of care for people living with dementia. At this inspection we were told, "[Name's] care seems to be generally good and has improved since being on the dementia wing, as to be expected. It has a nice calm atmosphere," and "I think Bluebells has improved a lot. Much nicer atmosphere."
- People were also supported to be as independent as possible. Care plans detailed how people were to be encouraged and supported to maintain their independence. Comments from people included, "I do my routine in my bedroom and I clean. This is very important to me," and "I try to do as much as I can and the staff help me."

- People's diverse needs were known and respected, including any protected characteristics under the Equality Act 2010.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has now improved to 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

At our last inspection the provider had failed to demonstrate accurate, complete and detailed records were maintained in respect of each person using 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.

- Record keeping had improved. Records used to monitor people's health; such as weight, food and fluid monitoring were fully completed. Systems were now in place to ensure records were regularly monitored by the senior care and management team.
- Care plans had been rewritten and reflected people's needs and preferences.
- People confirmed they received care which was personalised around their needs and preferences. Comments included, "Staff help me how I want it," "I happy with the care I get from my staff," and "The staff are lovely, they look after me wonderfully. They peep in my bedroom to see if I am still asleep. Sometimes they make a nice cup of coffee or you can choose what you want."

Meeting people's communication needs; 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

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

At our last inspection the provider had failed to ensure people were provided with information in a way they could understand. The provider had also failed to provide opportunities which enabled people to maintain their leisure interests and take part in activities that were socially and culturally relevant to them. This was a breach of regulation 9 (Person Centred Care) 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 9.

- Positive feedback was received about the activities on offer as well as opportunities to reduce the risk of social isolation. We were told, "I see regular updates of activities via social media. [Name] wouldn't normally join in with such a wide range of activities but is obviously encouraged to have a go and is clearly happy, "[Staff] arrange games and activities, word searches and bingo, always laid on. I can get involved if I want to. I used the I-pad this morning to watch a video," and "Yes, we have a fair amount. I get involved in anything going on. We do quizzes and painting, there is quite a lot going on that I like."
- People also confirmed they were able to enjoy visits outside of the service since the easing of national restrictions imposed during the COVID-19 pandemic. One person told us, "It's nice to get out, walk in the park and to the shop."
- Activities were now planned, clearly displayed and people's participation was recorded.
- Information displayed also now considered the communication needs of people who lived with dementia. Wall mounted pictorial menus and menu cards were available to support choice and decision making.
- Communication needs were identified in care plans. The registered manager described how some people who experienced sensory loss also used technology to support communication.

Improving care quality in response to complaints or concerns

- A complaints policy was in place and information on how to make a complaint was clearly visible. Records were maintained.
- People confirmed they knew how to raise a complaint and who they would complain to. We were told, "I would speak to [the registered manager] first. Yes, I should imagine she would take things seriously."

End of life care and support

- Care plans demonstrated people and their loved ones had been involved in decision making when a person was at the end of their life. Personal wishes were documented.

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 requires improvement. At this inspection this key question has now improved 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; 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

At our last inspection the provider had failed to demonstrate how they effectively monitored the quality of the support provided, including the quality of the experience for people using 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.

- Systems were now in place to monitor and review the quality of care and experiences of people. Regular audits were now completed. The issues we found at the last inspection had been addressed.
- Since last inspection, changes had been made within the management team. The new registered manager understood their responsibility for notifying the Care Quality Commission of events that occurred within the service and we saw that accurate records were maintained.
- The registered manager also understood their responsibilities under duty of candour.
- The most recent CQC rating was clearly displayed in the reception area.

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

- People told us that the service was well led; we also observed a positive culture which was both person-centred and inclusive. Comments included, "The new Manager seems to have shaken things up a bit and made some welcome changes to the general feel of the place," and "[The registered manager] has turned this place around."
- Staff felt supported in their roles. We were told, "The new managers have inspired us and pushed us to do more. I think it has made us more competent," and "It is nice, not pressurised and we have time for people. It is well staffed, lots of equipment, much better than other [services] I have worked."
- The registered manager worked with external professionals to ensure health outcomes were achieved for people. One professional who regularly visited the service commented, "The working relationships are really good. Always staff around. When I talk to resident's they are happy. The managers really know residents."

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

- People felt engaged and involved. Staff were supported through regular supervision meetings and could share views through team meetings.
- Relatives and people were kept up to date with changes and their views were encouraged through resident's meetings. Relatives told us, "The efforts the home have taken to keep families in touch during the pandemic have been hugely appreciated, whether it was photos of everything going on social media or supporting residents on video calls," and "The communication between the home has been amazing, always answering the phone and answer all our questions we have. They are also very fast at ringing us if they have my questions about [name]."
- Records were maintained of meetings which demonstrated how feedback had driven improvements within the home environment, to the quality of food and also leisure opportunities for people.