

Mrs Ann Benson

The Waynes - Bridlington

Inspection report

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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

The Waynes provides personal care and support for up to 30 older people who may have dementia in a care home. There were 22 people living at the service on the day of the inspection.

At our last inspection we rated the service good overall. At this inspection we found the evidence continued to support the rating of good. There was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

The inspection took place on 1 August 2018 and was unannounced.

People felt safe and staff understood their responsibilities around safeguarding adults and reporting concerns.

Risks to people's physical and mental health had been identified and guidance was available for staff to manage those risks. The environment and equipment was safely maintained.

Staff recruitment procedures ensured background checks were made before people were offered employment and there were sufficient staff on duty to meet people's needs.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

People had access to healthcare professionals in the community such as their GP or community mental health team.

Staff maintained positive relationships with people and showed care and compassion in their interactions. They consulted people about the way in which they wished to receive their care and gave them the necessary support.

There was a quality monitoring system in place which identified where improvements were needed although could be improved by adding more detail around the actions taken.

People and staff were invited to share their views and give feedback about the service

Further information can be found in the detailed findings below

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 remains good.	Good ●
Is the service effective? The service remains good.	Good ●
Is the service caring? The service remains good.	Good ●
Is the service responsive? The service remains good.	Good ●
Is the service well-led? The service remains good.	Good ●

The Waynes - Bridlington

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.

The inspection took place on 1 August 2018 and was unannounced.

The Waynes is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The inspection team was made up of two adult social care inspectors.

Prior to the inspection, we reviewed all the information we held about the service, including previous inspection reports and statutory notifications sent to us by the provider. Statutory notifications are a legal requirement and provide CQC with information about changes, events or incidents in order that we have an overview of what is happening at the service. We also contacted the local authority to gather their feedback and views about the service.

Before the inspection, the provider completed a Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used this information to assist us in planning the inspection.

During our inspection, we spoke with three people who used the service, five relatives, two care workers, the chef, the registered manager and the deputy manager. We spent time looking at documents and records relating to people's care and the management of the service. We looked in detail at three people's care plans, medicine records, three staff recruitment and training files and policies and procedures developed and implemented by the provider. We observed medicines being administered, the lunch time experience and activities throughout the day.

The registered manager provided us with a copy of the training matrix after the inspection.

Is the service safe?

Our findings

At the last inspection this service was rated good and at this inspection the rating remains good.

People living at The Waynes told us they felt safe. People told us, "I do feel safe" and, "It does feel safe. There is someone here day and night." One relative told us, "It feels mum is safe here." Staff followed the safeguarding policy and understood how to protect people from potential abuse or harm. Most of the staff had been trained in safeguarding adults but there were some gaps and some training was out of date. However, staff could describe to us how they kept people safe. Staff and people living in the home told us they felt confident any concerns raised would be managed effectively and thoroughly. Staff were aware of how to whistle-blow and there was a policy available for staff to use should this be required.

Risk assessments were in place for each person and these were regularly reviewed or updated when changes occurred.

Where people displayed behaviours that may challenge others staff were able to use distraction techniques to deflect the behaviour. We did not observe any behaviours of this type during the inspection. Any accidents and incidents had been recorded and reviewed but a more detailed analysis would be of benefit to ensure changes were made to prevent further incidents.

Staffing levels were sufficient to meet people's needs. Rotas confirmed that numbers remained consistent. One member of staff told us, "We sometimes have up to seven people wanting to get up early and this can be difficult as they require two staff." We asked the registered manager about this and they discussed how they could deploy staff more effectively." They told us they would be looking at ways to make busy times of day easier to manage. The staff team was consistent with some staff working at the service for a number of years which provided consistency and stability for people.

Staff recruitment procedures had required people to complete application forms, attend an interview and background checks had been completed. These included references and checks by the Disclosure and Barring Service (DBS). DBS checks provide information about people's background and help employers make safer recruitment decisions to prevent unsuitable people from working with adults who may be vulnerable.

Medicines were managed safely. Staff who administered medicines had received training but some of the training needed to be updated. We observed medicines were being administered competently. Controlled drugs were stored in a suitable cabinet and the CD register was completed and up to date. Some prescription medicines are controlled under the Misuse of Drugs legislation (and subsequent amendments). These medicines are called controlled medicines or controlled drugs.

Servicing and maintenance checks of equipment and the building had been completed in line with health and safety guidance. There was a fire risk assessment in place and scenario based fire drills took place every three months. Firefighting equipment was serviced regularly in line with fire safety recommendations. There

had been a workplace assessment carried out which identified where improvements were needed and an environmental audit had been completed by an outside specialist. Any identified actions had been completed. There were health and safety policies and procedures in place for staff to follow.

Is the service effective?

Our findings

At the last inspection this service was rated good and at this inspection the rating remains good.

People's needs were assessed pre-admission and care plans were developed from the assessments.

Where people's physical and mental health conditions had an impact on their wellbeing their GP, district nurse or community mental health team were involved. Information was in place if people needed to transfer between services.

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. We saw that people were asked for their consent to care and where they were unable to consent decisions were made involving their relatives and professionals in their best interest.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DOLS). Applications had been made for DOLS where necessary and in some cases these had been authorised by the local authority DOLS team.

Staff had received training in subjects such as safeguarding, Mental Capacity Act, infection control and health and safety although some training was due to be updated. Staff had completed care qualifications and managers held leadership management qualifications. Staff told us they felt very well supported and received regular supervision with either the registered manager or deputy manager. The supervisions would be of more benefit to staff if they were clearly linked to staff development to show the progression of staff through specific training.

People's nutritional needs were assessed and supported where necessary by staff. Specialist services such as dieticians had been involved where necessary. Most people came to the main dining room for their meal. There was a pictorial menu on the wall and displays of photographs with people doing activities. Reminiscence items reflected the fact that the room was a dining room orientating people to their purpose of eating and drinking. The tables were set with tablecloths and cutlery and a selection of condiments were available if people wished to use them.

We looked around the service and saw that bedrooms reflected people's personalities and interests. The communal areas had areas for reminiscence and activities and met people's needs.

Is the service caring?

Our findings

At the last inspection this service was rated good and at this inspection the rating remains good.

People told us that the staff were caring and considerate and we observed the service had an inclusive family atmosphere. One person said, "I get very good care." They went on to say, "Very, very good that one [referred to a care worker]." One relative told us, "Staff are caring and listen" and another said, "We love it here. [Name of relative] is very happy here."

We saw that people were happy, content and well cared for which demonstrated the positive impact which care at The Waynes had upon people's lives. There was a strong focus on building and maintaining relationships with people and their families. We saw many families visiting during the inspection and staff showed them respect and made sure they had any information they needed.

People and their relatives were involved in their care planning and any reviews that took place. One relative told us, "I am involved in reviews and any meetings (relating to care). The staff are accommodating and arrange them on my days off (from work)."

Service user meetings were held and we saw from the minutes that people had discussed wellbeing, fire safety, trips and ideas for activities. Any actions were recorded and followed up at the next meeting allowing people to have their say and see what had been done in response.

People were treated with dignity and respect. We saw staff knocked on people's doors before entering and were thoughtful in their approach to personal care.

Staff told us that they understood the need to ensure people were treated as individuals with different needs and preferences. We observed that staff approach to people was person centred and focused on individuals. A healthcare professional told us, "The carers are all very concerned for people and treat them like family."

Throughout the inspection, we observed all staff, including ancillary staff, took care to have positive interactions with everyone they encountered whilst carrying out their role. These interactions included commenting positively on the clothes people were wearing, asking people generally how they were feeling and responding in a caring manner to any comments people made. Staff were not afraid to show people affection, whilst still maintaining a sense of professionalism. These interactions helped to give people a sense of well-being and the feeling that they mattered to the staff who supported them.

Is the service responsive?

Our findings

At the last inspection this domain was rated good and at this inspection the rating remains good.

People received personalised care that responded to their needs. People's care plans were detailed and personalised and risk assessments were in place where appropriate. However, some people had no care plan relating to particular conditions. This had no immediate impact as staff knew people well and the provider agreed to review and update care plans where needed.

Care plans and risk assessments were reviewed regularly and where changes were necessary these were clearly recorded. A district nurse told us, "Staff are really on the ball and call us out when they have concerns."

People's activities were chosen by people at their meeting. We saw that people were reading newspapers throughout the day, watching TV or listening to the radio. In addition, we were told that people took part in arts and crafts activities. The provider had arranged for motivational exercise classes to be carried out by an outside provider twice a month. The service was involved with a local school and the children visited the service and sang to people several times in the year.

People and their relatives described events held at the service such as celebration of people's birthdays and a special party to celebrate a recent Royal wedding. They told us that people had the opportunity to go out each afternoon. One relative said, "Once a month people from local church visit. [Name of providers husband] takes people out in the bus. They can go shopping and he gets them an ice cream. Last week we had a clothes party." One person had expressed a wish to have chickens and so when the opportunity arose chickens were acquired and brought to the service. These are now cared for by the person with the help of the provider.

One person told us that their relative refused to join in activities but said that care workers made sure they visited them in their room for a chat. This ensured people were not socially isolated.

There was a complaints policy and procedure for people to follow. Since the last inspection there had been no complaints. There was a policy and procedure for people and staff to follow displayed in the entrance.

Is the service well-led?

Our findings

At the last inspection this domain was rated good and at this inspection the rating remains good.

There was a registered manager in post who was also the registered provider. 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.

The manager was supported by two care managers and all three were involved with people's care on a day to day basis.

The staff referred to the service as been, "like a family" and managers as been, "approachable and supportive." This was empowering for staff who told us they enjoyed working at the service which was clear during the inspection.

There was a quality monitoring system in place which identified areas for improvement. The system would benefit from more clarity around who was responsible for any actions and when they had been completed. However, there was daily oversight of people's care, environment and equipment which prevented any impact on people. The manager was aware of their regulatory responsibilities.

Outside professionals employed by the provider carried out audits of some areas such as health and safety. Other audits and checks were carried out by the provider maintenance checks were carried out. For example, a health and safety audit had been completed.

People had opportunities to express their views. They had meetings where they could discuss a variety of issues and gave feedback. Staff meetings and manager meetings were also held where they could share ideas and insights. The managers meeting was attended by the maintenance team and looked at maintenance and development of the environment.

The service worked closely with healthcare professionals to ensure good outcomes for people. We spoke with a district nurse who told us, "If I was asked I would recommend here [The Waynes]."