

***We are the regulator:*** Our job is to check whether hospitals, care homes and care services are meeting essential standards.

## Leftwich Community Support Centre

Old Hall Road, Leftwich Green, Northwich, CW9  
8BE

Tel: 0160642033

Date of Inspection: 29 May 2013

Date of Publication: June  
2013

We inspected the following standards as part of a routine inspection. This is what we found:

<b>Care and welfare of people who use services</b>	✓	Met this standard
<b>Meeting nutritional needs</b>	✓	Met this standard
<b>Cleanliness and infection control</b>	✓	Met this standard
<b>Staffing</b>	✓	Met this standard
<b>Complaints</b>	✓	Met this standard

## Details about this location

Registered Provider	Cheshire West and Chester Council
Registered Manager	Ms. Linda Shea
Overview of the service	<p>Leftwich Community Support Centre is a short stay and respite service, where people stay for a short period of time and do not live there permanently. They are registered to provide accommodation for persons who require nursing or personal care for up to 32 people.</p> <p>The home is situated in its own grounds in a residential area of Leftwich, close to Northwich town centre.</p>
Type of service	Care home service without nursing
Regulated activity	Accommodation for persons who require nursing or personal care

## Contents

*When you read this report, you may find it useful to read the sections towards the back called 'About CQC inspections' and 'How we define our judgements'.*

	Page
<b>Summary of this inspection:</b>	
Why we carried out this inspection	4
How we carried out this inspection	4
What people told us and what we found	4
More information about the provider	5
<b>Our judgements for each standard inspected:</b>	
Care and welfare of people who use services	6
Meeting nutritional needs	8
Cleanliness and infection control	9
Staffing	10
Complaints	11
<b>About CQC Inspections</b>	12
<b>How we define our judgements</b>	13
<b>Glossary of terms we use in this report</b>	15
<b>Contact us</b>	17

## Summary of this inspection

---

### Why we carried out this inspection

---

This was a routine inspection to check that essential standards of quality and safety referred to on the front page were being met. We sometimes describe this as a scheduled inspection.

This was an unannounced inspection.

---

### How we carried out this inspection

---

We looked at the personal care or treatment records of people who use the service, carried out a visit on 29 May 2013, observed how people were being cared for and checked how people were cared for at each stage of their treatment and care. We talked with people who use the service and talked with staff.

We were supported on this inspection by an expert-by-experience. This is a person who has personal experience of using or caring for someone who uses this type of care service.

---

### What people told us and what we found

---

We looked at three people's care records and all had an assessment of their health and social needs completed. There were individual support plans and risk assessments in place. This meant that the service could demonstrate they could meet the people's needs and maintain their health and well being.

The expert by experience spoke to ten people who were currently staying at Leftwich Community Centre and several staff. Comments included "Nothing is too much trouble for the staff", "Its lovely here. I'm well looked after, but it is sometimes too quiet" and "I have been here before and it's very nice. The food is good and staff are helpful."

General observations, including during lunchtime, saw people being treated in a dignified manner and with good responses to requests.

The inspector spoke with people about the food and care provided. People confirmed that they were very happy with the food and they had their preferred choice for breakfast. One person commented "You can have a cooked breakfast if you want." People also said the staff are very kind and "I am well cared for by the staff."

The home was clean and odour free.

You can see our judgements on the front page of this report.

---

## **More information about the provider**

---

Please see our website [www.cqc.org.uk](http://www.cqc.org.uk) for more information, including our most recent judgements against the essential standards. You can contact us using the telephone number on the back of the report if you have additional questions.

There is a glossary at the back of this report which has definitions for words and phrases we use in the report.

## Our judgements for each standard inspected

### Care and welfare of people who use services

✓ Met this standard

People should get safe and appropriate care that meets their needs and supports their rights

---

### Our judgement

The provider was meeting this standard.

People experienced care, treatment and support that met their needs and protected their rights.

---

### Reasons for our judgement

Care and support was planned and delivered in a way that was intended to ensure people's safety and welfare. We looked at three care plans for people who were staying at Leftwich Community Centre. They were personalised and provided guidance on the support people needed and how this would be provided. The provider might find it useful to not that the person who used the service or their representative had not signed the plan. This meant that it was not clear if people were aware of or understood the plan of care.

Each person's file contained a care plan, a range of risk assessments, details of health care needs and support and a daily record sheet. The daily record sheets showed what support each person had received and general information regarding their well being. It was dated and signed by the staff member. The risk assessments identified hazards that people might face and provided guidance upon how staff should support people to manage the risk of harm.

People who were staying at Leftwich Community Centre commented to the expert by experience "It was my Social Worker who suggested coming here and then arranged it. I wasn't too keen on the idea, but I thought I would give it a try. It's the best move I made. It's better than a four star hotel. The staff are great, the food is great and they tend to my health. I've also made some new friends. I press my buzzer and they are there for me. I give them 10 out of 10" and "I enjoy being here. It's great." All people spoken with were complimentary about the catering.

People's health needs were recorded in the care plan documentation. Visits from the GP, district nurses, occupational therapist and physiotherapist were recorded and also hospital appointments.

The provider might find it useful to note that no planned activities were undertaken at this service, which meant that people did not have the opportunity to engage in activities throughout the day. All the people spoken with said there was a lack of activities and

access to stimulation during the day. Some people commented on how quiet the service was but on the whole people preferred the quiet to a noisy atmosphere. People commented to the expert by experience "Staff are good, but there aren't any activities", "I'm well looked after, but it is sometimes too quiet" and "I can go out on my own for short walks."

**Food and drink should meet people's individual dietary needs**

---

**Our judgement**

---

The provider was meeting this standard.

People were protected from the risks of inadequate nutrition and dehydration.

---

**Reasons for our judgement**

---

We saw that nutritional and specific dietary needs were noted within the care plans and further information was included as necessary.

There were two dining rooms on each floor. We observed that staff members were available during mealtimes to support and assist people as required. Some people preferred to take their meals in their rooms and we saw staff taking meals on trays to them.

We saw a six weekly menu which showed a good variety of foods with a choice of daily main meals and other options available. On discussion with the cook on duty she was aware of people's personal preferences with regard to foods and gave examples of where changes to the menu had been made to accommodate this. She explained that she spoke with the people when they arrived at the service to see if they had any particular needs and where possible these would be accommodated.

We also saw the cleaning schedule for the kitchen and noted that it was clean and tidy. The cook also kept records of freezer, fridge and food temperatures on a daily basis. We saw that these were up to date. Training records showed staff received safe food handling and preparation training to ensure food safety.

People who spoke with the expert by experience commented "The food is very satisfying", "The food is exceptional. Plenty of brews" and "The food is good and staff are helpful."

**People should be cared for in a clean environment and protected from the risk of infection**

---

**Our judgement**

---

The provider was meeting this standard.

People were cared for in a clean, hygienic environment.

---

**Reasons for our judgement**

---

People who used the service told us that the bedrooms and communal areas of the home were kept clean and fresh smelling.

We had a tour around the home and looked at a sample of bedrooms and bathrooms and the communal areas. We found that all the areas seen were clean.

Training records showed staff were provided with training in infection control every twelve months. The Primary Care Trust (PCT) undertook an infection control audit of the home in September 2012 and requested an action plan where concerns had been raised. An action plan was provided and the commodes have now all been changed and where requested bedroom furniture had also been replaced.

The home had infection control policies and procedures to reduce the risk of infection and ensure that as far as reasonably possible the environment was safe and clean and fit for purpose. A procedure to follow in the event of an outbreak of an infection was available and included notifying the relevant authorities.

## Staffing

✓ Met this standard

There should be enough members of staff to keep people safe and meet their health and welfare needs

---

### Our judgement

---

The provider was meeting this standard.

There were enough qualified, skilled and experienced staff to meet people's needs.

---

### Reasons for our judgement

---

Rotas showed the staff available to meet the needs of the people who were currently staying at Leftwich Community Centre. There were five staff on duty during the day which comprised of a senior care assistant and four care assistants who supported people at Leftwich Community Centre. This gave a ratio of 1:8 care staff to people who used the service. The care team were also supported by the cooks, kitchen assistants, domestic and laundry assistants and a maintenance person. The home manager was supernumerary to the rota.

The home manager confirmed there were enough staff available to meet the current needs of the people who were staying at Leftwich Community Centre. The manager also confirmed that the staffing levels were set by the provider, but that as people's needs could vary, such as people being admitted who need one to one support or who were unsettled, then she would organise extra staff to meet the need.

The expert by experience spoke to people who said "I have nothing but praise for everyone here", "Staff are helpful" and "It's lovely here. I'm well looked after."

## Complaints

✓ Met this standard

People should have their complaints listened to and acted on properly

---

### Our judgement

---

The provider was meeting this standard.

There was an effective complaints system available.

---

### Reasons for our judgement

---

We saw a copy of the complaints procedure within the foyer. People said they understood the complaints procedure and that they had no complaints about the service. They confirmed they would speak to a staff member or the manager if they had any concern or complaint.

The home had received two complaints over the last year and documentation regarding these was seen. Both complaints had been resolved.

People told the expert by experience "I don't know about complaining, but I'll just tell one of the girls" and "I have no complaints but I would tell the senior person on duty at the time if I had a problem."

## About CQC inspections

We are the regulator of health and social care in England.

All providers of regulated health and social care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The essential standards are described in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. We regulate against these standards, which we sometimes describe as "government standards".

We carry out unannounced inspections of all care homes, acute hospitals and domiciliary care services in England at least once a year to judge whether or not the essential standards are being met. We carry out inspections of other services less often. All of our inspections are unannounced unless there is a good reason to let the provider know we are coming.

There are 16 essential standards that relate most directly to the quality and safety of care and these are grouped into five key areas. When we inspect we could check all or part of any of the 16 standards at any time depending on the individual circumstances of the service. Because of this we often check different standards at different times.

When we inspect, we always visit and we do things like observe how people are cared for, and we talk to people who use the service, to their carers and to staff. We also review information we have gathered about the provider, check the service's records and check whether the right systems and processes are in place.

We focus on whether or not the provider is meeting the standards and we are guided by whether people are experiencing the outcomes they should be able to expect when the standards are being met. By outcomes we mean the impact care has on the health, safety and welfare of people who use the service, and the experience they have whilst receiving it.

Our inspectors judge if any action is required by the provider of the service to improve the standard of care being provided. Where providers are non-compliant with the regulations, we take enforcement action against them. If we require a service to take action, or if we take enforcement action, we re-inspect it before its next routine inspection was due. This could mean we re-inspect a service several times in one year. We also might decide to re-inspect a service if new concerns emerge about it before the next routine inspection.

In between inspections we continually monitor information we have about providers. The information comes from the public, the provider, other organisations, and from care workers.

You can tell us about your experience of this provider on our website.

## How we define our judgements

The following pages show our findings and regulatory judgement for each essential standard or part of the standard that we inspected. Our judgements are based on the ongoing review and analysis of the information gathered by CQC about this provider and the evidence collected during this inspection.

We reach one of the following judgements for each essential standard inspected.

**✓ Met this standard** This means that the standard was being met in that the provider was compliant with the regulation. If we find that standards were met, we take no regulatory action but we may make comments that may be useful to the provider and to the public about minor improvements that could be made.

**✗ Action needed** This means that the standard was not being met in that the provider was non-compliant with the regulation. We may have set a compliance action requiring the provider to produce a report setting out how and by when changes will be made to make sure they comply with the standard. We monitor the implementation of action plans in these reports and, if necessary, take further action. We may have identified a breach of a regulation which is more serious, and we will make sure action is taken. We will report on this when it is complete.

**✗ Enforcement action taken** If the breach of the regulation was more serious, or there have been several or continual breaches, we have a range of actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers include issuing a warning notice; restricting or suspending the services a provider can offer, or the number of people it can care for; issuing fines and formal cautions; in extreme cases, cancelling a provider or managers registration or prosecuting a manager or provider. These enforcement powers are set out in law and mean that we can take swift, targeted action where services are failing people.

## How we define our judgements (continued)

Where we find non-compliance with a regulation (or part of a regulation), we state which part of the regulation has been breached. Only where there is non compliance with one or more of Regulations 9-24 of the Regulated Activity Regulations, will our report include a judgement about the level of impact on people who use the service (and others, if appropriate to the regulation). This could be a minor, moderate or major impact.

---

**Minor impact** – people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

---

**Moderate impact** – people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

---

**Major impact** – people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly

---

We decide the most appropriate action to take to ensure that the necessary changes are made. We always follow up to check whether action has been taken to meet the standards.

## Glossary of terms we use in this report

### Essential standard

The essential standards of quality and safety are described in our *Guidance about compliance: Essential standards of quality and safety*. They consist of a significant number of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009. These regulations describe the essential standards of quality and safety that people who use health and adult social care services have a right to expect. A full list of the standards can be found within the *Guidance about compliance*. The 16 essential standards are:

Respecting and involving people who use services - Outcome 1 (Regulation 17)

Consent to care and treatment - Outcome 2 (Regulation 18)

Care and welfare of people who use services - Outcome 4 (Regulation 9)

Meeting Nutritional Needs - Outcome 5 (Regulation 14)

Cooperating with other providers - Outcome 6 (Regulation 24)

Safeguarding people who use services from abuse - Outcome 7 (Regulation 11)

Cleanliness and infection control - Outcome 8 (Regulation 12)

Management of medicines - Outcome 9 (Regulation 13)

Safety and suitability of premises - Outcome 10 (Regulation 15)

Safety, availability and suitability of equipment - Outcome 11 (Regulation 16)

Requirements relating to workers - Outcome 12 (Regulation 21)

Staffing - Outcome 13 (Regulation 22)

Supporting Staff - Outcome 14 (Regulation 23)

Assessing and monitoring the quality of service provision - Outcome 16 (Regulation 10)

Complaints - Outcome 17 (Regulation 19)

Records - Outcome 21 (Regulation 20)

### Regulated activity

These are prescribed activities related to care and treatment that require registration with CQC. These are set out in legislation, and reflect the services provided.

## Glossary of terms we use in this report (continued)

---

### **(Registered) Provider**

---

There are several legal terms relating to the providers of services. These include registered person, service provider and registered manager. The term 'provider' means anyone with a legal responsibility for ensuring that the requirements of the law are carried out. On our website we often refer to providers as a 'service'.

---

### **Regulations**

---

We regulate against the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010 and the Care Quality Commission (Registration) Regulations 2009.

---

### **Responsive inspection**

---

This is carried out at any time in relation to identified concerns.

---

### **Routine inspection**

---

This is planned and could occur at any time. We sometimes describe this as a scheduled inspection.

---

### **Themed inspection**

---

This is targeted to look at specific standards, sectors or types of care.

## Contact us

---

Phone: 03000 616161

---

---

Email: [enquiries@ccq.org.uk](mailto:enquiries@ccq.org.uk)

---

---

Write to us  
at: Care Quality Commission  
Citygate  
Gallowgate  
Newcastle upon Tyne  
NE1 4PA

---

---

Website: [www.cqc.org.uk](http://www.cqc.org.uk)

---

---

Copyright Copyright © (2011) Care Quality Commission (CQC). This publication may be reproduced in whole or in part, free of charge, in any format or medium provided that it is not used for commercial gain. This consent is subject to the material being reproduced accurately and on proviso that it is not used in a derogatory manner or misleading context. The material should be acknowledged as CQC copyright, with the title and date of publication of the document specified.

---