

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

## Genesis Care Home

197 Peter Street, Macclesfield, SK11 8ES

Tel: 01625421623

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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>Safeguarding people who use services from abuse</b>	✓ Met this standard
<b>Supporting workers</b>	✓ Met this standard
<b>Assessing and monitoring the quality of service provision</b>	✓ Met this standard

## Details about this location

Registered Provider	Winnie Care (Macclesfield) Ltd
Registered Manager	Mrs. Amanda Elizabeth Sargeant
Overview of the service	Genesis is a three-storey purpose built care home for people over 65 years of age. The home is owned by Winnie Care (Macclesfield) Ltd and is located in Macclesfield. It is close to the local shops and other community facilities. There are 42 single bedrooms all of which have en-suite facilities. Each floor has a lounge and dining area and access between floors is by a passenger lift or one of the staircases.
Type of service	Care home service without nursing
Regulated activity	Accommodation for persons who require nursing or personal care

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*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'.*

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## Summary of this inspection

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### Why we carried out this inspection

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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.

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### How we carried out this inspection

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We looked at the personal care or treatment records of people who use the service, carried out a visit on 7 November 2013, observed how people were being cared for and talked with people who use the service. We talked with staff and were accompanied by a specialist advisor.

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### What people told us and what we found

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During our inspection we spoke to eight people who lived in the home. The majority of them were very complimentary about the care they received and the staff who supported them. One person said; "The staff are lovely. They can't do enough for you." Another person said; "I've been here a while. The staff are very kind, I can't fault them and it's very smooth flowing here."

We looked at the food provided in the home and the way the home met people's nutritional needs and we found that on the whole they did this well. People who lived in the home said that the food was very good and they enjoyed it.

We looked at the arrangements in place to protect people from harm and abuse. We found that the staff knew what they would do if they had some concerns.

During this inspection we looked at the support available for staff as at our previous inspection we had some concerns. We found that the support for staff had improved and they were receiving more supervision and training.

We looked at the home's systems for ensuring that they provided a quality service. We found that these were generally good and that the systems relating to monitoring the care provided were completed on a monthly basis.

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

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### More information about the provider

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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

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### Our judgement

The provider was meeting this standard.

Care and treatment was planned and delivered in a way that was intended to ensure people's safety and welfare.

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### Reasons for our judgement

We spoke to six people who lived in the home and they all said positive things about the care that they received and the staff who supported them. One person said; "The care is good and the staff are kind and helpful." We observed that care was unhurried and that staff treated people with respect and maintained their dignity, particularly when supporting them with personal care such as using the bathroom or with the breakfast. We observed that when people required assistance staff encouraged them to remain as mobile as possible to help maintain their independence whilst still providing support.

We observed that relationships between staff and people who lived in the home were warm and friendly and we saw that people were relaxed in the company of staff. We saw groups of people chatting to staff in a calm and friendly atmosphere. We saw that the staff were skilled in supporting people who had dementia whilst encouraging them to maintain their independence.

During our inspection the residents' forum took place. The manager informed us that this is a monthly event. We saw that people who lived in the home were encouraged to give feedback about the care that they received. The manager led the forum and it was also attended by the home's housekeeper who asked for feedback about the cleanliness of the home and people's bedrooms.

We looked at four care plans and saw that people were involved in the planning of their care. We saw that risk assessments were in place to support people's particular needs such as support with moving and handling. Most of the care plans had been reviewed and this was recorded.

The provider may wish to note that many of the home's policies and procedures had not been updated for a number of years and contained information that was outdated about organisations that no longer exist.

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

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**Our judgement**

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The provider was meeting this standard.

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

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**Reasons for our judgement**

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During our inspection we observed people who lived in the home having their lunch. The dining room was pleasant and the tables were nicely laid out. Most people were seated comfortably at tables. One person was seated alone but both staff and the person said this was their personal choice. There were napkins and cutlery provided on tables. Condiments were not easily available for all people on all tables.

Several people said the food was plentiful and tasty. One person said "The food is wonderful and I've been here a while". The staff appeared to have sufficient time to serve the food, talk to and encourage people to eat. In general people living in the home did not have to wait a long time after being seated at the table until they got their meals and were given the support required to help them with their meals.

We looked at the care files for people who were on modified diets because of their specific health requirements. We met with these people and staff working with them to review assessments, care plans, monitoring records and actions being taken. We compared these with national guidance and good nutritional practice.

We saw that people were weighed monthly and the results were recorded in a file in the main office. A recognised assessment tool was being used in the care plans but it was not always correctly used or completed. In the two examples we looked at the tool had been wrongly scored in the care plans and also in the main file, giving an inaccurate assessment of low or medium risk when both people were at high risk. However we were able to see that these people were receiving the appropriate care. The provider may wish to note that up to date training on nutritional assessment might ensure that the care plans were consistent in identifying people's nutritional needs and what action should be taken.

We saw that all desserts were made with sweetener rather than sugar although only four people who lived in the home required this. The provider may wish to consider whether it is more appropriate to make a separate dessert with sweetener for the people who required this.

We noted that copies of menus were not provided for people who lived in the home. For most people this was not a problem but one person stated that they would like to see the menus. The manager agreed to make the menus available for people to see and to

provide individual copies for people who wanted them.

**People should be protected from abuse and staff should respect their human rights**

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### **Our judgement**

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The provider was meeting this standard.

People who use the service were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

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### **Reasons for our judgement**

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Staff we spoke with had a good understanding of the process they would follow if a safeguarding incident occurred. They were able to describe various types of abuse and each member of the care staff we spoke with showed an understanding of their responsibilities when caring for vulnerable adults. Staff told us that they had received training in protecting vulnerable adults. The manager showed us records to demonstrate that all staff had received Safeguarding Adults training and seven staff had received a training update in the last year.

We looked at the safeguarding policy and the whistle blowing policy. They were available in the office used by the staff. All the staff we spoke to were aware of the policy and how to access it. The provider may wish to note that the policy in use had not been updated since 2004. We spoke to the manager and they told us that they would take action to update it.

One person we spoke to said; "It's very safe here. I don't have to worry." We saw that all staff who worked in the home had the appropriate checks carried out to ensure that they were suitable people to work with vulnerable adults.

**Staff should be properly trained and supervised, and have the chance to develop and improve their skills**

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## Our judgement

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The provider was meeting this standard.

People were cared for by staff who were supported to deliver care and treatment safely and to an appropriate standard.

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## Reasons for our judgement

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We looked at this outcome to follow up concerns from our previous inspection in July 2013. The provider had given us an action plan and had provided us with information on a monthly basis to demonstrate that they were supporting staff.

During the inspection we were provided with records showing that all staff had received in house training as appropriate in relation to fire arrangements, food safety, health and safety, infection control, manual handling, moving and handling, and safeguarding. Staff were positive about the support and training they received. The provider may wish to note that the training matrix they provided was incomplete and we saw in staff individual files that additional training had been completed that was not recorded.

The home employed its own trainer and the manager informed us that this system worked well as the trainer was often able to observe care in practice and provide additional training for staff who needed extra support.

The manager told us that the supervision targets were not always achieved due to the workload demands but that all staff attend regular team meetings and spoke to one of the senior staff or managers if they had a problem. All the staff we spoke to told us that they felt very well supported in their job roles and would always be able to speak to someone if they had a problem. One staff member told us; "This is the nicest home I've worked in. We are a good team and we support each other."

We saw minutes of meetings which demonstrated that regular team meetings took place for all staff during the day. The manager told us that they were aware that the night staff sometimes missed these so the manager was planning to work a week of night shifts the following week to support the night staff and carry out their supervision and appraisals.

## Assessing and monitoring the quality of service provision

✓ Met this standard

The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

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### Our judgement

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The provider was meeting this standard.

The provider had an effective system in place to identify, assess and manage risks to the health, safety and welfare of people who use the service and others.

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### Reasons for our judgement

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We saw that residents' forums were held monthly and that feedback was sourced in a variety of different ways from people who lived in the home. We saw that a questionnaire had been carried out and the main meal time had been changed to accommodate the majority of people who lived in the home.

We looked at the complaints procedure and the manager told us that it was in the process of being updated to contain more appropriate information about who to contact if people had concerns. We saw that two complaints had been made in the last year and both had been resolved quickly and amicably.

We saw that issues relating to the care that people received such as accidents and falls were audited every month. This information was recorded and it was clear to see the action taken to support people and improve the service that they received. We also saw that an infection control audit was completed every month.

We looked at the fire testing and maintenance records. We saw that these were difficult to follow as many of the records were mixed up and there were also records dating back many years so it was difficult to identify which were the current records. We pointed this out to the manager and they stated that they were aware that the home needed to organise and store their files appropriately so they could more easily identify how they monitored the quality of the service.

## 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.

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**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.

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**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.

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**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

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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)

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### **(Registered) Provider**

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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'.

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### **Regulations**

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

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### **Responsive inspection**

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

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### **Routine inspection**

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

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### **Themed inspection**

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

## Contact us

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