

Millennium Care (U.K.) Limited

Worthington Lake Care Home

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

About the service

Worthington Lake is a purpose built residential 'care home' providing personal and nursing care for up to 34 people aged 65 and over. Accommodation is provided across two floors which can be accessed via a stair-well and passenger lift. All bedrooms are en-suite and there are spacious communal kitchen facilities as well as social, dining and garden areas that people can access. At the time of this inspection 20 people were living at the home.

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

People received safe and effective care that was tailored around their individual support needs and areas of risk. People's support needs were established from the outset, areas of risk were regularly monitored, and care reviews were regularly taking place. People were protected from abuse, safeguarding procedures were in place.

Medication procedures were safe. All staff were trained to administer medication and regularly had their competency levels checked. Health and safety procedures were followed, regulatory compliance was met, and infection control support measures were generally complied with. The environment was specifically adapted and designed in conjunction with best practice, research and guidance to support people living with dementia.

Safe and robust recruitment procedures were in place; people received care and support by staff who had been appropriately recruited and thoroughly inducted in their roles. The home was purposely 'over-staffed' at the time of the inspection. The provider explained that they wanted to recruit, train and induct all staff so they could provide the appropriate level of care as the capacity of the home increased. Training compliance was generally met, although some training courses were still in the process of being sourced.

The provider complied with the principles of the Mental Capacity Act 2005 (MCA). 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.

People received timely and effective care and support from Worthington Lake staff as well as external health and social care professionals. The provider also employed an 'in-house' occupational therapist who provided effective support as and when it was required. Partnership working ensured that people received a holistic level of care with all aspects of their health and well-being. People were supported to maintain healthy, balanced diets. Care records contained information about people's dietary support needs, preferences and likes.

We observed staff providing kind, compassionate, dignified and person-centred care that was tailored around people's support needs and preferences. An electronic care record system contained up to date, consistent person-centred details for staff to familiarise themselves with. There was no dedicated activities

co-ordinator in place however, it was the responsibility of all staff to support the activities schedule and encourage people to participate.

The quality and safety of care was routinely assessed, monitored and improved upon. Accidents, incidents and safeguarding events were investigated, lessons were learnt, and measures were put in place to effectively manage risk and keep people safe.

For more details, please see the full report which is on The Care Quality Commission (CQC) website at www.cqc.org.uk

Rating at last inspection

This service was registered with us on March 2019 and this is the first inspection.

Why we inspected

The inspection was carried out as part of our inspection schedule.

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?

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 ●

Worthington Lake 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.

Inspection team

The team consisted of an inspector 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.

Service and service type

Worthington Lake 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 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 took place over two days and was unannounced on the first day and announced on the second day.

What we did before inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who work with the service. 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 our inspection.

During the inspection

We spoke with the managing director, registered manager, five members of staff, one occupational therapist, one member of kitchen staff and one external healthcare professional. We also spoke with five people who were living at Worthington Lake and two visiting relatives. We also 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 also reviewed a range of records. These included three people's care records, multiple medication records as well as staff personnel files in relation to recruitment, training and supervisions. We also checked a variety of records relating to the management and governance of the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At this inspection this key question was rated 'Good'. This meant people were safe and protected from avoidable harm.

Preventing and controlling infection

- Regular cleaning schedules and infection control tools were in place. These were generally completed although some environmental and equipment checks were not completed as regularly as they should have been.
- There was an up to date infection control policy in place however, there was no dedicated infection control lead as the policy indicated. This was an area the registered manager was concentrating on.
- The home was well-maintained, hygienic and free from odour. Staff were responsible for completing domestic duties as part of their day to day responsibilities.
- Staff followed best practice guidance to minimise the spread of infection. Personal protective equipment (PPE) was readily available and accessible to staff.

Assessing risk, safety monitoring and management

- People's support needs and level of risk was assessed and established from the outset; risks were regularly monitored and safely managed. People told us, "I feel safe here" and "They [staff] are really looking after me and I don't have to worry anymore."
- Care records contained up to date and relevant information that staff needed to be aware of. We found some inconsistencies in care records, but these were rectified by the second day of the inspection.
- An electronic care record system meant that support measures and levels of risk were updated in a timely and efficient manner.
- Health and safety checks, audits and tools were in place. Environmental risks were monitored, and regulatory compliance certificates were in place.
- Robust fire safety awareness procedures were complied with; comprehensive emergency evacuation procedures were in place, there was an up to date fire risk assessments and regular fire checks were carried out.

Using medicines safely

- People received medication support by fully competent and trained members of staff.
- Medication processes and procedures were in place; medication was appropriately ordered, safely stored, and administered in accordance with instructions.
- The registered manager completed regular medication audits to ensure policies and procedures were complied with.

Systems and processes to safeguard people from the risk of abuse

- Staff were familiar with safeguarding and whistleblowing procedures. Staff had access to safeguarding

and whistleblowing policies and confidently told us how they would report any concerns.

- Safeguarding training was provided; safeguarding training compliance was 100 per cent.
- Safeguarding incidents were appropriately managed and investigated. Referrals and notifications were submitted to the Local Authority and CQC accordingly.
- People told us they felt safe living at Worthington Lake. People said, "The staff make me feel safe" and "I feel confident that people [staff] are caring for me; I am quite safe."

Staffing and recruitment

- Robust recruitment procedures were in place; essential pre-employment checks were carried out to assess and determine suitability.
- Worthington Lake was 'over-staffed' and the ratio of staff to people was higher than expected. The provider was committed to recruiting, inducting and training a large staff team in preparation for full occupancy.
- The provider did not use agency or bank staff and was passionate about people receiving support from a regular, consistent staff team.
- We received positive comments about staffing levels from people and relatives. Their comments included, "If I ring my buzzer, they [staff] come quite quickly" and "Yes, I have noticed there are a number [of staff] and there is always someone available."

Learning lessons when things go wrong

- There was a robust accident and incident reporting procedure in place; the registered manager maintained a good level of oversight in relation to this area of safe care.
- Accidents and incidents were recorded, analysed and trends were identified.
- Falls analysis and trends indicated that employing an 'in-house' occupational therapist may help reduce the number of falls people were experiencing. Evidence demonstrated a positive impact the occupational therapist was having.

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 this inspection this key question has been rated 'Good'. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Worthington Lake had been specifically designed, adapted and decorated to meet the needs of the people who were living with dementia.
- The environment was spacious, offered tonal contrasts and colours and provided specific lighting to help with orientation and independence.
- Best practice and guidance had been consulted and research had been carried out to offer a dementia friendly, 'non-institutional' environment.
- People's bedrooms were personalised to meet their own taste and preferences; people were encouraged to bring personal items such as photos and memorabilia to make it feel more homely. One relative told us, "The rooms are nice, very comfortable."
- People had access to spacious garden areas and were often supported to walk around the lake that was visible and accessible from the home.

Staff support: induction, training, skills and experience

- Staff were supported with a variety of training, learning and development opportunities. Training statistics were largely compliant although some areas required attention such as equality and diversity and general data protection regulations.
- All staff were thoroughly inducted into their roles; staff were also supported to complete 'The Care Certificate' if they didn't hold the relevant qualifications.
- Staff received regular one to one supervisions and annual appraisals were also taking place.
- Staff told us they felt supported by the provider and registered manager on a day to day basis. One staff member said, "I feel appreciated and valued, [manager] is calm and approachable."

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support; Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Staff worked effectively with other healthcare professionals to ensure people received an holistic level of care and support. One professional told us, "The [staff] are very quick to act (if they have concerns); guidance and advice is responded to."
- People received support in a timely and effective manner. One person said, "If I am not well, they get a doctor to see me. They have a podiatrist that comes here."
- Best practice and guidance had been consulted in the development and design of the environment. For instance, the provider had achieved a Gold Standard Accreditation for the model of care that had

implemented.

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

- People were supported with balanced and nutritious diets based on their individual likes and preferences. One person told us, "The meals are good, there are good portions, the food is healthy with lots of veg."
- There was a four-week rolling menu; people were actively involved in 'food tasting' sessions that helped create and design seasonal menus that were offered.
- Food options were offered on a daily basis. One person told us, "The food is nice; they give you a menu to choose from and if you don't like it you can have something else."
- People's nutritional needs were supported; specialist diets were accommodated, and risks were managed.
- People's weight was monitored as a measure of managing risk. Several weight charts were not consistently completed as per risk management tool; the registered manager was responsive to the issues we raised.

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 Act 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People's level of capacity was appropriately assessed; measures were in place to gain consent from people about the care, treatment and support they needed.
- People were not unlawfully restricted; DoLS applications had been submitted to the relevant Local Authority and conditions were met accordingly.
- Care records contained best interest meetings and decisions that had been made to keep people safe.

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 this inspection this key question has been rated '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

- We observed people receiving kind, compassionate and friendly care. People and relatives were asked if the staff were kind and caring, comments we received included, "Very much so", "Yes, they are" and "When someone is down and when they are upset, they [staff] put their arm around them and cheer them up."
- Positive and caring relationships have developed between staff and people living at Worthington Lake. One staff member told us, "Staff really know people, it's like a family, such a loving, kind environment."
- People's religious, social and cultural needs were established and supported.
- We read a number of compliments about the kind and caring approach of staff. These included, "The care and support [relatives] are receiving is fabulous" and "I've been nothing less than 100% impressed with all staff, their attitude and their genuine care and consideration."

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

- People were encouraged and supported to share their views, thoughts and suggestions about the provision of care they received.
- The registered manager had recently introduced 'family and friends' meetings and satisfaction surveys had recently been circulated and analysed.
- We observed staff engaging and empowering people to make decisions about their day to day care and support. For instance, one member of staff asked one person if they would like to return to their bedroom after lunch and another member of staff asked a person where they would like to sit to eat their lunch time meal.

Respecting and promoting people's privacy, dignity and independence

- Staff supported and approached people with dignity and respect and ensured their privacy was always maintained. People told us, "They [staff] treat you as an individual and meet your needs" and "They make sure they care for me in private."
- People were encouraged to remain as independent as possible. We saw staff helping, assisting and supporting people to maintain their independence in a safe and respectful manner.
- Confidential information was stored and protected in line with general data protection regulations.

Is the service responsive?

Our findings

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

At this inspection this key question has been rated '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 received person-centred care that was tailored around their preferences and wishes however several care records contained more information than others; we were informed that an interactive person-centred platform was being developed; 'Interactive Me' was designed to capture people's life stories with a view of supporting and improving engagement and interaction.
- Electronic care records contained information which enabled staff to develop positive, meaningful relationships with people they supported.
- Care records were regularly reviewed, and staff were familiar with the most up to date person-centred information.
- Daily records were completed by staff detailing the personal-care that had been provided, interventions which had taken place and people's health and well-being.

Meeting people's communication needs

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.

- People's communication needs were assessed and generally supported. We identified that greater communication support methods could have been introduced for one person receiving support. Our feedback was immediately responded to and measures had been put in place by the second day of the inspection.
- 'Communication' care plans were in place; these contained important information that staff needed to familiarise themselves with.
- 'Easy read' material was available, and people could request information in different formats.

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 to maintain positive relationships and to actively engage in activities and hobbies they enjoyed and were interested in. For instance, one person enjoyed planting vegetables in the garden.
- We observed group and one to one activities taking place however, we did receive feedback to suggest that more one to one activities were needed, and an 'activities schedule' would be beneficial.
- People were encouraged to take part in domestic tasks as part of a 'home maker role' which supported an 'active lifestyle'; people were involved in the preparation of meals, baking as well as some 'household' tasks.
- People engaged in a range of therapeutic interventions; these helped with overall health and well-being as

well as positively impacting on social and cognitive skills and abilities.

- 'Inter-generational' activity groups were taking place; people were encouraged to engage in 'mother and baby' and nursery sessions to help with social engagement and interaction.

Improving care quality in response to complaints or concerns

- The provider had an up to date complaints policy which contained relevant information in relation to the complaint procedure and processes.
- People and relatives were provided with the complaint information.
- Complaints were reviewed and responded to in line with company policy. One person told us, "Yes, things changed as a result of my complaint."
- The provider and registered manager told us they operated 'an open-door policy' and welcomed any feedback as a way of improving the provision of care.

End of life care and support

- At the time of the inspection nobody was receiving end of life care and support.
- The registered manager was aware that she would need to source end of life training and care records would need to contain people's advanced wishes and preferences.

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 this inspection this key question was rated '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

- Quality assurance systems were effectively monitoring, assessing and improving the provision of care people received.
- The registered manager and staff team were clear about their roles and the importance of providing high-quality person-centred care. There was a good level of oversight in relation to risk.
- The registered manager was aware of her regulatory responsibilities; she submitted the necessary statutory notifications to the local authority and CQC accordingly.
- We received positive feedback about the management at Worthington Lake. Staff told us, "You can approach them [managers] they're very hands on" and "[Provider] is very passionate, has a real vision, staff are given time with residents."

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

- People received person-centred care that was empowering, inclusive and enabled good outcomes to be achieved. We received positive feedback about the 'home maker role' and the positive benefits people experienced from domestic tasks they participated in.
- The culture and 'model of care' was centred around positive risk taking; people were encouraged to use their skills and abilities.
- People were included in the day to day care they received; their overall health and well-being was managed and quality of life prioritised.
- We received positive feedback about the quality of care people received. One relative told us, "They [staff] are interested in us [the family] they are learning as well, and we learn from each other."

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

- Duty of candour responsibilities were understood and complied with; the registered manager was open, honest and transparent with the necessary people and organisations when an incident occurred.

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

- The provider considered people's equality characteristics and ensured their views and suggestions were considered and appropriately supported.
- A recent 'cheese and wine' night and staff awards ceremony had been arranged as a way of involving and

engaging people, staff and relatives. Other events and 'resident' meetings were also being scheduled.

- Satisfaction surveys were circulated to people, relatives and staff. The surveys and feedback we reviewed were complimentary. Comments we read included, the service is 'fantastic' and 'five-star'.
- Staff meetings had begun to take place; staff told us they felt 'involved' and 'included' in the quality and safety of care people received. One staff member said, "I feel appreciated and valued, it's nice to feel valued and treated well."

Continuous learning and improving care

- The registered manager maintained a good level of oversight in relation to 'lessons learnt' and improving care.
- Monthly and quarterly accident and incident reviews took place, trends were identified, and risks were mitigated.
- Quality assurance measures enabled the manager to monitor areas of strength but also areas of improvement. For instance, 'falls monitoring reviews' helped to identify specific support measures people needed as a way of reducing risk and minimising injury.
- The provider and registered manager were responsive to the feedback we provided during the inspection. Several action points had already been completed before we inspected on the second day.

Working in partnership with others

- The provider worked effectively with internal and external services to provide good quality care to people living at Worthington Lake.
- The provider engaged with local charities to support people with 'playlists for life' and a local nursery group attended the home to support with inter-generational learning and engagement.
- The provider was committed to developing the provision of care by engaging with research studies and best practice to inform the model of care they were providing.