

Wyndham House Care Limited Wyndham House Care

Inspection report

Wyndham House Manor Road, North Wootton Kings Lynn Norfolk PE30 3PZ Date of inspection visit: 23 April 2021 27 April 2021

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Tel: 01553631386

Ratings

Overall rating for this service	Good
Is the service safe?	Good •
Is the service well-led?	Good •

Summary of findings

Overall summary

About the service

Wyndham House accommodates up to 44 people in one adapted building. At the time of the inspection there were 38 people living at the service.

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

Staff understood the risks to people and the measures in place to keep them safe. Systems were in place to manage people's medicines safely and to reduce the risks associated with the spread of infection.

Sufficient numbers of staff were employed to meet people's needs. Staff received training that gave them the necessary skills and knowledge to carry out their roles and meet the specific needs of people using the service.

The service was being managed by a manager in the absence of a registered manager. Staff were passionate about providing people with a good-quality service. Robust systems were in place to monitor the quality of care being delivered to people.

Complaints and concerns were investigated, and complainants responded to.

Robust systems were in place to monitor the quality of care being delivered to people.

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

Rating at last inspection

The last rating for this service was good (published 17 July 2019).

Why we inspected

The inspection was prompted in part due to concerns received about the care people received. A decision was made for us to inspect and examine those risks.

As a result, we undertook a focused inspection to review the key questions of safe and well-led only. We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

We looked at infection prevention and control measures under the safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to coronavirus and other infection outbreaks effectively.

Follow up

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?	Good
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good
Is the service well-led? The service was well-led.	Good ●



Wyndham House Care Detailed findings

Background to this inspection

The 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.

This was a focussed inspection to check that people were safe

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team This inspection was undertaken by one inspector

Service and service type

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

The service did not have a manager registered with the Care Quality Commission. The service's manager was currently in the process of registering with the Care Quality Commission. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection.

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 five people who used the service and six relatives about their experience of the care provided. We spoke with seven members of staff including the regional manager, manager, deputy manager, activities co-ordinator and three care staff. We carried out some observations during the inspection in how staff interacted with people and met their needs.

We reviewed a range of records. This included two staff files in relation to recruitment, medication records and a person's care plan. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Safeguarding incidents were reported to us when needed and to the local authority safeguarding team. This meant that people were kept safe.
- Staff had received training on what signs of abuse to look out for and knew how to report any concerns they had within the service or externally. Staff felt they could raise any concerns with the management team.

Assessing risk, safety monitoring and management

- People told us they felt safe. One person said, "Oh yes I feel very happy here, very safe." Relatives also told us they felt people were safe. One relative told us, "The staff have done all they can to keep people safe. I am reassured that [name] is safe and I have been kept informed of what has been happening."
- Staff told us that the management team was regularly around the service checking staff were working safely.
- People had individual risk assessments. Staff were aware of people's individual risks. For example, they knew who were at risk of choking and what to do to minimise the risk. We saw that people were supported safely.
- Falls and any other incidents in the service were reviewed to look for any themes or trends and to check if any additional actions were needed to prevent them from happening again
- Staff knew how to evacuate people safely in the event of an emergency. A fire test occurred whilst we were in the service and staff responded appropriately.
- Staff were aware of how to support people to maintain or improve skin integrity. Records showed that people were supported to reposition and pressure relieving equipment was in place and checked.
- Staff used equipment and technology such as care call bells and pressure relieving equipment to support people's well-being

Staffing and recruitment

- Recruitment checks continued to be completed to make sure that staff were suitable to work with the people they were supporting.
- There were enough staff on the day of inspection to support people's care needs in a timely manner. A person said, "The staff are fantastic and come very quickly."
- The service had a dependency tool available to assess the staffing levels required. Additional staff have been used to support infection control measures during the pandemic.

Using medicines safely

• Medicines were managed safely so that people received their medicines as the prescriber intended.

- Staff kept accurate records of all medicines ordered, administered and disposed of. Medicines storage was appropriate.
- Protocols were in place for medicines prescribed to be given 'when required' safely.

• Staff undertook medication administration training and had their competency checked on an annual basis. Regular audits were conducted, and action taken when appropriate.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Learning lessons when things go wrong

- The manager gave us examples of how they continue to use the opportunity to use errors, incidents and accidents to improve staff's practice.
- Staff recorded any incidents or accidents. The manager analysed these with the regional manager and discussed any learning with all staff at relevant meetings.
- Any errors that occurred with medicines, were effectively managed. Staff were fully re-trained and their competence re-assessed to prevent further errors.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people, Engaging and involving people using the service, the public and staff, fully considering their equality characteristics, Continuous learning and improving care

- Systems were in place for reviewing all areas of the service and this was included in the service development plan. This enabled management to monitor their progress where improvements were needed. The manager undertook regular walk arounds. The findings from these were captured and added into an action plan. We saw that actions were signed off when completed.
- Since the last inspection there had been a change of manager. Staff feedback about the manager was positive. One staff member said, "[Name] is a good manager. I know that I can approach them at any time, she is very helpful."
- •People we spoke with knew who the manager was. One person said, "[Name] the manager is a really cheerful person. They are always popping round to see us all."
- Staff interaction with people was positive and they were attentive. The management team carried out checks to observe staff interaction and to ensure people were treated with dignity.
- People and their relatives told us they were happy with the care they received. They were positive about their relationships with staff.
- Care plans included clear information to help guide staff and staff knew people well.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements and how the provider understand and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- Relatives told us that the staff had supported people to keep in contact with them during the COVID-19 pandemic. One relative said, "They keep us informed by email and telephone. They have been amazing; nothings seem to have been no trouble. The staff have done a fantastic job." Another relative told us "I think the staff have been admirable throughout the pandemic."
- Staff told us that they found the manager approachable and knowledgeable. One staff member said, "You can go to them about anything, even if you've already been shown, you can ask again."
- There were audits across all key areas of the service. For example, COVID-19, infection control, falls, care plans and medicines.

Working in partnership with others

• The management team worked in partnership with external organisations such as the local authority, GP's, district nurses and chiropodists. This helped make sure people received joined up care and support.