

St Philips Care Limited

# Welbourn Manor Care Centre

## 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

Welbourn Manor Care Centre is a residential care home providing personal and nursing care to 19 people aged 65 and over at the time of the inspection. The service can support up to 31 people.

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

People were supported by a group of staff who knew their needs and had appropriate training for their roles. They lived in a safe, well maintained environment. The risks to their safety were assessed and managed to enable them to remain as independent as possible whilst staying safe. People's medicines were well managed, and they were protected from the risks of infection. Their nutritional and health needs were well managed.

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 were treated with care and respect, and their views on their care were listened to. Staff showed a good awareness of supporting people's privacy and improving their independence.

People received person centred care in a way of their choosing. Their care plans reflected their needs and staff had a good knowledge of people's needs. People were supported to engage in social activities of their choice. People told us they had no complaints, however there were processes in place to deal with any should they arise.

The service was well-led and the management team worked in an open way with people, their relatives, staff and health professionals to provide a good quality of life for people. There were quality monitoring processes in place to monitor practices and maintain good standards of care.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was Requires Improvement (published 18 January 2019).

The provider completed an action plan after the last inspection to show what they would do and by when to improve.

At this inspection we found improvement had been made and the provider was no longer in breach of regulations.

### Why we inspected

This was a planned inspection based on the previous rating.

#### 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 ●

# Welbourn Manor Care Centre

## **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

This inspection was carried out by one inspector.

#### Service and service type

Welbourn Manor Care Centre 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.

#### 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. This included information from local authority teams and statutory notifications from the service. These are notifications from the service to keep us informed of events at the service. This information helps support our inspections and we used this to plan our inspection.

The provider was 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 used this information when forming our judgments.

#### During the inspection

We spoke with four people who used the service, and two relatives about their experience of the care provided. We spoke with three members of support staff, the cook, the deputy manager, the registered manager and the area manager. We also spoke with a visiting health professional.

We reviewed a range of records. This included seven people's care records and multiple medication records. We looked at staff files in relation to recruitment and staff supervision. We viewed a variety of records relating to the management of the service, including quality audits.

#### After the inspection

We contacted the provider to ask for further information to support our report which they supplied.

# 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 Requires Improvement. At this inspection this key question has improved to Good. This meant people were safe and protected from avoidable harm.

When we last visited the service the provider was in breach of regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. This was in relation to the management of risks to people's safety, staffing levels, infection control management and learning from incidents and events. During this visit we found the provider had made significant improvements and the service was no longer in breach of this regulation.

### Assessing risk, safety monitoring and management

- The risks to people's safety were clearly assessed with detailed guidance for staff on how to manage people's safety. When equipment was required to reduce risks to people it was in place and used effectively. For example, specialist walking aids or pressure relieving equipment to help maintain skin integrity.
- Environmental risks to people were assessed and regularly monitored. For example, the stairs to the first floor which posed a risk to some people. As well as a general risk assessment in place, there was also information in individuals care plans. These highlighted the measures staff should take to support people to reduce the risk of falls from height.
- The differing needs people had in the event of a fire was documented in the personal emergency evacuation plans (PEEP's).

### Staffing and recruitment

- People were supported by a consistent group of staff. There were sufficient numbers of staff to allow people to undertake their daily activities. People told us there were enough staff and when they called for assistance they were supported in a timely manner. Two people told us staff checked on them regularly throughout the night and were always there to support them with their needs.
- Staff told us the registered manager worked to ensure there were enough staff. They felt the service was safely staffed. Our observations on the day of our inspection supported this. We saw people receiving care when they needed it and staff gave them the time they needed when supporting them.
- Safe recruitment processes were in place to ensure people were supported by fit and proper staff. Staff files showed the registered manager had used the disclosure and barring service (DBS) to make checks to ensure potential staff had no criminal convictions which could affect people's safety.

### Preventing and controlling infection

- People were cared for in a clean environment. Staff had access to personal protective equipment (PPE) and we saw they used this appropriately. People and relatives told us the staff worked to maintain a clean environment.
- There were cleaning schedules in place and staff were aware of their responsibilities.
- Staff had received appropriate infection control training for their roles and there were regular checks in

place to ensure standards of cleanliness were maintained.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- People who lived at the service were safe. The systems and processes in place supported staff to keep people safe. All the people we spoke with told us staff ensured their safety. One person said, "Safe? Yes 100 percent."
- Staff had good knowledge of the types of abuse people could be subjected to. They understood their responsibilities in keeping people safe. Staff had confidence the registered manager would deal with any concerns raised.
- We saw there was learning from events to prevent reoccurrence of risks for people.
- Issues of concern were discussed at staff meetings, handovers and supervisions. We saw minutes of meetings to show issues had been discussed.

Using medicines safely

- The processes in place for supporting people with their medicines were safe.
- Staff received training in safe handling of medicines and people received the appropriate level of support they required.
- People received their medicines as prescribed and in a way they chose.
- Medicines were stored safely and in line with manufacturer's instructions. There were regular checks on the environment such as room and fridge temperatures to ensure they were within the safe range for medicines to maintain their effectiveness.
- There were protocols in place for medicines that were taken on an 'as required' basis.



# 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 the last inspection this key question was rated as Requires improvement. At this inspection this key question has improved to Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- When we last visited the service, although people's needs had been assessed using nationally recognised assessment tools, the tools were not being used effectively to provide people with effective care. During this inspection we found the registered manager had worked to improve this aspect of care and these tools were being used effectively.
- People's risk of skin breakdown had been assessed using the Waterlow scoring tool which is a nationally recognised tool. The information was reviewed each month and was consistent with other assessments for areas such as dependency and nutrition. The use of these tools provided a holistic approach to people's care. We saw the measures in place following assessments were followed by staff to provide safe care for people.
- People's protected characteristics under the Equality Act were considered and there were policies and protocols in place to guide staff provide appropriate care.

Staff support: induction, training, skills and experience

- When we last visited the service some staff had not been provided with the necessary training for their roles. However, at this inspection the registered manager had worked to ensure all staff had received the necessary training for their roles.
- People we spoke with were complimentary about the way staff supported them. One person said, "They [staff] know what they are doing."
- Staff told us the training they received was very good, which included regular updates in areas such as moving and handling.
- Throughout our inspection we saw staff supporting people confidently and in line with best practice. For example, housekeeping staff following safe practices when cleaning, and staff supporting people with their medicines.
- Staff were supported with regular supervisions from the registered manager. They told us the sessions were useful, but they also told us the registered manager had an open-door policy and they could discuss any practice issues at any time.

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

- People's nutritional needs were well managed and people we spoke with told us they enjoyed their meals. One person said, "The food is excellent." Another person echoed these comments, and told us the food was well presented and appetising to look at. We viewed the lunch and teatime meals on the day of our inspection. The staff managed the mealtime experience well, providing support and encouragement to

those people who needed it.

- Records showed people's nutritional needs were regularly assessed and staff showed a good knowledge of people's dietary needs. Such as if a person needed a low sugar diet or if someone had an unplanned weight loss. The cook told us the communication between themselves and care staff was excellent, and they received regular updates in relation to people's changing needs.
- The manager had a good overview of people's weights. When there were changes they referred people to the appropriate health care professional and staff followed the guidance given to them to ensure people received a healthy diet.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People's health needs were well managed and they were encouraged to live healthy lives.
- People's care plans showed any mental and physical health needs were regularly monitored and staff worked with health professionals to support people with these.
- One person had a chronic health condition which meant they sometimes became breathless and could be at risk of chest infections. They told us staff called their GP quickly when needed. The information in the person's care plan reflected the care the person needed and they told us they received.
  - Staff told us senior staff were quick to act on any health concerns raised and they felt confident raising any health issues with them.
  - People were supported to keep active and were provided with healthy eating options. There was a regular exercise class for people to join if they wished.

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

- The service was adapted to meet people's needs. There was an ongoing decoration and refurbishment plan in place. The provider employed a maintenance person who worked to ensure the service was well maintained.
- The service had dementia friendly signage to help people orientate themselves around the service.
- People's rooms had been decorated and adapted to meet their individual needs. People were able to personalise their own rooms. The majority of people enjoyed sitting in the communal areas, but one or two people preferred to spend time in their rooms. We saw staff had positioned their chairs so they could see out of the window into the grounds, their television, call bells and walking aids were all within reach.

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).

- During our last visit we found there was a lack of evidence to show how the service was working within the principles of the MCA. However, at this visit the registered manager had worked to improve the information on how people who lacked the capacity to make decisions were supported. 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. We viewed the

authorisations, which had no special conditions attached.

- People told us they were able to make their own decisions about their care. Where people required support to make decisions there were assessments in place and people were supported in the least restrictive way.
- Staff showed a good understanding of how to support people with making decisions. They were able to give examples of the different levels of support people needed with their decision making and had good knowledge of people's mental capacity.

# 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 the last inspection this key question was rated as Requires Improvement. At this inspection this key question has improved to 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

- When we last visited the service people did not always get the time needed to fully support their needs. During this inspection there was sufficient staff who were well deployed to ensure people's needs were met in a calm relaxed way.
- People were treated with respect and kindness. One person told us they couldn't speak highly enough of the staff who cared for them. They said, "We can't get better care anywhere." They told us they sometimes got breathless at night and staff came and sat with them, they told this made them feel so much better. One relative told us the staff were kind and caring, they were very happy with the attitude of the staff towards themselves and their family member.
- People interacted well with staff and engaged with them confidently. We saw numerous positive interactions between staff and the people they supported.
- Staff told us they enjoyed working at the service and told us there was a caring attitude toward people and their relatives from staff. The staff member enjoyed working at the service as they all worked as a team. A senior carer reiterated this view. They told us staff worked together to create a positive atmosphere and this transferred into good care for people.

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

- People were supported to express their views about their care. Their wishes and choices were considered, and people gave examples of how they took the lead in their day to day decisions. Such as choosing where they wanted to spend their time and when they wanted help with personal care.
- Records showed both people and their relatives had been involved in care planning. One person said, "They [staff] listen to my views."
- People's religious beliefs were supported. Where people had specific religious needs, staff worked with the person, their friends and relatives to ensure these needs were met.
- There was information on advocacy services available for people when this was required. Advocates are trained professionals who support, enable and empower people to speak up about issues that affect them.

Respecting and promoting people's privacy, dignity and independence

- People's privacy, dignity and independence was maintained by the staff who supported them.
- People told us staff spoke with them in a respectful way and throughout the inspection we saw staff maintaining people's privacy and dignity when they provided care.
- People were encouraged to be independent. For example, one person liked to get their own clothes out each evening for the following day and lay them out themselves.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as requires improvement. At this inspection this key question has improved to 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;

- When we last visited the service the information in people's care plans did not always reflect their needs. Information about changes to people's care had not always been updated. At this visit we saw the information in people's care plans reflected their needs and had been updated regularly.
- People received personalised care from staff who were knowledgeable about their needs. One person told us they made choices about their care, and staff supported them in a very personalised way. A further person told us how pleased they were with the way their clothes were laundered, they told us this helped them feel smart. Another person's relative told us how staff had worked with their family member to improve their mobility and nutrition since their admission. The relative told us staff had provided excellent person-centred care. They said, "The staff have done wonders."
- Staff worked to ensure people were treated equally, considering the protected characteristics of the Equality Act. This included providing staff with guidance on how to support people living with dementia. Our observations on the day of our visit supported this, we saw numerous positive interactions where staff clearly understood the needs of individuals living with dementia.

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 told us they were supported to develop and maintain relationships with other people who lived at the service and their relatives. We saw two people sitting together in one bedroom. They told us they were, "Good mates" and enjoyed spending time together. At lunchtime we saw people sitting together and enjoying a chat.
- People told us they enjoyed a variety of social activities. The provider employed an activities co-ordinator who worked to provide a varied programme of events for people. On the day of our visit there was a weekly visit from the local children's nursery, people and children enjoyed a craft session together. This was a lively interactive session enjoyed by children and people. Staff told us the sessions had become more enjoyable each week as the people and children had got to know one another. This was one of two children's groups who visited the service regularly.
- People told us there was a range of activities on offer and they joined in the ones they were interested in. These included visiting Choirs, religious services, crafts and reminiscence sessions. One person told us staff worked to make special events such as Christmas enjoyable, dressing up and creating a party atmosphere. They said, "The lads and lasses [staff] really go that extra mile."

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.

- The registered manager worked to provide people with accessible information, such as pictorial information for menus.
- Support plans provided staff with information about people's communication and sensory needs. We saw staff using this information when they supported people. For example, supporting people to wear their hearing aids.

Improving care quality in response to complaints or concerns

- People and relatives knew who to complain to if they had any concerns. One person told us staff always listened to them if they had any concerns. Staff we spoke with understood their responsibility in ensuring any concerns were dealt with. Staff told us they would ensure any complaints were recorded and raised with the registered manager.
- There was a copy of the complaint's procedure displayed at the service. We viewed the record of a complaint the registered manager had dealt with which showed they had worked to resolve the concerns.

End of life care and support

- Where appropriate, people's end of life wishes had been discussed with them and their families, and their wishes recorded in their care plans.
- The registered manager told us they discussed different aspects of people's care wishes, such as their religious needs and who they would like with them at the end of their life.

# 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 Requires improvement. At this inspection this key question has improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

At our last two inspections to the service there had been a lack of support for the registered manager. There had been several area managers in post over a period of time, and the oversight of the service was inconsistent, leading to some concerns over the quality monitoring of the service. As a result of this the provider was in breach of Regulation 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Following the last inspection the registered manager and the area manager told us they had a support plan in place and assured us actions would be taken to ensure all of the areas we had identified would be fully responded to and addressed. At this inspection there had been significant improvements in the oversight and quality monitoring processes. This had resulted in improvement in care provided to people and the service is no longer in breach of this regulation.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- There was a comprehensive quality monitoring system in place at the service. This resulted in a good oversight of the quality of the service. Both the registered manager and the area manager undertook a range of audits to maintain this oversight. The area manager also showed us a new auditing system the provider was putting in place, which would further support oversight of the quality of the service.
- The monthly analysis of falls had established trends or patterns, and analysis of the trends were undertaken. This had supported staff to review one person who had increased falls at a particular time of day. With staff support the person had changed their routine and this had resulted in a reduction in falls.
- The quality monitoring system also included audits of the environment, medicines, people's weights, care plans and equipment. When issues had been identified an action plan was developed and we saw the actions were completed in a timely way.
- The registered manager was well supported by the area manager. They worked together to provide a good quality service for people. Both the deputy manager and registered manager told us they valued the support of their area manager.

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

- The management team at the service worked with people and their relatives to provide an open, person centred approach to the care people received.
- Throughout our visit interactions between staff and people were clearly person orientated and there were

examples of how this had led to good outcomes for people. For example, on the day of our visit we saw how staff worked with a visiting health professional to support people with their mobility. The comments from people about their care were all positive. People were aware of who the registered manager was, and felt they were able to talk with them about any issues of concern.

- Staff told us the deputy manager, registered manager and the area manager who frequently visited the service were approachable and open. They worked to encourage a positive culture at the service.
- The registered manager had met their registration regulatory requirements of notifying CQC of certain information. It is a legal requirement that a provider's latest CQC inspection report is displayed at the service and via their website, where a rating has been awarded. This is so that people and those seeking information about the service can be informed of our judgments. We noted the rating from the previous inspection was displayed on the provider's website and at the service.

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

- The management team worked to ensure people, relatives and staff were engaged in the running of the service. Feedback from people included their opinion on the décor, the choices on the menus and their choices of activities. This was gathered through meetings and questionnaires.
- Staff told us they felt involved in the running of the service and the meeting minutes we viewed showed the range of topics discussed.

Working in partnership with others

- The service worked to maintain good links with the local community.
- The registered manager and their team worked in partnership with health professionals to ensure good outcomes for people. One health professional who came to the service regularly told us staff knew people well. They told us there was, "Joined up thinking" among staff when considering the needs of people. When they had given guidance or suggestions for improving care there were never any barriers from staff.