

St Philips Care Limited

Welbourn Manor Care Centre

Inspection report

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Date of inspection visit:
13 January 2022

Date of publication:
03 March 2022

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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

Welbourn Manor is a residential care home providing personal and nursing care for up to 31 people. At the time of our inspection there were 16 people using the service. The care home accommodates people in one adapted building across two floors.

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

Some aspects of infection control screening processes were not robust. However, staff followed safe infection control practices when supporting people.

People were protected from the risk of abuse as there were clear processes in place to investigate any allegations made, and staff understood their responsibilities in safeguarding people in their care.

The risks to people's safety were monitored and measures were in place to manage these risks. The manager had processes in place to learn from events, incidents and accidents at the service. People's medicines were managed safely. People were cared for by staff who had the necessary skills and knowledge to safely support them. We were told there had been some concerns over staffing numbers. However, the provider had been responsive and was continuing to recruit to vacant posts. On the day of our inspection there were enough staff to support people.

The service was well led, the provider had worked to ensure there was clear management support following a period of unsettlement at the service. A new manager was in post. People, relatives and staff told us the manager was open, visible and supportive. There was a clear person-centred approach to the care people received, which was supported by staff, the manager and senior managers for the provider.

There were clear quality monitoring processes in place which had positively impacted on the care people received. The provider notified CQC of events in line with their registration responsibilities. The staff at the service worked with health professionals to effectively support people in their care.

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

Rating at last inspection and update

The last rating for this service was requires improvement and there were multiple breaches of regulations (published 9 November 2021). 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 improvements had been made and the provider was no longer in breach of regulations.

Why we inspected

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 COVID-19 and other infection outbreaks effectively. This included checking the provider was meeting COVID-19 vaccination requirements.

We carried out an unannounced focused inspection of the two key questions Safe and Well Led at this service on 6 October 2021. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment, safeguarding service users from abuse and improper treatment and good governance.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Welbourn Manor on our website at www.cqc.org.uk.

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 ●

The service was well-led.

Details are in our well-Led findings below.

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. The inspection took place on 13 January 2022.

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

The service was inspected by two inspectors. Following our visit, we used an Expert by Experience to make calls to relatives of people who used the service. 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

Welbourn Manor 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 had a manager who had applied to become registered with the Care Quality Commission for this service. We will continue to monitor this application.

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. 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 three people who used the service about their experience of the care provided. We spoke with seven members of staff including the Clinical Director for the provider, the manager, the deputy manager, three care staff and the cook.

We reviewed a range of records. This included five people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to interrogate records and seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke by telephone with nine relatives about their experience 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 our last inspection we rated this key question Inadequate. At this inspection the rating has changed to Good. This meant people were safe and protected from avoidable harm.

At our last inspection the provider was in breach of Regulation 12 of the Health and Social Care act 2008 (Regulated Activities) Regulations 2014. Safe care and treatment. The provider failed to ensure that people were protected from the risks of falls. There was a lack of up to date records to support fire safety at the service and people's medicines were not safely managed.

At this inspection the provider had made improvements and was no longer in breach of this regulation

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- At our last inspection we found risks to people who had experienced falls were not managed safely. At this inspection we found the managers had worked with staff to improve the care people received to reduce the risk of falls. We saw information in people's care records reflected the care they received. Where people needed support, this was in place and recorded in their care records. For example, when people needed walking aids, sensor mats or new footwear, these had been identified and put in place.
- The manager had processes in place to analyse incidents, such as falls, to learn from these events and work to reduce the risks to people. The records we viewed supported this, there had been a reduction of falls at the service. Staff told us they were kept informed of changes to people's needs, showing the learning from events had resulted in good outcomes for people.
- For example, one person's care records showed they were sometimes resistant to personal care and could become upset with staff about this. Their care plan gave clear guidance on how to approach the person and highlighted the person's preferences. Staff we spoke with showed they were following the guidance. Daily records also showed how changes in staff's approach to the person had resulted in much calmer and positive interactions, which had been beneficial to the person's wellbeing.
- We viewed fire safety records and found they were up to date and reflective of people's assistance needs in the event of an emergency. The manager had clear processes in place to ensure the records were kept up to date.

Using medicines safely

- At our last inspection there had been a lack of oversight of the management of medicines. This had resulted in some people not receiving their medicines as prescribed. Controlled drugs were not stored safely, there were insufficient stock levels of some medicines resulting in people not receiving medicines which should not be stopped abruptly. Out of date medicines were being stored in the drugs trolley and there was a risk they could be used for people.
- At this inspection we found the manager had worked with staff to improve the management of medicines. People were receiving their medicines as prescribed and the staff who administered medicines had received appropriate training and support for their role.

- Medicines were stored safely, and the manager undertook regular audits and had picked up where there had been some minor errors. Both the manager and deputy manager were working to address these minor issues.

Systems and processes to safeguard people from the risk of abuse

At our last inspection the provider was in breach of Regulation 13 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Safeguarding service users from abuse and improper treatment. The provider failed to ensure that people were protected from abuse and improper treatment

At this inspection the provider had made improvements and was no longer in breach of this regulation

- People and relatives told us they were able to raise any concerns they had with the manager and staff. They felt there had been improvements since September 2021.
- Staff were able to tell us the types of abuse people may be exposed to in care homes. They felt able to raise any concerns with the manager and were aware of who else they could raise concerns with, such as the local safeguarding teams. Staff had received relevant training in safeguarding people in their care.
- We had been informed of any safeguarding issues at the service by the management team. There were systems and processes in place to ensure any safeguarding issues were properly addressed.

Staffing and recruitment

- People and relatives gave mixed responses about whether there were enough staff to support people. However, they recognised the service had been through a period of instability and there was a national shortage of staff. People were aware the managers had worked to ensure there was enough staffing in place. On the day of our unannounced inspection there were enough staff supporting people. The staff roster showed the provider was working within their established safe numbers of staff.
- People were supported by staff who had been recruited safely. The records we viewed showed staff had up to date Disclosure and Barring Service (DBS) certificates. The information helps employers make safer recruitment decisions.

Preventing and controlling infection

- We were not always assured that the provider was preventing visitors from catching and spreading infections. On the day of our visit we were not asked for proof of our vaccination status. We spoke with the manager who told us they would normally ask people entering the service about their vaccination status. However, they told us they didn't keep a record to evidence this. The manager told us they would address this moving forward.
- 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

We have signposted the provider to resources to develop their approach.

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency. We checked to make sure the service was meeting this requirement. Although staff told us they were checking the vaccination status of visiting health professionals, this was not recorded. The manager told us they would take action to implement clear records.

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 our last inspection we rated this key question Requires Improvement. At this inspection the rating has changed 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 inspection the provider was in breach of Regulation 17 of the Health and Social Care act 2008 (Regulated Activities) Regulations 2014 There was a lack of oversight which had impacted negatively on the care people received. This affected people's quality of care, staff support, training and behaviours. Quality monitoring processes were not being used effectively.

At this inspection the provider had made improvements and was no longer in breach of this regulation

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

- At the last inspection the information in people's care plans was not always person centred and lacked detail. At this inspection we found the information in the care plans had improved and gave staff clear guidance on how to support people. This included positively supporting people with their anxieties which in the past had impacted on their wellbeing.
- There was a very person-centred approach to the guidance in people's care plans and we observed staff working with people in a person-centred way. For example, one person enjoyed helping the cook who was their key worker, they undertook tasks of their choice with them.
- Throughout the day of our visit we saw positive interactions between staff and people, and staff worked to provide support in the way people wanted. A staff member told us about one person who preferred to stay in their room but enjoyed talking with staff. The member of staff told us the staff spent some time each day talking to the person, the daily notes we viewed reflected this was happening each day.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- At the last inspection quality assurance tools had either not highlighted when people's care had fallen below the standard of care expected from the service, or actions highlighted had not been followed up. This had impacted on several areas including medicines management, training, and analysis of falls.
- At this inspection we found the audit tools were being used to improve quality at the service. The clinical director for the provider showed us how the provider had developed new auditing tools for their managers which were user friendly. The information was then analysed by their business support team and shared with the manager of the service for action. We saw improvements in the analysis of falls and the information in care plans had a positive effect on people's outcomes as recorded in other areas of this report.
- Although the manager was still learning about the providers quality assurance systems and felt they needed time for the knowledge to embed, they had used the tools to support the improvements in

medicines management and in managing staff training.

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

- People, relatives and staff told us the manager was open and honest and had worked to keep them informed of changes at the service since their appointment. Relatives accepted there had been a big upheaval at the service, the feedback from them was they had confidence in the new team. One relative said, "Yes, it's well managed. I know the manager; [they are] approachable and listens to me. [They are] always walking around the home, so you get to see [them]."
- People told us they were consulted about areas of care. For example, the cook was relatively new to the service and had made sure they spoke to people about what they wanted on the menu. One person told us the food was "excellent."
- Some relatives felt the provider's communication around the previous events at the service could have been improved. However, relatives told us there had been a meeting to discuss events. We gave this feedback to the provider and they told us they would use this to further improve their communication strategies with people and their relatives.
- The staff we spoke with were all quite new to the service, however, they told us they felt well supported and the manager was approachable and empathetic. Staff felt the manager led by example, and our observations supported this. Throughout the inspection we saw the manager engaging with people and staff in a positive way. They told us there were staff meetings, the manager worked to keep them informed of changes and listened to their feedback.

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; Continuous learning and improving care; Working in partnership with others

- The provider notified CQC of events in line with their registration responsibilities.
- It is a legal requirement that a provider's latest CQC inspection report is displayed at the service and via their website, where ratings have 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 focused inspection was displayed on the provider's website.
- People were supported by a provider who had worked to improve care at the service. Although there had been a few serious issues raised at the service, the Nominated Individual had been open about the concerns. They continued to work with the local authority teams to learn from events. They had brought in an experienced manager who was effectively supported by the senior management team to ensure the quality of care people received was improved.