

Qualitas Care Limited

# Whitelow House Nursing Home

## Inspection report

429 Marine Road East  
Morecambe  
Lancashire  
LA4 6AA

Tel: 01524411167  
Website: [www.whitelowhouse.co.uk](http://www.whitelowhouse.co.uk)

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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

Whitelow House Nursing Home is a nursing home providing personal care to 28 people aged 65 and over at the time of our inspection. The service can support up to 32 people in one double and 30 single bedrooms. There is passenger lift access to all floors and communal areas for people's comfort including two lounges. Whitelow House Nursing Home will be referred to as Whitelow within this report.

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

The registered manager had sufficient staff and skill mixes to meet each person's needs. People were protected from an unsafe environment and told us they were comfortable living at Whitelow. A relative said, "Oh yes definitely they are safe." Staff demonstrated a good understanding of their responsibility to safeguard people against abuse. Nurses used a robust electronic system to check each person's medicines and ensure they received them safely.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice. A staff member told us, "I always ask people and treat them with respect."

Staff referred people to other agencies with a timely approach. People and relatives told us they could choose where to eat and enjoyed the food provided. The registered manager provided a range of training to underpin staff skills. A staff member stated, "I have had a lot of training here, it's very good."

Staff interacted with people in ways that respected their dignity and independence. A relative commented, "There is no invasion of privacy at all." The registered manager assessed people's needs to ensure staff supported them with a person-centred approach.

The management team developed good communication systems and an open working culture. Staff, people and visitors said Whitelow had strong leadership. A relative stated, "Absolutely [the registered manager] does a good job. You have to be a special type of person to do this."

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 good (published 17 May 2017).

### 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 ●

# Whitelow House Nursing 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

This inspection was carried out by an inspector, a specialist advisor, with clinical experience of supporting people who live with dementia, 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

Whitelow 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 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 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. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We spoke about Whitelow with two people, seven relatives, eight staff and two members of the management team. We walked around the building to carry out a visual check. We did this to ensure Whitelow was clean, hygienic and a safe place for people to live.

We looked at records related to the management of the service. We did this to ensure the provider had oversight of the home, responded to any concerns and led Whitelow in ongoing improvements. We checked care records of three people and looked at staffing levels, recruitment procedures and training provision.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at records related to training and staffing levels.

# 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.

### Staffing and recruitment

- The registered manager had a good staff skill mix on each shift to meet people's needs. For instance, various ancillary roles, such as domestics and kitchen staff, enabled care staff to fully focus on their own roles. Staff confirmed there were sufficient personnel on duty. One staff member stated, "Yes there are enough staff on duty."
- People told us staff were patient and supported them with a timely approach. One person said, "I think there is more than enough staff. I pulled the chord once and they were with me in about five seconds." Another person added, "Yes, I think there is enough staff."
- The registered manager properly assessed staff during recruitment to check they were suitable to work with vulnerable adults. One new employee explained, "Yes, they checked all my employment, DBS (Disclosure and Barring Service) and references before I started."

### Preventing and controlling infection

- The management team had good oversight of infection control procedures at Whitelow to ensure people lived in a clean environment. People confirmed staff made good use of disposable gloves and aprons. One person told us, "Everything is kept spotlessly clean."

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

- People were protected from an unsafe environment and their relatives told us this reassured them their family members were comfortable. One person stated, "I feel perfectly safe." A relative added, "Yes, she is safe. I would not put my [relative] anywhere I would not go."
- The registered manager had good oversight of everyone's safety and checked their systems mitigated risks. For example, staff recorded accidents and incidents, including actions taken and whether control measures were effective. The registered manager followed this up to assess any lessons learnt and requirements to implement further actions to maintain everyone's safety.
- The management team completed risk assessments to ensure staff understood the hazards of supporting people and how to manage them. These reviewed each individual's risks associated with, for instance, nutrition, medication, personal care and falls. People told us staff had discussed risks related to their care and the environment, which assisted them to remain safe.

### Systems and processes to safeguard people from the risk of abuse

- The registered manager trained their workforce to safeguard people against harm, abuse or poor care. Information files in each person's bedrooms outlined what constituted abuse and the various agencies they could contact if they had concerns.
- The home's policies and a poster in the staff room identified to staff how they were required to manage

poor practice. They had a good understanding of related procedures. A staff member explained, "I would have no issue whistleblowing and would do it immediately I had any concerns."

#### Using medicines safely

- Nurses used a robust electronic system to check people's medicines and ensure they received them safely. For instance, staff could not carry out various stages until they confirmed on handheld devices previous tasks had been completed.

- The system enabled the registered manager to audit medication, check stocks were sufficient and assess staff undertook procedures correctly. Staff confirmed they had training and competency testing to strengthen their skills and confidence. One nurse stated, "If there have been any changes, like a GP's review, the system alerts the nurses on each medication round."

# 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 good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

### 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.

- The registered manager had obtained legal authorisation to deprive one person of their liberty to effectively support them. This covered care planned covert administration of medication and staff recorded best interest decisions that involved relatives and healthcare professionals.
- The management team agreed care plans with people or their representatives. Staff assisted each person with their day-to-day decisions by offering options and had a good awareness of the principles of consent. One staff member said, "No matter how poorly someone may be we must check they are happy and not prevent them from making their decisions."

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

- Whitelow had spacious bedrooms and communal areas to enable staff to support people with their mobility as effectively as possible. The registered manager had adapted the environment to assist people who lived with dementia. For example, rooms had dementia-friendly signage to identify their purpose and a reminiscence corridor offered stimulation and discussion points.

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

- Staff referred people to other agencies with a timely approach. They assessed each person regularly and contacted services when they identified health changes. A staff member told us, "The nurse will check anyone who is not well and get medical attention straight away if needed."
- People confirmed staff assessed their needs and acted to maintain their health. Their relatives stated the management team communicated well with them to keep them informed. One relative said, "[My family member] was chesty so they rang the doctor and then called me."

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

- The registered manager provided detailed information to guide staff to people's nutritional requirements. Care records included each person's dietary needs and assessments to protect them against the risks of malnutrition and dehydration.
- People and relatives told us they could choose where to eat and enjoyed the food provided. A relative stated, "[My relative] always gets a choice. He always gets enough to eat." Another relative added, "[My relative] gets weighed regularly so we know he is getting enough food."

Staff support: induction, training, skills and experience

- The registered manager provided a range of training to underpin staff skills. This included moving and handling, environmental safety, safeguarding, dementia awareness and medication. People said staff were well-trained. One person commented, "Oh yes, they are very good."
- Staff confirmed they were confident in their roles and received regular supervision to explore their general progress. One staff member explained, "I am impressed with myself about how much I've improved over the year, knowing the residents better and being more skilled."

# 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 good. At this inspection this key question has remained the same. 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

- The registered manager fostered a caring and inclusive environment to maintain people's basic human rights. They provided information about advocacy services for people to access support to have an independent voice in decision-making.
- People and relatives commented staff were consistently caring and respectful of their diverse needs. Staff welcomed visitors and recognised the importance of family relationships to each person's wellbeing. A relative told us, "There are no restrictions on me visiting." Another relative added, "The staff are very engaging."

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

- Staff were skilled at including people in their care planning and to make their day-to-day decisions. A staff member said, "I always ask people. That is their right and I would be ashamed if we did not." The registered manager completed care records to guide staff to each individual's person-centred requirements.

Respecting and promoting people's privacy, dignity and independence

- Staff interacted with people in ways that respected their dignity and independence. The registered manager underpinned their skills through training and supervision. One staff member explained, "I never go into a room without knocking and I always make sure I ask if it is ok first."
- People and relatives stated staff consistently engaged with a caring and respectful approach. They added staff were mindful of their dignity. A relative commented, "They always close the doors and don't let anyone in. The way they respect [my relative's] privacy is very good."

# 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 good. At this inspection this key question has remained the same. 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

- The registered manager assessed people's needs to ensure staff supported them with a person-centred approach. One staff member explained, "We get as much information as possible so that we get to know what the resident likes." Records included people's preferences in relation to all aspects of their care to assist staff to act in their best interests.
- Staff reviewed care plans to check they remained responsive to each person's requirements. People and relatives confirmed staff discussed records with them to ensure they continued to meet their wishes. A relative stated, "I went through it with the nurse a few months ago."
- The registered manager provided a range of activities to improve people's wellbeing. A relative told us, "The highlight of the year for [my relative] has been her improved stimulation." Staff said they were strongly encouraged to spend time sitting and talking with people. A staff member added, "I talk about their memories and ask them who they are, what they used to do."

End of life care and support

- The registered manager sensitively documented people's needs and wishes in relation to their end of life support. This included their preferred place of care and regular reviews of their changing health. A relative fed back to the service, 'Thank you to all of you for making [my relative]'s last few years as comfortable as possible. It has been a great comfort to us.'

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 checked people's communication needs to support those with a disability, impairment or sensory loss. They introduced tools to assist individuals to better convey their needs. This included spoons with simple words, such as hungry, thirsty and tired to identify to staff what help they required. The provider also enhanced their dementia-friendly environment with, for example, pictorial versions of menus and welcome packs.

Improving care quality in response to complaints or concerns

- The registered manager displayed their complaints procedure in the lobby of Whitelow to advise people about raising any concerns. This included the different stages, timescales and contact details of other agencies, including CQC. The registered manager had not received any complaints in the last 12 months, but

people confirmed they understood related procedures. A relative stated, "I have never complained, there is nothing to complain about."

# 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.

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

- The management team worked with their workforce to gain a good understanding of people's needs and service delivery. Staff confirmed Whitelow had strong leadership with a caring approach. One staff member said, "They are very approachable and come in and do the work with us, so they get to really know the residents as well."
- The management team undertook regular audits to assess people's welfare and safety. These included checks of care records, medication, catering, maintenance, staff development, environmental safety and personal care.
- The registered manager reviewed identified issues and implemented new systems to address them. For example, they introduced a new form to improve monitoring of mattress inflation to protect people against the risk of pressure ulcers. The registered manager discussed this with staff to keep them informed about the change.

Working in partnership with others

- The management team worked closely with other services to share good practice and enhance care delivery. This included health and social care organisations. For example, they participated in the local authority safeguarding forum to review incidents and explore good standards to share with staff.

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 established good communication systems to develop an open working culture and improve the service. A staff member explained, "The communication is very good. You are well informed here." Shift handovers were informative to help staff keep up-to-date with people's progress and any changes in care.
- There was a cohesive approach between the management and their workforce to provide seamless care. Staff told us they attended regular team meetings and felt comfortable raising any issues. One employee stated, "The teamwork here is phenomenal."

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

- The management team sought people and their relatives' feedback about their experiences through

annual satisfaction questionnaires. Responses we sampled were positive about the home. Comments seen included, 'Supportive staff always ready to help' and, 'We are very pleased with the support, help and attention [our relative] receives at Whitelow House.'

- Staff confirmed they felt listened to and comfortable about making suggestions to improve the home. One employee told us, "If I had an idea to make things better I feel the managers would listen to me and take it on board." Staff said this helped them to feel valued and work more closely together.