

Wellesley House Limited

Wellesley House

Inspection report

10 Wellington Road
Bury
Lancashire
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Tel: 01617616932

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13 March 2018

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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

This inspection was unannounced and took place on 13 March 2018. The last inspection of Wellesley House took place in December 2015 when we found all the regulations we reviewed were met.

Wellesley House 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.

Wellesley House provides support for up to four people who have a learning disability who may at times present behaviour which can be challenging. At the time of our visit, four people were using the service. Wellesley House is a large terraced house located close to the centre of Bury and opposite a local park.

A registered manager was in post. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager was also one of the registered providers for the home.

The people who used the service felt safe and there were clear processes in place for safeguarding people from abuse.

The service had a stable team of staff who knew the people living there well.

The service had a positive approach to risk management to support people safely with their choices and preferences where possible.

The property was clean and tidy and systems were in place to ensure the safe handling of medicines.

People were supported to make their own decisions and choices.

Healthy and nutritionally varied menu options were offered and people's weight was regularly monitored

People's bedrooms were decorated and personalised to their individual tastes.

The staff team worked closely with other professionals to deliver good quality care.

Staff were caring and had positive relationships and interactions with the people living in the home. We saw staff speak to people with care and dignity.

Care plans and risk assessments were in place, were person-centred and were reviewed.

The people were actively involved in the community including attending college and voluntary work

There were processes in place to ensure regular audits and governance of the service.

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 remains Good.

Good ●

Is the service effective?

The service remains Good.

Good ●

Is the service caring?

The service remains Good

Good ●

Is the service responsive?

The service remains Good

Good ●

Is the service well-led?

The service remains Good

Good ●

Wellesley House

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008 and to provide a rating for the service under the Care Act 2014.

Before our visit we asked the provider to complete a Provider Inspection Return (PIR) form and this was returned to us. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed all the information we held about the service including notifications the provider had made to us.

We also contacted the local authority safeguarding team and the commissioners of the service to obtain their views about the service. No concerns were raised with us.

We visited the home on 13 March 2018. This inspection was announced and carried out by two adult social care inspectors.

We spoke with three people who lived at the home and briefly to a fourth person as well as a registered manager from another home owned by the providers and we also spoke with a support worker.

During the inspection we spent some time with people who used the service and staff. This enabled us to observe and talk with people about how their support was provided.

We also looked at a range of records relating to how the service was run; these included one person's care records, which we looked at with them, as well as medication records and monitoring audits undertaken by the service to ensure a good quality service was maintained.

Is the service safe?

Our findings

At our previous inspection we found that the service was safe. At this inspection we had no concerns about people's safety and the service continued to be good in this area.

People we spoke with who lived at the home told us they felt safe with staff that supported them and the way the home was run. The registered manager had procedures to minimise the potential risk of abuse or unsafe care. Staff had received training in safeguarding vulnerable adults and whistleblowing and this was confirmed by talking with staff and training records looked at. A support worker said, "If I have any concerns at all I would report it to management."

To help people achieve their goals the service promoted positive risk taking. We looked at risk assessments that had been completed to identify the potential risk of accidents and harm to staff and people in their care. The risk assessments we saw provided guidance for when delivering support. The service was always looking for the best outcomes for people and ways to promote their independence.

We saw that there was a stable staff team in place who worked flexibly to support people's goals and activities. There had been no changes in the staff team since our last inspection so we did not check recruitment files. No agency staff were used at the home and people were always supported by staff that knew them well and therefore received good continuity of care.

We looked at how medicines were recorded and administered. Medicines had been checked on receipt into the home, given as prescribed and stored safely. Records showed medication had been signed for. We checked this against individual medication packs, which confirmed all administered medication could be accounted for. This meant people had received their medication as prescribed and at the right time. The registered manager had audits in place to monitor medicines procedures. We were informed that following a medicines review people were no longer taking antipsychotic medicines.

The building was clean and free from offensive odours. We found hand wash and paper towels in place in communal areas and information about good hand washing techniques.

We looked at documentation and found equipment had been serviced and maintained as required. For example records confirmed gas appliances and electrical equipment complied with statutory requirements and were safe for use.

New policies and procedures had been developed with regard to employment of staff and health and safety. Plans were in place to stream line all policies and procedures.

Is the service effective?

Our findings

At our previous inspection we found the service was effective. At this inspection we had no concerns and the service continued to be good in this area.

People who lived at the home received effective care because they were supported by a staff team that were trained and had a good understanding of people's needs and wishes.

We looked to see how staff were supported to develop their knowledge and skills. Records we reviewed showed that staff employed in the service had received training to help ensure they were able to provide people with effective care and support. Staff supervision and appraisals took place on a regular basis.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

When we undertook our inspection one person who lived at the home had been assessed as lacking capacity to leave the property without support from staff and had a DoLS in place. Because staff knew people very well there were no presenting behaviours that could challenge others at the time of our inspection. Staff had a good understanding they must take the least restrictive options possible if risks presented themselves. Systems were in place to promote positive behaviour, which people in the home could sign up for if they wanted to.

Healthy meal plans were in place, which had been developed by the people who lived in the home. People were supported to shop for the meals. People's weight and Body Mass Index (BMI) was regularly monitored. Where a person was at risk of choking advice had been sought from a Speech and Language Therapist. Systems had been put in place to help reduce the risk of choking.

People's healthcare needs were carefully monitored and discussed with the person as part of the support planning process. Care records seen confirmed visits to doctors and other healthcare professionals had been recorded. Staff advised they had good working relationships with other professionals including the local General Practitioner service and specialist services including psychiatrists.

Documentation was shared about people's needs should they visit, for example the hospital using the 'Traffic Light' system of sharing important information. This meant other health professionals had information about individuals care needs before any care or treatment was provided.

We saw the house was comfortable and homely. We looked at parts of the building and found they it was appropriate for the support provided. We found a number of lounges were available for people to make a choice where to spend their time. No garden areas were available for people however there was a decked yard area and people had a choice to go out independently or with staff support.

Is the service caring?

Our findings

At our previous inspection we found the service was caring. At this inspection we had no concerns and the service continued to be good in this area.

People who lived at Wellesley House had done so for a long time and told us they got on well together as a group. The manager told us that consideration was given to the needs of a person moving into the home to ensure minimal disruption to the established group.

We saw that people and staff were very kind, caring and thoughtful in their support of a new person who was in the process of moving into the home.

We had positive responses when we asked people who lived at the home what the staff were like. People said, "I can talk to staff if I have a problem."

During the day we observed staff engaged with people in a caring and sensitive way. Staff we observed used appropriate humour when spending time with people.

Staff were aware of how to treat people with respect and dignity throughout our visit. For example, we saw staff knocked on people's bedroom doors before entering. We also found in care records staff had identified people's preferred term of address and staff were aware of what people wanted to be known as.

People in the home were supported to make decisions and were involved in the process of making contact with other health care professionals regarding their care. For example, emailing their social worker.

We were told that care plans were completed with the people using the service and the plans we saw were person centred and individual.

The manager informed us they worked in conjunction with Independent Mental Capacity Advocates (IMCAs). IMCAs represent individuals where there is no one independent of the service, such as a family member or friend to represent them.

Is the service responsive?

Our findings

At our previous inspection we found the service was responsive. At this inspection we had no concerns and the service continued to be good in this area.

We found assessments and all associated documentation was personalised to each individual. We spent time with a person who used the service looking at their support plan and risk assessments. We saw and were told that the records matched the person's support needs and assessed risks. People told us that they spent time talking with staff regularly to confirm there were no changes in their support plan and signed their agreement to this. We saw that photographs were used to support people to be involved in the support planning process.

A handover system was in place that helped keep staff up to date of any changes and what action was needed to support people.

We spoke with people about the daily routines at the home. They told us they had busy active lifestyles and were involved in healthy leisure activities which included a variety of community based activities including college and voluntary work. One person said, "We are always out and about. It's my birthday in two weeks and I am going to the pictures. I go to the centre to play pool and I like doing computers. I have been rock climbing."

We saw that the home had an activities room that had a pool table and this was popular. People went on holiday every two years if they chose to. People were involved in household tasks around the home to help promote their independence. People were encouraged and supported to maintain relationships with family and friends and also people who had moved on from the home.

There was a complaints procedure in place. There had been no complaints made about the service since January 2017.

Is the service well-led?

Our findings

At our previous inspection we found the service was well-led. At this inspection we had no concerns and the service continued to be good in this area.

There was a registered manager at Wellesley House. The registered manager was also one of the owners of the home. They were not present during our inspection because they were undertaking external training.

A support worker stated, "Its brilliant here. Staff and management" and "The managers put the residents first before anything else and are really nice people to work for."

There were opportunities for people to comment on the quality of the service. Staff and 'resident' meetings had been held and minutes were available for inspection. Agenda items for people included whether people knew how to make a complaint, raising any issues that might constitute an abuse and fire safety as well as anything new people wanted to do with their time. Agenda items for staff included, fire safety, infection control, the house report, complaints, safeguarding and staff objectives and training.

We also looked at surveys returned from people who lived at the home. These were given to people continuously throughout the year. The manager told us any negative feedback would be acted upon them. We saw feedback given by a relative in January 2018 that commented, "Everything is good. [Person] likes Zumba and I went one night. Everyone there seemed to enjoy it. [Person] seems happy with everything [person] does."

The registered manager had an annual planner in place to monitor the quality of the service provided. The planner included, annual medication competence checks, annual feedback about the service, person support plan reviews, staff supervision, in house training and risk assessment and policy and procedure reviews. There was a management meeting, which took place every three months to review the annual business plan.

The staff team worked in partnership with other organisations to make sure they were following current practice, providing a quality service and people in their care were safe. These included adult care services and healthcare professionals.