

Wymondley Nursing And Residential Care Home Limited

Wymondley Nursing & Residential Care Home

Inspection report

Stevenage Road Little Wymondley,
Hitchin,
SG4 7HT
Tel: 01438 312434
Website: www.wymondley.com

Date of inspection visit: 01 October 2015
Date of publication: 28/10/2015

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 

Overall summary

This inspection was carried out on 1 October 2015 and was unannounced.

The Wymondley Nursing & Residential Care Home provides accommodation and personal care including nursing care for up to 59 older people. There was a registered manager 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 and associated Regulations about how the service is run.

Summary of findings

When we last inspected the service on 04 April 2014 we found them to be meeting the required standards. At this inspection we found that they had continued to meet the standards.

Care Quality Commission (CQC) is required to monitor the operation of the Mental Capacity Act (2005) (MCA) and Deprivation of Liberty Safeguards (DoLS) and to report on what we find. DoLS are put in place to protect people where they do not have capacity to make decisions and where it is considered necessary to restrict their freedom in some way, usually to protect themselves or others. At the time of the inspection applications had been made to the local authority in relation to people who lived at the service and some were pending an outcome. Staff were fully aware of their role in relation to MCA and DoLS and how people were at risk of being deprived of their liberty.

People had their individual needs met by staff who knew people well and provided support in a timely manner. There was sufficient food and drink available and people were consulted in developing the menus. Staff was committed to provide personalised care in well maintained environment. People were able to sit in different areas of the home which were adapted for people to pursue their hobbies and interests.

People had regular visiting health and social care professionals. Staff responded promptly to people's changing health needs and sought the appropriate guidance or care by healthcare professionals. People received their medicines in time, however best practice guidelines were not always followed by staff in relation to safe recordings and administration of medicines.

Staff were clear on how to identify and report any concerns relating to a person's safety and welfare and they were confident in reporting on any safeguarding concerns they had.

The manager responded promptly to any feedback and complaints which were appropriately recorded and investigated. The lessons learned were shared with staff to ensure a continuous improvement of the service.

Staff had been employed at the service for a number of years and there was a low staff turnover. Staff were recruited through robust procedures and provided with regular training to ensure their knowledge was up to date.

People, their relatives and staff were positive about the manager and their leadership. Staff were proud to work for the service. People and their relatives were happy with the care provided by the staff and they were positive and complimentary about the management.

Summary of findings

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.

People had their needs were met safely and risks to their well-being were identified and managed well.

There was enough staff to meet people`s needs at all times and they were recruited through robust recruitment procedures.

People`s medicines were not always managed safely in line with best practice guidelines.

Good



Is the service effective?

The service was effective.

People were supported to make decisions and where they were unable, this was appropriately assessed and appropriate processes were followed.

Staff received regular supervision and training relevant to their roles.

People were supported to eat and drink sufficient amounts. They were involved in consultations and planning of the menus.

Good



Is the service caring?

The service was caring.

People who lived at the home were supported by staff who knew them well and involved people in decisions about their care.

People`s dignity and privacy was promoted.

Good



Is the service responsive?

The service was responsive.

People who lived at the home and their relatives were confident to raise any concerns. The manager took all feedback seriously and ensured lessons were learned and the service improved.

People received personalised care that met their individual needs.

People were consulted in the type of activities they wanted the service to provide.

Good



Is the service well-led?

The service was well led.

There were systems in place to monitor and continually improve the service

People who lived at the service, their relatives and staff were positive about the management team.

Good



Wymondley Nursing & Residential Care Home

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 met the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service and to provide a rating under the Care Act 2014.

This visit took place on 01 October 2015, was unannounced and carried out by one inspector and an expert by experience. An expert by experience is a person who has personal experience of having used a similar service or who has cared for someone who has used this type of care service.

Before our inspection we reviewed information we held about the service including statutory notifications that had been submitted. Statutory notifications include information about important events which the provider is required to send us.

During the inspection we observed staff support people who lived at the home, we spoke with eight people who used the service, four relatives, seven care staff, two nurses, one chef, the matron and the manager.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed care records relating to four people who used the service and other documents central to people's health and well-being. These included staff training records, medication records and quality audits.

Is the service safe?

Our findings

Without exception people told us that they felt safe in the home. One person said, “I feel very safe here, the staff are all great and treat me very well.” Another person said, “I feel safe here as there’s always someone around.” People’s relatives felt the home was safe. One relative said, “I have no worries about leaving [them] in here I trust them [staff].” Another person said, “You can feel it when you walk in the home, is warm and safe.”

Staff were able to confidently explain their understanding of how to protect people from the risk of abuse and were able to describe what form abuse may take. They knew the safeguarding adults procedure, the whistleblowing policy and where to find information on how to contact external agencies such as the local safeguarding team or CQC. One staff member said, “I would raise a safeguarding alert to managers and the local authority the minute I notice anything unusual for a person, unexplained bruises. We [staff] know people so well that we are able to identify if something is wrong.” Another staff member said, “We are checking people regularly and we attend to their needs. We [staff] always look out for anything suspicious and we will report.”

Information about safeguarding was easy to find around the home and in the staff room. This showed us that the provider had taken reasonable steps to identify the possibility of abuse and prevent it before it occurred.

People had comprehensive assessments carried out when they moved into the home, this included risks to their well-being. The manager had put risk assessments in place which explained the risk, the proposal how to manage the risk and the rationale behind the decision. For example, we saw that for a person was identified that they were at risk of slipping out of their chair. The proposed action was to provide a recliner chair and to support the person’s posture with pillows. The rationale behind the decision was to promote safety and comfort for the person.

People were supported to mobilise using walking aids or other equipment and staff demonstrated good knowledge of each person’s ability and therefore managed risk appropriately. People were made aware of their risk of falling and they were involved in managing these risks effectively. One person said, “I have fallen twice since I have

been here, the staff try to make me understand that I should wait until they help me.” Another person said, “I use an electric wheelchair, staff put me through training and checked I was safe before I used it.”

People and their relatives spoke positively about staffing in the home and they were satisfied that there was enough staff on duty to meet people’s needs all the time. One person said, “I never have to wait long if I ring the call bell even if I’m sitting in the garden.” Another person said, “There’s no waiting in the night when I need the toilet.” One relative said, “One of the things we [family] noticed that always it is enough staff around.” Staff were interacting with people, they were patient and did not rush. One staff member told us, “We don’t use agency here, we sort the cover out between us.” Another staff member said, “There’s enough staff, we all work together and help each other.” On the day of the inspection there was enough staff to meet people’s needs. They were regular team members and had enough time to carry out their duties.

The management was monitoring the length of time people’s call bells were answered using the data from the call bell system. This meant that information was available to management to help inform them if an adjustment of staffing levels was needed.

The home followed a robust recruitment process. This included a thorough interview process, written references and a criminal records check. This helped to ensure people were being supported by staff that was fit to do so.

People were knowledgeable about their medicines and they felt they received them regularly and on time. One person said, “I get painkillers when I need them.” Another person said, “It’s important that I get my diabetic tablets on time and I do.” A relative also said, “[Person] used to get in a muddle with [their] tablets, I feel much better knowing that [they] gets all the right ones on time in here.” Although people received their medication on time we observed during lunch service one nurse administered medicines from a tray containing multiple medicine pots for different people. This practice was not in line with best practice guidelines and increased the risk that wrong medicines being given to people. We also found that on two occasions there were more medicines left in the boxes that should have been. We brought this to the manager’s attention

Is the service safe?

who took immediate action and we were reassured by the end of the inspection that a full medication audit was carried out and new daily audit system was started to ensure people received their medicines safely.

Is the service effective?

Our findings

People were positive about how staff met their needs. One person said, "I know the staff and they know me. I can be a bit awkward and impatient but they reassure me and I can see they know what they're doing." Another person said, "The staff really know what they're doing, they all have lots of training, they told me." Staff demonstrated good knowledge of each person, and if they had to ask for advice the nurses and management was always available to help.

Relatives felt that staff knew their family members well and took time to understand what care they needed. One relative said, "The staff are good, they know what they are doing and it shows." Another relative said, "Staff here are very experienced, some have been here a long time and they are knowledgeable."

Staff enjoyed working at the home. They took pride in their work and felt well supported in their role. One staff member said, "I have training and supervision from the nurses, it helps me do my job better." Another staff member said, "Even if I've had the training, I sometimes ask one of the nurses for help, they never mind that." A newly employed staff member told us they had a comprehensive induction training when they joined the home and they worked alongside a more experienced staff member until they were confident in how to meet people's needs.

Staff were knowledgeable about the principles of the Mental Capacity Act and what their role was in meeting the needs of people who lacked capacity. Staff ensured they gained consent from people before they delivered any aspect of care needed. One staff member said, "I always ask people to consent and I explain what I need to do, even if they lack capacity, they can still say yes or no." Another staff member said, "Every person is different. We [staff] have to find ways to ensure people have the opportunity to have their say and agree before we give care." One relative told us, "They don't do anything without asking [person] first." Another relative said, "[Person] has all [their] marbles and they [staff] always explain what they are doing. It's very flexible here." This helped to ensure that people were empowered to be in control of their life and they were supported by staff to take decisions.

People and their relatives had an overwhelmingly positive view about the quality of the food at Wymondley Nursing Home. The menu orders were taken the day before,

however alternatives were available if people changed their minds. We saw snacks and drinks were offered throughout the day and bowls of fruit were available in the dining room. One person told us, "I like the food too much; I have put on weight since I arrived." Another person said, "The food is great, you order it the day before and if you don't like it they [staff] can change it." Relatives were also impressed with the food, "It's always well-presented and hot." Another relative said, "I have eaten here with my [person], it was lovely food and well presented."

People's dietary needs, food allergies, likes and dislikes were communicated to the kitchen staff and the chefs were knowledgeable about these needs. They were able to tell us how many different types of diets they were catering for and how they ensured people had plenty of choices. One chef told us, "We cook everything from fresh ingredients. It is very important for us to know what people like on the menu and what we need to change. We organise regular meetings with people and create the menus they want. We make sure people on special diets like diabetes; pureed diets have plenty of choices as well." One relative told us, "[They're] a diabetic and the chef is very good in making sure [they] has plenty of good choices."

Meal times were sociable events, a table plan was on display and people had their own table they liked to sit with their friends every day. People were seated around nicely laid tables with serviettes and condiments. Those needing support sat at the front and were served first with staff sitting down and supporting them. The atmosphere was calm and relaxed with music playing in the background. Staff ensured they always served people sitting around the same table before they served the next one so that people could eat at the same time.

People and their relatives were clear that the GP and other health professionals were able to be contacted if needed. No visits were observed on the day, however people told us, "The GP comes out to visit me. The nurse will call them." One relative who was visiting regularly told us, "I see the GP regularly in here and the dietitian." A family member explained that they asked for their loved one to stay in the home to be cared for rather than hospital. They said, "We wanted [them] back here as soon as possible, even though [they] was poorly. I stayed over with [them] and the staff cared for me as well. They kept in touch with the GP and [they] recovered well." People also told us they were visited

Is the service effective?

regularly by opticians and chiropodist. This meant that the provider helped to ensure peoples` health and wellbeing was promoted and health care professionals were consulted to ensure the best possible outcome for people.

Is the service caring?

Our findings

People were positive about the approach and attitude of the staff towards them and their families. One person said, "They just care about how I feel and what I need." Another person said, "They are very kind and caring." They went on to say that they had communication difficulties and said, "They are so patient with me." Staff knew people well, they were smiling and relaxed; the interaction between them was comfortable and suggested their relationship was built on trust and respect. One person said, "My family live away but the staff make me feel part of one big family." Another person said, "I've been here a long time, the staff are lovely and they care for me really well."

Staff were keen to explain that they enjoyed their work and were happy to work at Wyndley Nursing Home. One member of staff told us, "It's like a home from home; I want to make sure that the people here are comfortable and happy." Another staff member said, "It is a great atmosphere here that makes caring easy." One relative told us, "They are kind and caring, I feel happy that [they're] here."

Staff provided care to people in a patient and compassionate way and although not every person we asked was aware of their care plan they all said the care was provided in a way which suited them and they have a choice in everything relating to their care needs. One person said, "I did see the care plans when I first came here." Another person said, "I have seen and read the care

plan and know what's about." Relatives as well had mixed views about when and if they saw the care plan for their relative. One relative said, "I have been involved in the review of my [relative's] plan." Another relative said, "We saw it as a family when we arrived but not since."

People were aware that they had a keyworker and spoke highly of their relationship with them. One person said, "I chat to my keyworker, [they] visits me regularly." Another person said, "I bring up issues with my keyworker. It's a good relationship."

People and their relatives told us they were involved in the care they received. One person told us, "We have discussed a Do Not Attempt Cardio Pulmonary Resuscitation (DNACPR) and have now agreed it and it's in place. I know that I can review that at any time but I feel happy that I have done that with the staff."

Staff treated people with respect and dignity, they knocked on bedroom doors, they addressed people by their preferred names. People felt respected and were comfortable with how staff approached them. One person said, "Staff are very respectful and give me privacy." Another person said, "Even when I'm being bathed I still feel it's private."

Staff were welcoming toward visitors. One relative said, "Staff always welcome visitors." This meant that the provider was encouraging people to maintain relationship with their friends and families.

Is the service responsive?

Our findings

People received support that was tailored around their needs and was offered when and how it was needed. People were positive about the care they received, their comments included, "I have my freedom but I know they [staff] are here.", "I know I am getting looked after as a person not just a number.", "Staff work very well together to make us happy."

Staff knew people and their needs well. Many staff and people had been in the home for several years, this had promoted a trusting and long term relationship between them. We saw staff knew the likes and dislikes of people and they were able to meet people's needs in a personalised way. Relatives of people felt that the care was centred on the need of their family member and often witnessed staff discussing this with people.

Daily activities were organised by two staff members and delivered by staff on a daily basis. Activity plans were on notice boards around the home and each person had a copy in their rooms.

Most people thought the activities were good and they enjoyed being involved in them. One person said, "I do activities and I even help with the quiz." Another person said, "I enjoy the painting; I like to keep my mind active. I also go to the local school with my family if there are any shows on." Relatives felt involved in the activities, we observed a person and their relative doing painting together. One relative told us, "I often take [person] out in a taxi. Staff get [them] all ready for me and it works very well. We go out to lunch, shows and he comes home for a couple of hours." Another relative said, "We take [person] out so [they] still feels part of the family life. They [staff] are very supportive here of helping with that."

On the day of the inspection we observed people sitting outside, in lounges, on the gallery overlooking the garden. The environment was set out and organised to have small areas to support independence where people were reading newspapers, listen to music, having conversations. Throughout the day we saw that people were moving from area to area depending on their preference and mood.

People had regular visits from a hairdresser who worked at the home for many years and developed good relationships with people. One person said, "She's great she help me to relax and feel comfortable." Another person said, "I have got to know her so well as she has been coming here a long time." This meant that the provider helped to ensure people were able to live a full and active life live and enjoy their time in the home.

People felt that they were listened to if commenting on the service. One person said, "Its flexible here so we can change things within reason." Another person told us, "I just talk to the staff if I have a problem, things get sorted out quickly." Relatives told us they knew how to complain, however they told us that the service was flexible and things could change within reason. One relative said, "I just say if I'm not happy and sort it out with the management. It's generally very happy here." Another relative told us, "I am confident in raising anything with the staff and management. I am convinced they will sort things out immediately."

We saw the home had a complaints log and that in each instance the complaints were investigated and responded to. The management shared the complaints with staff to ensure lessons were learned and the service improved. We also saw that management displayed the complaints procedure in visible areas for visitors and people`s reference.

Is the service well-led?

Our findings

People and their relatives told us they knew who the manager was and they felt the home was very well led. One person said, "I know the manager and the matron, I often talk to them." One relative said, "The manager turns [their] hand to anything to make sure all is running well." Another relative said, "I found this home to be very well run. Everybody seems to have their own duties which work well. The manager is very approachable."

Staff told us that the manager was supporting them in their roles, they felt they were valued by them and acknowledged as important members of the team; most staff we talked to were working for the service for over five years. One staff member said, "The manager knows everybody by name and they always acknowledge me as a person which makes me feel valued and important." Another staff member said, "It is very important for us for the team to feel valued and appreciated. Our management team does this for us."

Staff felt that the management was approachable every time they needed to talk to them. One staff member said, "This is like family. I can always talk to the management when I need it and I think this is lovely." Another staff member said, "Managers are very approachable and always happy to listen and help if we need them." The manager was encouraging staff to develop and take on more responsibilities; they monitored staff competencies and ensured they regularly checked that the nurses were

practicing under current pin number. There were regular meetings organised for people, staff and relatives where ideas were shared on how to improve the menus, the environment, activities and other topics.

The manager monitored the quality of the service provided and they constantly sought feedback on the service provision from people and their relatives. They had sent out bi-monthly surveys to gather people's views if the service was safe, effective, caring, responsive and well-led. The feedback received was analysed and improvements were made where issues had been highlighted. For example, one survey identified that one person would benefit from more help from staff during meal times. This was discussed with the nursing team and support was put in place for the person.

The manager was dedicated to provide the best possible care for people living in Wymondley Nursing home and they built a good reputation in the community. They ensured the service they provided was transparent and honest; their values were well known to staff and people. One staff member said, "People always come first here. Their well-being and safety is the most important for the management and for us [staff]." One relative said, "This home has a great reputation and nothing is too much trouble for the management."

This meant that the service people received was managed by a management team who ensured they improved continuously, they put people's interest first, they had strong values and beliefs which they filtered down to the staff who delivered high quality care to people.