

Popular Care Ltd

Wilton House Nursing Home

Inspection report

Wilton Drive
Darlington
County Durham
DL3 9RE

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22 November 2023
23 November 2023

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18 December 2023

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

Wilton House Nursing Home is a residential care home providing personal and nursing care to up to 37 people. The service provides support to older people some of whom are living with dementia. At the time of our inspection there were 32 people using the service.

People's experience of the service and what we found:

People and their relatives spoke positively about the care and support they received. Comments included, "Everything about this place is lovely. The room is lovely, staff are very good and so is the food. We're just very glad that someone recommended this place to us." and "I've been here a few years and it's excellent here. Staff are very good."

Risks to people's safety had been assessed and plans put in place to support staff to keep people safe. There were processes in place to safeguard people and protect them from harm and abuse. People received their medicines safely.

There were sufficient staff to meet people's needs. The service followed safe recruitment practices to ensure people were supported by knowledgeable and skilled staff, who were of good character.

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.

There were systems in place to monitor the quality of the service and actions were taken to ensure improvements were identified and actioned. There was a positive and open culture and people and staff felt listened to by management. The service worked in partnership with other health and social care professionals to ensure people's needs were met.

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

Rating at last inspection

The last rating for this service was Good. Date of publication: 29 June 2018.

Why we inspected

The inspection was prompted in part due to concerns received about staffing. A decision was made for us to inspect and examine those risks. We found no evidence during this inspection that people were at risk of harm from this concern.

Follow Up

We will continue to monitor information we receive about the service, which will help inform when we next

inspect.

The five questions we ask about services and what we found

We always ask the following five questions of services.

<p>Is the service safe?</p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p>Good ●</p>
<p>Is the service well-led?</p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p>Good ●</p>

Wilton 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 Health and Social Care Act 2008.

Inspection team

The inspection team consisted of 2 inspectors 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

Wilton House Nursing Home is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Wilton House Nursing Home is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

The inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return (PIR). This is information

providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority, Healthwatch, and professionals who work with the service. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

We used all this information to plan our inspection.

During the inspection

We spoke with 4 people who use the service and 3 family members. We spoke with 13 members of staff including the registered manager, nursing staff, care staff and housekeeping staff.

We reviewed a range of records. This included 4 people's care records and multiple medication records. We looked at 2 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 seek clarification from the manager to validate evidence found.

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 Good. At this inspection the rating has remained Good. This meant people were safe and protected from avoidable harm.

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

- People were safeguarded from abuse and avoidable harm. Staff had received appropriate training and understood their responsibility to report any safeguarding concerns.
- The provider learned lessons when things had gone wrong. Accidents and incidents were analysed to identify themes or trends.
- People were kept safe from the risk of emergencies in the home. Personal Emergency Evacuation Plans (PEEPS) were in place.
- There were systems in place to monitor and check the safety of equipment and the premises.

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- Care plans contained information for staff on how to keep people safe whilst promoting their independence. People we spoke with felt the service was safe. Comments included, "I couldn't get better care. I have a call-bell I can ring if I need anything, and they come quite quickly."

Staffing and recruitment

- The provider operated safe recruitment processes. Recruitment processes included the completion of appropriate pre-employment checks to ensure staff were suitable to work at the service.
- The provider ensured there were sufficient numbers of suitable staff. People told us there enough staff to support them. Comments included, "I'd say there were enough staff? There's never anything left not done."

Using medicines safely

- People were supported to receive their medicines safely.
- Only staff who had received the necessary training and were deemed competent were permitted to administer medicines.

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.

Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.

Is consent to care and treatment always sought in line with legislation 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 MCA 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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS)

- The provider was working in line with the Mental Capacity Act. Assessments of people's capacity and best interest decisions were available in people's care plans.

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 Good. At this inspection the rating has remained Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery. There were systems in place to monitor the quality of the service and actions were taken to ensure improvements were identified and actioned.
- There was a positive and open culture at the service. Staff felt supported by management and able to share ideas or raise concerns. Their comments included, "I think the management is good. I do feel supported and have raised concerns that have been dealt with."
- The provider had systems to provide person-centred care that achieved good outcomes for people. People and their relatives spoke positively about the care provided. Their comments included, "We have been very well looked after as a family and think the home is very well managed. Everything is in place."

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

- The provider had created a learning culture at the service which improved the care people received. The registered manager had reviewed accidents, incidents, complaints and safeguardings. There was evidence that lessons had been learned and improvements to care made.
- The provider understood their responsibilities under the duty of candour. The provider understood their responsibility to be open and honest when something had gone wrong and to put this in writing.

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

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics. People and their relatives were invited to give feedback on the service they received.
- There were opportunities for staff to engage with the registered manager and senior management team. Staff received regular supervisions and appraisals. One staff member told us, "Our operations manager visits this home once a month to have an open house session with any member of staff who would like to discuss an issue. He's usually here between 2pm and 8pm, so that covers both day shift and night shift."

Working in partnership with others

- The provider worked in partnership with others. The service worked alongside a variety of health and

social care providers to meet people's emotional, social and physical needs. Comments included, "We have a positive working relationship with this provider and we are not aware of any concerns with the service."