

Vishomil Limited

St Winifred's Nursing Home

Inspection report

89 Crowtrees Lane

Rastrick Brighouse West Yorkshire HD6 3LR

Tel: 01484720100

Date of inspection visit:

08 July 2021 13 July 2021 15 July 2021

20 July 2021

Date of publication: 02 August 2021

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

St Winifred's is a residential care home providing personal and nursing care for up to 38 older people, some of who are living with dementia. At the time of our inspection there were 32 people using the service.

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

Improvements had been made since the last inspection which had resulted in better outcomes for people using the service. One person said, "I am lucky to be here. My [relative] found this place and I have not been disappointed. They look after you really well."

People told us they received their medicines when they needed them and we found safe systems were in place. Staff understood how to manage any risks to people and knew the processes to follow to manage any allegations of abuse. There were enough staff to meet people's needs and keep them safe. Staff were recruited safely and received the training they needed. Staff said they felt well supported in their roles.

The service was well run. People, relatives and staff praised the management of the service. Effective quality assurance systems were in place. The provider and registered manager were committed to making further improvements to the service with an ongoing action plan which included a refurbishment programme. The registered manager promoted good practice and worked alongside the staff supporting them and making sure the quality of care was maintained.

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 (published 29 February 2020) and there were two breaches of regulation. 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 carried out an unannounced comprehensive inspection of this service on 27 and 30 January 2020. 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 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 Wellled which contain those requirements.

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.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. 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 St Winifred's Nursing Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good



St Winifred's 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.

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

This inspection was carried out by an inspector, a medicines inspector 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.

St Winifred's 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 announced. We announced the inspection from the car park shortly before entering the service. This was because we needed to check the arrangements in place for preventing and containing transmission of COVID-19 prior to entering the building. Inspection activity started on 8 July 2021 and ended on 20 July 2021. We visited the service on 8 and 15 July 2021. The other dates were spent reviewing information off site.

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 commissioners and safeguarding team and Healthwatch. 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 the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

While on site we spent time with people in the communal areas observing the care and support provided by staff. We spoke with seven people who used the service about their experience of the care provided and two relatives. We spoke with six members of staff including the registered manager, clinical lead, nursing and care staff.

We reviewed a range of records. This included two people's care records and eight people's medicine records. We looked at two staff recruitment files. A variety of records relating to the management of the service, including policies and procedures were reviewed.



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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

At our last inspection the provider had failed to ensure medicines were managed safely. This was a breach of regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 12.

Using medicines safely

- Medicines were administered by staff in a safe and caring way.
- People said they received their medicines as prescribed. One person said, "Medication is on time. I like to know what I am getting, and they will tell me. I can ask the nurse for painkillers if I need it, they give me paracetamol."
- Medicines were stored safely.
- Medicine records were accurate and complete.
- Medicine audits were effective in ensuring good practice relating to medicines.
- Medicines that are controlled drugs were managed safely.

Systems and processes to safeguard people from the risk of abuse

- Effective systems were in place to protect people from the risk of abuse and harm.
- People told us they felt safe at St Winifred's. One person said, "Knowing there is someone around makes me feel pretty safe." A relative said, "I have been very involved in my [family member's] care over the years and I know [they are] being well looked after and safe."
- Staff had completed safeguarding training and knew the procedures to follow if abuse was suspected or identified.
- Where safeguarding incidents had occurred, action had been taken to make sure people were safe. Referrals had been made to the local authority safeguarding team and notified to CQC.

Assessing risk, safety monitoring and management

- Risks to people were assessed, monitored and managed.
- Risk assessments were in place which assessed the levels of risk and recorded how people should be supported safely.
- Staff assisted people to transfer using the hoist and supported people who were using walking aids. Staff knew how to use the equipment and ensured people's safely. One person told us, "[Staff] make sure they are walking with me when I move around the place."

• Checks had been carried out to ensure the premises and equipment were safe.

Staffing and recruitment

- There were enough staff to meet people's needs and keep them safe.
- The provider used a staffing tool which calculated safe staffing levels according to people's dependencies. The rotas showed these levels were being met.
- People said staff were available and responded to call bells but felt more staff were needed. Comments included; "Staff are lovely but overworked. Sometimes it takes a time to get anyone, depending how busy they are" and "They could do with a few more staff. They never stop."
- Our observations showed staff were busy but were available and responsive to people needs.
- Staff said there were usually enough staff on shift and the staffing arrangements worked well. One staff member said, "Most days it's enough, though it depends on how people are, if they're not well it can be very busy. We all pull together, [registered manager and clinical lead] help out too."
- Robust recruitment processes were in place with all checks carried out before staff were employed.

Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was meeting shielding and social distancing rules.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was accessing testing for people using the service and staff.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured 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.

Learning lessons when things go wrong

- Effective systems were in place to make improvements and share lessons learned when things went wrong.
- A monthly analysis considered whether any lessons could be learned from events that had occurred and these were shared with staff.



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 requires improvement. At this inspection this key question has now improved 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 had failed to ensure care records were accurate, complete and contemporaneous. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

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

- The recording of people's care and communication needs had improved. Care plan audits were thorough and showed actions had been taken to address any shortfalls.
- Improvements had been made since the last inspection, all regulatory breaches had been met and the service was well run and organised with strong and effective leadership.
- People were relaxed and engaging with staff and were comfortable in the environment. They said the service was well managed and praised the registered manager. Comments included; I would take any issue to the manager if necessary. [Registered manager] is very nice, very approachable" and "If there were any problems I would go to [registered manager] he is lovely, very approachable, whatever it was I am sure he would deal with it."
- Staff were clear about their roles and understood their responsibilities. They provided positive feedback about the management of the service. One staff member said, "Management is good. [Registered manager] knows what he's doing, I can go to him if I need to." Another staff member said, "[Registered manager's] very organised, one of the best managers I've worked with. He listens too."
- The provider, registered manager and clinical lead carried out regular quality audits of the service. Audit reports were detailed, identifying actions and ensuring these had been completed.
- The provider and registered manager were committed to making further improvements for people using the service. An ongoing action plan identified timescales for ongoing improvements including an extensive refurbishment programme and new call bell system.
- The registered manager had implemented a process of reflective practice and corrective action to help ensure continuous learning and share good practice amongst the staff team.

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 registered manager understood the requirements of the regulations to make notifications and to comply with duty of candour responsibilities when things had gone wrong.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People we spoke with during the inspection gave positive feedback about the care they received. Comments included; "I rate living here very highly. The staff are wonderful, they never say 'no'. They are always kind, considerate and caring. If you are having a down day, they pick you up"; "I would recommend the place. It is all clean and tidy and you get looked after" and "The staff are lovely, and the food is very good, a bit too good as I seem to be putting on weight."
- Relatives also gave positive feedback about the care provided. One relative said, "I am very happy, [family member] is being looked after well."
- Minutes for recent residents' meetings showed people were involved in choosing and planning activities and events.
- A variety of meetings were held regularly with staff to communicate information and gain their views. Staff said communication was good and felt they were kept updated about any changes.
- The registered manager had introduced a weekly health and wellbeing clinic where staff could speak confidentially about any worries or anxieties they were experiencing. Staff surveys showed many staff had found this helpful.
- Records showed the service liaised with a range of health and social care professionals in meeting people's needs.