

# Bupa Care Homes (ANS) Limited

# Wilton Manor Nursing Centre

## Inspection report

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## Ratings

### Overall rating for this service

Requires improvement



### Is the service safe?

Requires improvement



## Overall summary

We carried out an unannounced comprehensive inspection of this service on 19, 21 and 24 August 2015. At which a breach of a legal requirement was found. This was because we found concerns surrounding the cleanliness of the home.

After the comprehensive inspection, the provider wrote to us to say what they would do to meet the legal requirements of the breach. We undertook a focused inspection on the 19 January 2016 to check whether they had followed their plan and to confirm they now met legal requirements.

This report only covers our findings in relation to this topic. You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Wilton Manor Nursing Centre, on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

Wilton Manor Nursing Centre is registered to provide accommodation for a maximum of 69 people who require support with their personal care. The home

mainly provides support for older people who may have nursing needs, mental health needs or those living with dementia. At the time of our inspection 58 people were living at Wilton Manor.

At the time of our inspection, the home had a new manager who was in the process of becoming registered with CQC. 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.

At our focused inspection we found that the provider had followed their action plan which they told us would be completed by the 14 December 2015 and legal requirements had been met.

People told us they had no complaints about the cleanliness of the home and that staff were always tidying. We saw the bathrooms were clean and regular

# Summary of findings

checks on the water temperature were being completed. Sealant had been replaced where required and a new bathroom installed on the second floor of the home. All the pipework was being boxed in and replaced.

There were now cleaning schedules in place which were checked twice daily by the housekeeping staff and all housekeeping staff had undertaken infection control training. There were now two infection control leads within the housekeeping team and there was always one on duty.

Staff members were now allocated as the named person on a shift, to ensure all wheelchairs were kept clean. They would sign to say that all wheelchairs had been checked and they were clean. All waste areas were now kept secure and there was a system in place to keep the area clean.

# 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?**

We found that action had been taken to improve the safety of the service.

People were protected from the risk of infection. Waste disposal areas were kept clean and secure. Changes had been made to the bathrooms and sealant changed around the sinks. Systems had been put in place to ensure all equipment was kept clean and there was now an effective rota system to monitor the cleanliness of wheelchairs. Staff were up to date with current guidance regarding infection control and there were now two infection control leads.

While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice.

We will review our rating for safe at the next comprehensive inspection.

**Requires improvement**



# Wilton Manor Nursing Centre

## 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, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We undertook an unannounced focused inspection of Wilton Manor Nursing Centre on 19 January 2016. This inspection was completed to check that improvements to meet legal requirements planned by the provider after our comprehensive inspection 19, 21, 24 August 2015 had been

made. We inspected the service against one of the five questions we ask about services: is the service safe, . This is because the service was not meeting some legal requirements.'

The inspection was undertaken by consisted of one inspector.

Before the inspection we reviewed the information we held on the home including previous inspection reports and notifications. A notification is information about important events which the service is required to send to us by law.

During our inspection we spoke with one person who lived at the service, the manager, clinical service manager, and the relief manager. We looked at policies and procedures and quality assurance records along with other information recording the changes made.

# Is the service safe?

## Our findings

At our comprehensive inspection of Wilton Manor Nursing Centre on 19, 21 and 24 August 2015, we identified appropriate arrangements were not in place to ensure the cleanliness of the home which meant people were living in unclean conditions which increased their risk of acquiring infections. Waste storage was not being done so safely, there were dirty wheelchairs stored in people's bathroom.

This was a breach of Regulation 12 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2010.

At our focused inspection 19 January 2016, we found the provider had followed the action plan they had written to meet the shortfalls in relation to the requirements of Regulation 12 described above.

We found significant improvements had been made and new procedures had been put in place to control the spread of infection. People said they had "no complaints" and the home was "always tidy."

We found the home appeared clean and hygienic. The manager carried out daily visual checks on cleanliness, this meant that any areas identified could be addressed promptly. Action audits were being completed weekly to check that all areas and equipment were being kept clean as well as spot checks on people's rooms and bedding. There were cleaning schedules in place which were checked daily by the housekeeping staff, these were checked as they started their shift and prior to them finishing their shifts. This prevented areas being missed. Two of the housekeeping staff were now infection control leads, and all housekeeping staff had completed their infection control training. We observed housekeeping staff using correct procedures.

Information from the managers daily walk round as well as the housekeepers daily checks was shared daily at the 'take-ten meetings' and any issues could be discussed and action taken. The home's up to date infection control policy was now accessible to staff in a file for staff to read and then sign to say they had read the policy. We saw that most of the staff had now read the policy and those who hadn't the manager said they "would chase up".

Action had been taken in respect of specific concerns identified at the previous inspection. For example, all air vents were being cleaned and checked monthly. Some of the pipework in the bathrooms had been boxed in with Perspex.

The manager told us staff allocations sheets had been introduced which specified which member of staff during both the day shift and the night shift, was the "wheelchair champion". This meant they were the named person who had to ensure that all wheelchairs had been cleaned and had to sign to say this had been done. We saw copies of the allocation sheets and the records confirming the checks had been done. Feedback from the clinical manager was that this was working well. However

We saw works had been completed to the ground floor shower room and first floor bathroom, with future work planned to refit the middle floor and second floor shower rooms as well as the top floor bathroom. The home was awaiting external contractors to complete out this work. The new bathrooms were being used and the water temperatures were being recorded prior to them being used to ensure they were safe. Where the sealant was worn around the sinks, this had been replaced reducing the risk of infection.

We observed staff using a covered linen trolley on the ground floor, a further two had been ordered for the other floors at the home. The external clinical waste area was now being clean and secure. We saw the bins were also kept locked and it was covered so that wildlife could not get in.

All the changes had been implemented in the past few months so this practice needs to be embedded in the service to show that it is working. While improvements had been made we have not revised the rating for this key question; to improve the rating to 'Good' would require a longer term track record of consistent good practice. Any ratings for key questions that have not been re-inspected will be brought forward from the previous comprehensive inspection and displayed on our web site.