

July VII Limited

July VII Limited t/a Wykenhurst Residential Home

Inspection report

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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

About the service

Wykenhurst Residential Home is a residential care home providing personal care for up to 25 people in one large building adapted from three adjoining Victorian properties. It specialises in supporting older people with mental health needs or dementia who may also have physical disabilities. At the time of our inspection, there were 23 people living at the home.

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

Staff were clear how to identify and report any abuse involving the people who lived at the home. The risks to people's health, safety and welfare had been assessed, recorded and kept under review. Staffing levels enabled people's needs to be met safely, and the provider followed safe recruitment practices. The provider analysed and sought to learn from any accidents or incidents involving people. Steps had been taken to protect people from the risk of infections.

People's individual needs and requirements were assessed with them before they moved into the home. Staff received training and ongoing management support to enable them to fulfil their duties. People had enough to eat and drink and any risks associated with their eating or drinking were managed with appropriate specialist input. Staff worked with community health and social care professionals to ensure people's needs were met and their health monitored. 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.

Staff were caring and friendly towards the people they supported, and encouraged people and their relatives to have their say about the care provided. People were treated with dignity and respect at all times.

People's care plans provided staff with clear guidance on their individual needs, and encouraged a person-centred approach. People were supported to participate in a range of social and recreational activities. People understood how to raise any concerns or complaints about their care. People's wishes and choices about their end of life care were established with them.

The management sought to engage effectively with, and involve, people, their relatives and staff. Staff felt the management team were approachable and supportive. The provider had quality assurance systems and processes in place to help them monitor and improve the quality of people's care. Staff and management understood the need to promote equality and diversity in their work and consider people's protected characteristics.

Rating at last inspection

The last rating for this service was good (published 12 October 2016).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection 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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

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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.

Inspection team

The inspection was carried out by an 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.

Service and service type

Wykenhurst Residential Home 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.

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

The first day of this inspection was unannounced. We informed the provider when we would be returning for the second day of the inspection.

What we did before the inspection

Before the inspection visit, we reviewed information we had received about the service since the last inspection. This included information about incidents the provider must notify us of, such as any allegations of abuse. We sought feedback on the service from the local authority and local 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.

During the inspection

We spoke with 12 people who used the service and one community social care professional about their experience of the care provided. We spoke with the care director and nine members of staff including the registered manager, activities coordinator, head chef, one senior care worker and five care workers.

We reviewed a range of records. This included four people's care records, medication records, three staff files in relation to recruitment, and incident and accidents records. We also reviewed a variety of records relating to the management of the service, including quality assurance audits and checks.

After the inspection

We spoke with one community social care professional about their experience of care provided.

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

Systems and processes to safeguard people from the risk of abuse

- Staff understood how to recognise and report abuse. They told us they would inform the management team without delay of any concerns of this nature. One staff member said, "If you know people well, you will know when something is wrong ... I would talk to the bosses straightaway and take immediate action to protect people."
- The provider had procedures in place to ensure the relevant external agencies, such as the local authority and police, were informed of any abuse concerns, so these could be fully investigated.

Assessing risk, safety monitoring and management

- People told us they felt safe living at the home and that they would speak to staff if they were worried about anything.
- The risks to people's health and safety had been assessed, recorded and plans put in place to reduce these. This included consideration of people's risk of pressure sores, falls and their behaviour support needs.
- Staff read people's individualised risk assessments and showed good insight into the risks to individuals.
- Staff confirmed they were kept up to date with any changes in risk through handovers between shifts and regular updates from the management team.

Staffing and recruitment

- People told us there were enough staff on duty to help them when they needed support.
- Staff felt staffing levels enabled them to safely meet people's needs. One staff member said, "They [management] always make sure we have enough staff on and they will stand in as needed."
- We saw staff responded promptly to people's needs and requests, monitored their wellbeing, and supported them in an unrushed manner.
- The provider and registered manager monitored and adjusted staffing levels in line with people's current needs and feedback from staff.
- The provider followed safe recruitment practices.

Using medicines safely

- The provider had procedures in place to ensure people received their medicines safely and as prescribed. Staff received training in and felt confident following the provider's medicines procedures.
- People's medicines were stored securely at all times in the home's ground-floor 'clinic'.
- Staff had been provided written guidance on the use of people's 'when required' (PRN) medicines.

Preventing and controlling infection

- The home's housekeeper supported care staff in maintaining standards of hygiene and cleanliness. We found the home clean, hygienic and fresh-smelling throughout.
- Staff were provided with, and made appropriate use of, personal protective equipment (i.e. disposable gloves and aprons) to reduce the risk of cross-infection.

Learning lessons when things go wrong

- The management team monitored any accidents or incidents involving people living at the home to learn from these and prevent things happening again.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

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's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's individual needs and preferences were assessed with them before they moved into the home and then kept under regular review
- The registered manager attended further training and events run by the local authority to keep themselves up to date with current legislation and best practice guidelines.
- The management team monitored staff working practices to ensure these reflected expected standards of care.

Staff support: induction, training, skills and experience

- People spoke positively about the competence of the staff supporting them.
- New staff received induction training to help them settle into their new roles.
- Staff were satisfied with the training provided to enable them to fulfil their duties. They attended regular one-to-one meetings with the registered manager to receive feedback on their performance and identify any additional training or support needed.

Supporting people to eat and drink enough to maintain a balanced diet

- People had support to maintain a balanced diet and make choices about what they wanted to eat and drink each day.
- Menus were based around people's known preferences and changed through consultation with them. One person said, "I bet you don't go to many homes that have five star meals!"
- Any complex needs or risks associated with people's eating or drinking were assessed and met, with specialist nutritional advice where necessary.
- Mealtimes were relaxed and sociable events during which people had the support needed to eat and drink safely and comfortably.

Staff working with other agencies to provide consistent, effective, timely care

- Staff and management worked with a range of health and social care professionals to ensure people's care needs were monitored and addressed. A community professional said, "I have confidence they [staff and management] will follow through on my suggestions."

Adapting service, design, decoration to meet people's needs

- The design, decoration and furnishings of the home were aimed at promoting people's comfort and safety.
- Since our last inspection, the provider had developed a large activities centre in the home's grounds ('the garden room') to enhance people's access to social and recreational activities. We saw people enjoying frequent use of this facility. People also enjoyed caring for the chickens in the home's new chicken coop.

Supporting people to live healthier lives, access healthcare services and support

- Staff and management monitored people's general health and wellbeing and helped them seek professional medical advice and treatment in the event of any related concerns.
- People had support from staff and management to arrange and attend medical appointments and health check-ups.

Ensuring consent to care and treatment in line with law 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 Act 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 when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff and management demonstrated an improved understanding of people's rights under the MCA.
- Staff recognised the need to support people's right to make their own decisions, and the role of best-interests decision-making.
- We saw people's decisions and choices were respected by staff and management.
- The provider had made applications for DoLS authorisations based upon an individual assessment of people's capacity and care arrangements. Where DoLS authorisations were granted for individuals, the provider understood the need to review and comply with any associated conditions.
- Improvements were needed in the provider's approach towards completing and recording formal mental capacity assessments, to ensure the decisions under consideration were sufficiently clear. We discussed this with the registered manager who explained they were soon to receive additional support from the local authority in this regard.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same.

This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People felt staff treated them well. They used words like 'kind', 'gentle' and 'conscientious' to describe the staff who supported them. One person described a particular staff member as 'very special' as they had waited with them for three hours when they had been taken into hospital.
- We saw staff prioritised people's needs and requests, and took prompt action to ensure their safety and wellbeing.
- Staff took time to give people appropriate praise and encouragement. For example, the activities coordinator handed out 'cardboard stars' to celebrate people's contribution during the day's activities. People responded positively to this.
- Staff and management understood the need to promote equality and diversity through their work, and to consider people's protected characteristics. A staff member said, "They [provider] try their best to adapt to people's needs – both staff and residents."

Supporting people to express their views and be involved in making decisions about their care

- We saw staff had the time to listen to people and respond to their questions and requests.
- People were supported by staff who knew them well and who understood how to promote effective communication with each individual.
- Staff encouraged people to make choices about their day-to-day care, such as what they wanted to eat and drink or the activities they wanted to participate in.

Respecting and promoting people's privacy, dignity and independence

- Staff met people's intimate care needs with sensitivity to protect their dignity, and respected their need for privacy.
- People told us staff understood their need for independence. One person described how they enjoyed being able to go for a daily walk alone around the local area.
- Staff gave us several examples of how they prompted people's privacy and dignity on a day-to-day basis. One staff member said, "You make sure you give them [people] your full attention so they feel they are being listened to. You treat people like how you want to be treated yourself."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same.

This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People told us staff provided their care and support in a way that suited them, including the support they needed with washing and dressing themselves.
- People's care plans were individual to them and designed to ensure their needs and known preferences were met. Staff confirmed they read and referred back to these as needed.
- People had support and encouragement to participate in a range of social and recreational activities based around their interests and preferences. The activities on offer included fun exercise games, reminiscence sessions and memory games, arts and crafts and music-based activities. A number of trips to places of interest were planned for later in the year, based around people's feedback on where they wanted to visit.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People's individual communication needs had been assessed and staff were provided with guidance on how to promote effective communication with individuals.
- The provider assured us they had the facility to produce information in alternative accessible formats upon people's request.

Improving care quality in response to complaints or concerns

- People knew how to raise any concerns about their care.
- The provider had a complaints procedure to ensure all complaints received were dealt with fairly and consistently.

End of life care and support

- At the time of our inspection visit, there was no one receiving end of life care at the home.
- The provider had procedures in place to explore and record people's preferences and choices regarding their end of life care, in order that these could be addressed.

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 Good. At this inspection this key question has remained the same.

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

- People spoke positively about the overall quality of the care provided at the home. One person told us, "It's lovely here."
- We saw people and staff were at ease in the presence of the management team, who encouraged them to openly express their views.
- Staff spoke about their work with enthusiasm and felt their efforts were valued by the management team. They told us the management team were approachable and prepared to act on issues brought to their attention. One staff member said, "I would not hesitate in going to management you feel so comfortable with them all."

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 management team had a clear understanding of the need to be open and honest with people in the event something went wrong with their care, and to inform other relevant parties of these concerns where appropriate.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements

- The staff we spoke with were clear what was expected on them at work.
- The management team held weekly management meetings, and met with the staff on duty at the beginning of each week, to maintain a shared understanding of any quality issues or new risks at the home.

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

- The management team sought to engage effectively with people, their relatives and staff and to involve them in the service. People and staff spoke positively about their relationship with management, and staff praised the provider's inclusive approach.
- Residents' meetings were organised to involve people in decision-making that affected them, such as proposed changes to the home's menus and ideas for upcoming outings.
- Annual feedback surveys were distributed to people, their relatives and staff as a further means of

encouraging them to share their views on the service. The feedback received was analysed by the management team.

Continuous learning and improving care

- The provider had developed quality assurance systems and processes to enable them to monitor and improve the safety and quality of the service. These were based upon a programme of monthly audits focusing upon important aspects of the service, including care planning, the management of medicines, safeguarding, and activities provision.

Working in partnership with others

- The management team sought to work effectively with external professionals, teams and agencies to ensure good outcomes for people. A community professional described the positive working relationship they had developed with the registered manager.