

Whitby Court Limited

Whitby Court Care 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 well-led?

Good ●

Summary of findings

Overall summary

About the service

Whitby Court Care Home is a care home providing personal and nursing care to older people, some of whom were living with dementia. The home can accommodate up to 51 people. At the time of this inspection 46 people were using the service.

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

People told us they felt safe and well supported by caring staff. Staff followed clear policy and procedure to report any concerns for further investigation. Known risks for people had been assessed and were regularly reviewed with up-to-date information to help keep people safe.

Safe recruitment processes were followed to ensure suitable people were employed. Safe numbers of staff were on duty, and this was reviewed to ensure people's changing needs were met.

Staff treated people with respect and upheld their privacy and dignity. People received their support from regular staff whom they knew well.

Staff received appropriate induction, training, and support to carry out their roles. People were supported to take their medicines safely as prescribed, and staff followed good infection, prevention, and control practices.

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.

People provided their consent to, and were involved with, planning their care and support. People's preferences were recorded and wherever possible, staff supported people to maintain their independence. Staff had access to clear and concise care records which were up to date.

Staff were supported by an experienced registered manager who was passionate about providing people with the best care and support. The registered manager completed a range of audits and checks with provider oversight and input to ensure systems and processes remained effective and to identify any areas that could be improved.

Rating at last inspection and update

The last rating for this service was good (published 21 April 2022)

Why we inspected

The inspection was prompted in part by notification of an incident following which a person using the service died. The information shared with CQC about the incident indicated potential concerns about the

management of risk, associated with a failure by some staff to maintain accurate and contemporaneous records and the management and administration of people's medicines. This inspection examined those risks.

We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report.

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.

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

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Whitby Court Care Home on our website at www.cqc.org.uk.

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.

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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Whitby Court Care 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.

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

The inspection was completed by 1 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

Whitby Court Care 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. Whitby Court Care 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

This inspection was unannounced.

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority 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 all this information to plan our inspection.

During the inspection

We spoke with 3 people who used the service about their experience of the care provided.

We spoke with 6 members of staff including the registered manager. We reviewed a range of records. This included 4 care records, 4 staff files and records relating to the management of the service. We observed the medicines administration and management process including associated record keeping.

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. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were safe from the risks of abuse. A relative said, "It is a safe place and I have every confidence in their abilities to take care of [name]."
- Staff understood how to recognise and protect people from the risk of abuse and the requirement to raise their concerns for further investigation, to ensure people remained safe from abuse.
- Processes were in place to ensure information of concern was shared with the local authority safeguarding team.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risk assessments recorded up to date information to explain the risks for people and the actions for staff to take to reduce these. The registered manager said, "Care planning leads on from initial assessments of people's needs where we identify any risks we need to safely manage when providing care and support."
- Care records included information about people's medical conditions and information was available for staff to ensure they could react quickly where any concerns were evident. One staff member said, "We have access to electronic care records which are routinely updated."
- Management oversight of accidents and incidents was used to help implement actions to keep people safe from similar events. Outcomes included the organisation and implementation of supportive equipment. For example, to help people to continue to mobilise following a fall.

Staffing and recruitment

- The provider operated safe recruitment practices when employing new staff. Appropriate checks were completed to ensure staff were suitable for the role, which included checks with the Disclosure and Barring Service (DBS). DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- People and their relatives told us they received person-centred care and support from regular staff whom they knew. A relative said, "The staff gently encourage my relative to do things, but they are never forced. They have their independence, with support at hand when needed."
- The provider had contingency plans to ensure there were enough staff available to provide care and support to people, thereby reducing reliance on agency services.

Using medicines safely

- Where assessed, people received support from suitably trained and competent staff to take their medicines as prescribed. One person said, "The medication is all done well and on time. I know the drugs that I take so I would know if there was something wrong. They are very caring in that way. I've been unwell a

couple of times and their response has been immediate."

- Some people were prescribed creams and medicines to be taken on an 'as and when' basis. Information was in place to guide staff about how and when to administer these medicines following the provider's medicines policy.
- Staff had a clear understanding of safe medicines administration processes.
- Staff checks were completed to ensure medicines were managed and administered following best practice guidance.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
 - We were assured that the provider was supporting people living at the service to minimise the spread of infection.
 - We were assured that the provider was admitting people safely to the service.
 - We were assured that the provider was using PPE effectively and safely.
 - We were assured that the provider was responding effectively to risks and signs of infection.
 - We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
 - We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
 - We were assured that the provider's infection prevention and control policy was up to date.
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- There were no visiting restrictions at the time of the inspection. Staff understood the requirement to follow latest guidance, and wherever possible to facilitate visiting and interactions with people and their loved ones.

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 our last inspection we rated this key question good. The rating for this key question has remained 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

- Staff accessed required records to ensure care and support was effectively delivered to meet people's changing needs.
- The provider completed individual assessments with people to determine and meet their individual level of need. One person told us, "For the care plan they [staff] asked me lots of questions. I spoke to a social worker and the manager. It was very thorough."
- People were involved in planning and reviewing their care and support. A relative said, "During the first week of arriving we filled out pages of likes and dislikes. It was very detailed. It is 'as and when required', regarding reviews. I speak to the nurses on duty regularly so I'm up to date with everything."

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 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 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The manager and staff were aware of their responsibilities under the MCA.
- Where assessments recorded people did not have capacity under the MCA, required assessments, decision making, authorisation and reviews were in place.
- People told us staff discussed their needs all the time and always asked if they were happy to proceed prior to providing care and support.
- Staff understood the importance of offering people choice and to promote their independence. A relative said, "My relative has more freedom now than when he lived at home. He can leave his room whenever he likes and has plenty of space to wander. He still has life in him despite the dementia and he seems to be

thriving at Whitby Court."

Staff support: induction, training, skills, and experience

- New staff completed an induction programme to ensure they had enough knowledge and skills before providing people with support. New staff completed probationary review meetings to discuss their performance and any concerns.
- Staff received appropriate ongoing support, supervision, and training. One staff said, "We have good training, it adds value to our roles and helps us to provide the best care and support to people and meet any diverse needs."

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

- People received support to remain healthy. Where people required support to manage their weight, supportive measures were implemented. For example, weekly weights were recorded, and support was available from dieticians.
- A choice of meals was provided, and people appeared to enjoy the food on offer. Staff were available to provide support where needed.
- Snacks and drinks were offered throughout the day. A relative said, "My relative likes the food and has extra helpings. He wasn't able to understand the menu and they now give him a piece of paper which he can point at. They said he can have his breakfast whenever he wants as routine is very important. They're really flexible in that way. He always has a drink nearby when I see him, and they make sure he drinks. I think that has helped with the UTI's (Urinary tract infections)."

Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives, access healthcare services and support

- People told us, and records confirmed they had good support to access other health professionals where required. A relative said, "For any ailment they get a doctor in straightaway. There are chiropodists, dentists – they all visit."
- Staff clearly understood the required processes to ensure people received timely access to health professionals.
- The provider ensured that any external health advice was recorded as guidance for staff to follow.

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

- The home environment was modern and welcoming with good access to communal areas and outside garden areas.
- The service was home to some people with dementia. This area had been developed to make it interesting and accessible for people with dementia with further work planned. For example, with door numbering, signage, and areas to stimulate people's interest and to help reduce any confusion when navigating their way around.

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. The rating for this key question 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.

Managers and staff being clear about their roles, and understanding quality performance, risks, and regulatory requirements; continuous learning and improving care;

- People were assured of receiving safe care. Systems and processes were established to ensure detailed records of care were available with known risks reviewed to ensure support remained safe and effective.
- Quality assurance arrangements to help govern the home were effectively applied with outcomes used to maintain, and where required, improve standards.
- The registered manager was aware of their responsibility to notify the relevant authorities including the CQC of important events that happen in the service. For example, any safeguarding concerns and incidents.

Promoting a positive culture that is person-centred, open, inclusive, and empowering, which achieves good outcomes for people; engaging and involving people using the service, the public and staff, fully considering their equality characteristics;

- People received care from staff who understood their needs. Staff were clear on their roles and responsibilities, citing an effective management structure, direction, and support.
- Staff knew people they supported well. They understood the importance of supporting people equally in response to any personal preferences.
- People and their relatives were complimentary about management, staff, and the service they received. One person said, "I speak often to the manager, she is very easy to get along with. She is kind and caring; her deputies are just as good."
- People and their relatives were asked for their feedback about the service. They told us relatives' meetings were infrequent, but were confident any suggestions would be reviewed and, where possible, implemented.

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

- People were supported to raise any complaints or concerns.
- People were encouraged to participate in meetings and were routinely asked for their feedback. They told us if they needed to raise any concerns including complaints, they would be happy to speak with the registered manager.
- The registered manager followed policy to ensure that under the duty of candour, people received satisfactory outcomes including apologies where mistakes may have been made.

Working in partnership with others

- The service worked in partnership with a range of organisations including the local authority and health

professionals for the benefit of the service, people's health, and wellbeing.