

Bingley Wingfield Care Limited

Bingley Wingfield Nursing Home

Inspection report

Wingfield Court
off Priestley Road
Bingley
West Yorkshire
BD16 4TE

Tel: 01274567161
Website: www.bingley-wingfield.org

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Ratings

Overall rating for this service

Requires Improvement ●

Is the service safe?

Requires Improvement ●

Is the service well-led?

Requires Improvement ●

Summary of findings

Overall summary

About the service

Bingley Wingfield Nursing Home is a care home providing personal and nursing care to older people, some of whom may be living with dementia, mental health conditions and/or physical disability. The service accommodates up to 44 people in one adapted building. At the time of the inspection 27 people were using the service.

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

The management of risk had improved and risks to people were assessed and reviewed on a regular basis. We have made a recommendation about the management of thickeners.

Systems were now in place for the safe handling, administration and storage of medicines. People's individual choices and needs were considered when administering medicines.

Safe recruitment practices were now followed when employing new staff. Recruitment files were well organised and contained appropriate background checks. There were enough staff deployed to meet people's needs safely. However, we received mixed feedback from people and their relatives regarding staffing levels, particularly on evenings and weekends.

Systems were in place to safeguard people from abuse. Staff received training in safeguarding and were able to demonstrate a good understanding of safeguarding people from abuse. People told us they felt safe. Infection control measures were in place.

At the time of our inspection, a new home manager had recently been appointed and staff spoke positively of the support they received from management. Systems were in place to obtain feedback from people and staff, which was used to improve the quality of the service.

Quality oversight had improved at this inspection. The provider had implemented systems of audit, to assess, monitor and improve the quality of care. We found actions for improvement were being identified and completed in a timely manner. The service worked effectively in partnership with other agencies, to ensure good outcomes for people.

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.

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

Rating at last inspection and update

The last rating for this service was inadequate (published 7 January 2022) and there were 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.

This service has been in Special Measures since 14 May 2021. During this inspection the provider demonstrated that improvements have been made. The service is no longer rated as inadequate overall or in any of the key questions. Therefore, this service is no longer in Special Measures.

Why we inspected

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.

We carried out an unannounced focused inspection of this service on 9 November 2021. Breaches of legal requirements were found in relation to safe care and treatment, good governance and fit and proper persons employed. The provider completed an action plan after the last inspection to show what they would do and by when to improve.

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 Well-led which contain those requirements.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from inadequate to requires improvement. 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 Bingley Wingfield Nursing 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?

The service was not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-Led findings below.

Requires Improvement ●

Bingley Wingfield 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.

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 three inspectors, including 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.

Service and service type

Bingley Wingfield 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. Bingley Wingfield 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 service is required to have a registered manager. A registered manager is a person who has registered with the CQC to manage the service. 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.

At the time of our inspection the manager had begun their application to register with CQC.

Notice of inspection

This inspection was unannounced.

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, the local 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 (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 used all this information to plan our inspection.

During the inspection

We spoke with four people who used the service and two relatives about their experience of the care provided. We spoke with seven members of staff including the provider, registered manager, nurse, senior care worker and care workers.

We reviewed a range of records. This included five people's care records and multiple medication records. We looked at three staff files in relation to recruitment. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

After the inspection

We continued to seek clarification from the provider and registered 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 inadequate. At this inspection the rating has changed to requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to ensure robust systems were in place to demonstrate risks to health and safety 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.

At our last inspection the provider had failed to maintain accurate and complete care records for people who used the service. 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 regulations 12 and 17.

- Overall, there had been improvements in the management of risks to people's health, safety, and welfare. However, the provider had not identified issues regarding the administration of one person's thickener.

We recommend the provider reviews their systems and processes for the management of thickeners and updates their practices accordingly.

The manager responded immediately during and after the inspection. They confirmed they would provide additional support and guidance regarding the administration of thickeners.

- Risks to people were assessed, with guidance for staff to follow on how to meet their needs safely.
- Systems were in place to ensure staff understood risks in the home. Daily handovers took place to ensure any concerns were shared with the staff, so that risks could be monitored and managed appropriately.
- Regular checks of the building and equipment were carried out, and the necessary health and safety certificates were in place for the premises and the equipment being used.

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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty.
- Care records demonstrated that where required, people's capacity to consent to their care had been assessed and best interest decisions were made.

Preventing and controlling infection

At our last inspection the provider had failed to ensure systems were in place to demonstrate infection prevention and control measures were effectively managed. This was a breach of regulation 12 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.

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- 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 accessing testing for people using the service and staff.
- 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.

Visiting in care homes

The provider was facilitating visits in line with government guidance and had a suitable system in place to support people to maintain important relationships with their relatives and friends.

Using medicines safely

At our last inspection the provider had failed to ensure medicine management systems were safe. This was a breach of regulation 12 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.

- Systems were in place for the safe handling, administration and storage of medicines.
- People's individual choices and needs were considered when administering medicines. There was individualised written guidance about the use of 'when required' medicines. Arrangements were also in place to help ensure that medicines patches were applied correctly.
- Additional records were in place to ensure that time specific medicines were given correctly. These arrangements had not yet been extended to include medicines with a minimum dose interval, such as paracetamol. We raised this during the inspection in order that it could be promptly addressed.

Staffing and recruitment

At our last inspection systems were not in place to ensure staff were recruited safely. This was a breach of regulation 19 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 19.

- Staff were recruited safely. Staff personnel records contained appropriate background checks, to ensure new members of staff were suitable to work with vulnerable people.
- There were enough staff deployed to meet people's needs. Staff told us there were enough staff to enable them to carry out their roles safely. However, we received mixed feedback from people regarding staffing levels. Some people and their relatives told us there were occasions when they had to wait for support, such as during evenings and weekends.
- The provider used a dependency tool to ensure there was a safe number of staff and had arrangements in place to cover shifts in the event of absence or sickness.

Systems and processes to safeguard people from the risk of abuse

- The provider had appropriate systems and processes in place to safeguard people from the risk of abuse.
- Staff received training on how to safeguard adults from abuse and they were able to identify different types of abuse. Staff were aware of their responsibilities to report abuse and felt confident in doing so.
- People largely felt safe living at the home. One person told us, "It's fantastic. I feel safe." One person told us they now felt safe, as they had previously raised concerns about other people going into their bedroom with the provider, which had been addressed.
- Where incidents had occurred, referrals had been made to the appropriate agencies, such as the local authority and CQC.

Learning lessons when things go wrong

- The provider had suitable systems in place to learn from any accidents or incidents. Staff knew when and how to report accidents or incidents, which resulted in appropriate action being taken.
- Accidents and incidents were recorded and responded to appropriately. The provider analysed all accidents and incidents on a monthly basis, to try and identify any themes or trends and make continuous improvements to the service.

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 inadequate. At this inspection the rating has changed to requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of high-quality, person-centred care.

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

At our last inspection we found governance systems to assess, monitor and improve the service were not sufficiently robust. 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.

- Overall, the provider had made improvements to their governance systems; however, further improvements were needed to ensure these were comprehensive and robust. Inconsistencies in the administration of one person's thickener had not been identified.
- Since the last inspection, the provider had implemented a system of monthly audits. An action plan was used to monitor completion of areas identified for improvement, which were addressed in a timely manner. The home manager also completed daily checks on the quality of care and safety of the service. These systems helped assess the quality of the service and identify any areas for improvement, which they then acted upon.
- The duty of candour requirement to be open and honest in respect of certain events had been complied with by the provider. The provider had appropriately submitted notifications to the CQC.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

At our last inspection we found governance systems to assess, monitor and improve the service were not sufficiently robust. 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.

- We found the culture within the home was positive, welcoming and inclusive.

- The service had recently appointed a new home manager, who had only been in post for several weeks. Staff spoke positively about the home manager and the support they received. Comments included, "[The manager] is brilliant, they have only been in post a few weeks, but they are supportive. They are always there, even when they are not working, they always respond if we need something" and "We work together and there is team spirit, we get all the help you could need from the manager."
- Staff were motivated in their roles and said they felt confident in raising concerns and that the culture of the service was positive and open. One staff member told us, "I can turn to any member of staff at any time, they will always help me. It is a great place to work and all the staff are really friendly."
- We observed patient, kind and caring interactions between people and staff, who were mindful of people's individual needs. On the day of our inspection, there was a comprehensive activity programme taking place, which people were engaged in. The activities co-ordinator knew people well and was motivated in their role to enrich the experience of the people living at the service.

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

- The provider engaged with people and their relatives through a combination of meetings and regular reviews. They also met with people on a monthly basis to obtain feedback about their individual experience of living at the service and ways to improve the service.
- Staff were able to provide feedback through supervision sessions and team meetings and consistently told us they felt well supported by the manager and their colleagues. There was a clear emphasis on team working and supporting each other.
- The provider had established good links with the local community. For example, they had recently held a garden party and invited local children to celebrate the Queen's jubilee with people living at the service.
- The provider had effective systems in place to support people to access other services when this would benefit their health and wellbeing, such as; the GP, chiropodist, speech and language therapists.

Continuous learning and improving care

- The provider maintained oversight of the home and attended regularly, to undertake their own checks on the quality of care, in order to provide support to the service and drive improvements. This included a monthly review of areas, such as; accidents and incidents, safeguarding, training, environment and safety checks.