

Mr & Mrs G Kirk

Wisteria House Residential Home - Rutland

Inspection report

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Tel: 01572822313

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Ratings

Overall rating for this service

Good 

Is the service safe?

Requires Improvement 

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: Wisteria House is a residential care home that was providing personal care and accommodation to 17 people aged 65 and over at the time of the inspection.

People's experience of using this service:

Staff did not always follow good practice techniques to support people to mobilise in a safe manner. They had not taken steps to assess the risk associated with these techniques.

There was sufficient numbers of staff on duty to meet people's needs in a timely manner. The provider made relevant checks to ensure they employed staff who were safe to work with vulnerable adults. Staff understood their responsibilities to report any concerns they may have about people's safety.

The service had safe protocols in place for managing and administering people's medicines. Staff had the relevant training and experience they require to fulfil their role. They provided care that was effective in meeting the needs of people who used the service.

People's nutritional were met. They had timely access to health care services when they required this. Staff made prompt referral and worked with other professionals to maintain consistent care to people where needed.

People were supported according to relevant guidance and legislation. People's liberty was not restricted unlawfully. The environment met people's needs and provided spaces for privacy and relaxation.

Staff were kind and compassionate to people. They supported people in a manner that promoted their dignity and independence. People were involved in decision about their care.

People received support that was tailored to their individual needs. Their care plans were reviewed regularly to reflect their current needs. They had various opportunities to engage in activities of interest. They were supported to maintain their personal and social networks.

The registered manager provided good leadership within the home. They were supported by a deputy manager. The home had an open culture where communication was effective and support easily accessed when required. They worked collaboratively with the local authority and other relevant organisations.

The service met characteristics of Good; more information is in the full report.

Rating at last inspection: Requires Improvement; published 03 April 2018.

At the last inspection in February 2018 we found two breaches of the Health and Social Care Act 2008 (Regulated activities) Regulations 2014. At this inspection we found the provider had implemented the

necessary improvements. We found evidence to demonstrate and support the overall rating of Good. The service was no longer in breach of the Health and Social Care Act 2008 (Regulated activities) Regulations 2014.

Why we inspected: This was scheduled inspection based on previous rating.

Follow up: ongoing monitoring; we will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, 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?

The service was not always safe

Details are in our Safe findings below.

Requires Improvement 

Is the service effective?

The service was effective

Details are in our Effective findings below.

Good 

Is the service caring?

The service was caring

Details are in our Caring findings below.

Good 

Is the service responsive?

The service was responsive

Details are in our Responsive findings below.

Good 

Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good 

Wisteria House Residential Home - Rutland

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection was carried out by an inspector and an assistant inspector.

Service and service type:

Wisteria House Residential Home – Rutland is a 'care home'. People in care homes receive accommodation and nursing or personal care. 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 inspection was unannounced.

What we did:

Before inspection: We reviewed information we held about the service. This include notification and provider information return (PIR). Notifications are information on important events that happen in the home that the provider must let us know about. PIR is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report.

During inspection: We spoke with four people that used the service, three visiting friends and family, the local vicar, three members of staff, the deputy manager and the registered manager. We reviewed the care records of three people who used the service, staff records, incidents and accidents records, complaints records and other records relating to the management of the service.

After the inspection, the registered manager sent us additional information we requested at our visit.

Is the service safe?

Our findings

We have inspected this key question to follow up the concerns found during our previous inspection on 28 February 2018. At that inspection we found the provider did not adequately assess all the health and safety risks of service users associated with the environment and did not do all that is reasonably practicable to mitigate any such risks. This meant this was a breach of the Health and Social Care Act 2008 (Regulated Activities) 2014; Regulation 12 (2)(a)(b).

At this inspection we saw improvements had been made. The provider was no longer in breach of the Health and Social Care Act 2008 (Regulated Activities) 2014 Regulations.

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

Requires Improvement: □ 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.

Systems and processes to safeguard people from the risk of abuse; Assessing risk, safety monitoring and management

- On the day of our inspection, we observed the care staff team used techniques which were considered unsafe when supporting people with their mobility needs. We brought this to the attention of the registered manager, who told us they followed techniques preferred by people. We saw there were no records to show the risks associated with these mobilising techniques had been assessed and explained to people. This meant people did not have the information to make decisions about such risks and to safely mobilise.
- Staff had good knowledge of what would constitute abuse to people. They knew how to report any concerns they may have using the provider's safeguarding protocols. They also knew other agencies they could report concerns to.
- Staff had good knowledge of the provider's protocols to keep people safe in the event of an emergency. This included application of the provider's procedures for evacuating people in the event of a incidents such as fire.
- The provider had made improvements to the environment. They completed regular checks to ensure the home remained safe for people that lived at Wisteria House.

Staffing and recruitment

- There were sufficient numbers of staff to meet people's needs. People told us staff attended to them in a timely manner. One person told us that when they called staff attention by pressing their call bell, "They [staff] are here in seconds." They told us this applied for both day and night staff.
- The home did not use temporary staff. The registered manager or deputy manager provided care support to cover any staff absences. Staff told us the staffing arrangements at the service were sufficient to allow them meet people's needs in a personalised and unrushed manner.
- The provider followed safe practices when they employed new staff. We reviewed records which showed they completed relevant pre-employment checks. These checks assured them the employees were safe to work with vulnerable adults.

Using medicines safely

- People's medicines were managed and administered safely. Staff followed safe practices to store medicines. They had sufficient stock of the medicines people required.
- When staff administered medicines, they followed safe practices which assured them they had provided the support people required to take their medicines. Staff ensured they had finished supporting an individual and completed their medicine records before they proceeded to support another person with their medicine.
- We reviewed people's medicine administration records (MAR) which showed staff consistently followed the provider's protocols on recording the support people received with their medicines. The deputy manager or registered manager regularly audited people's MAR to ensure the management of people's medicines were safe.

Preventing and controlling infection

- The premises was clean and the service had systems in place to maintain high standards of hygiene.
- Staff used personal protective equipment when they carried out relevant tasks. This practice minimized the risk of an infection spreading.

Learning lessons when things go wrong

- Incidents and accidents were managed well. The service had a clear system for recording action staff had taken following an incident. The information recorded included measures staff could take to minimise the risk of an incident reoccurring. For example, there was a record which suggested the use of a pressure mat to monitor and support a person following a fall.
- We saw the provider and registered manager had made improvements to the service to rectify the issues identified in the previous CQC inspection report for the service. These showed they used events at the service as a tool to improve the quality of care people received.

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

Good: 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

- The registered manager assessed people's needs before they came to live at Wisteria House. Their assessments identified support they required to maintain various aspects of the life. People and their family were fully involved in the assessment of their needs. Information from their assessment was used in planning their care and in the regular reviews of the care they received.

Staff support: induction, training, skills and experience

- Staff were equipped with the skills and information they needed to fulfil their role. They had access to required training. The service employed a part time training provider. Training records showed staff had received relevant training or there were plans in place for them to complete required training.
- Staff described their training as effective in supporting them to provide a good quality of care. Some comments we received about the training included, "Very good" and "Continuous".
- People and their relatives were confident in the skills of staff to care for them. A relative said, "[Person] has dementia, and if anything it [dementia] has improved because of the quality of the care they receive." They said this was due to staff skills in providing appropriate support and stimulation the person required.
- Staff had access to regular supervision with their manager. They told us they found this effective as it also gave them opportunity to receive feedback on their performance.

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

- People had access to a variety of meals and drinks. Through the day we observed that staff regularly offered people drinks of their choice.
- People told us they enjoyed their meals. Meals were catered to people's choice. One person said, "They[staff] let me have whatever I want." People were supported to have meals with their visiting family and friends.
- Staff had good knowledge of people's dietary needs. They provided the support people needed with respect to their dietary and nutritional requirements.

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

- The design and layout of Wisteria House met the needs of the people who lived there. The home consisted of a main building and an annex called the coach house. Each area was equipped to meet people's needs and promote their independence.
- People told us they had the use of various spaces within the home for privacy and relaxation. One person said, "There is somewhere we can go to get out of our rooms." A visitor told us, "The care and environment is lovely. There are lots of lovely little spaces. You don't have to go to your room for privacy."

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

- People's records showed staff promptly referred them to healthcare services when required. They supported them to visit or be visited by health care professionals. A visiting relative said, "When there was a slight problem, they were straight onto the doctor."
- Staff supported people to manage their health. They provided the support people needed with monitoring their health conditions. For example, they supported people living with conditions such as diabetes to monitor and maintain their blood sugar. Staff maintained up to date records of the information required to provide the necessary health support people required.

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 with appropriate legal authority. 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 any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- Only one person was deprived of their liberty at Wisteria House. We saw that staff followed conditions as stated by their DoLS authorisation.
- People's records and our observation of staff practice showed that staff sought and obtained the consent of people receiving care before they provided support or made any changes to their care.

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

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- Staff were kind and compassionate when they supported people. We observed several examples of caring and friendly interactions between staff and people that lived at Wisteria House. A care staff told us they enjoyed their job and described working at Wisteria House as "Like visiting your grandparents house." Another said, "The residents are so well looked after, every need is taken care of." Staff took steps to enhance their interactions with people through touch and altering the tone of their voice.
- People told us they were well cared for at Wisteria House. They gave us several positive examples of why they enjoyed their time at the home. Some of their comments included, "It is lovely to live here. I couldn't want anything better." Another said, "If I could say excellent plus plus I would. I cannot say any better. It is fantastic." A visitor said, "The care for [person] is exemplary." The local vicar said, "It is great. It is the place people want to come to. They also went on to say some of the ways staff went the extra mile to demonstrate their caring attitudes towards people that used the service.
- People told us staff took their time when they provided support to them. One person said, "They [staff] don't rush me [when providing care]."
- People told us there was an all staff approach to meeting their needs and requests. For example, they told us the maintenance staff quickly responded to any request they made for odd jobs. A relative told us. "They work as part of a team, it is lovely to see there is a team looking after [person] - from the kitchen to the cleaning everybody has a team approach to looking after them."

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

- People had access to an advocacy service should they require this. Advocacy services support people with their rights and to express their wishes. At the time of our inspection none of the people that used the service used an advocate.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. Staff demonstrated they supported people in a way that promoted their dignity. They addressed people in a friendly and respectful manner. They offered people choices and respected their choices.

Is the service responsive?

Our findings

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

Good: People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People's care plans reflected their needs and how their needs would be met. It guided staff on how to support people according to their choices and preferences. Staff had a good knowledge of people's individual needs and preferences.
- Records showed staff reviewed people's care plans regularly. This meant care plans reflected people's current needs.
- We made recommendations to the registered manager to improve people's care plans in order to reflect people's personal history. People's care was not impacted by this as staff knew people well, the home did not use temporary staff and most staff had long service history at the home.
- Staff supported people to follow their interests. There were a variety of opportunities for people to engage in activities that mattered to them. This included activities within the home and in the local community. They also supported people to attend events and maintain relationships with the social networks they had when they lived in the community. A visitor said, "They [staff] allow [person] to do things they did before they came here."
- People were also supported to maintain relationships with their loved ones. There were no restrictions on family and friends visiting people. Staff made provisions for people to have snacks or meals with their visitors. They also supported people to remember and engage in celebrating events in their own family. For example, sending birthday cards to family. A relative told us, "[Person] had been in other homes, and this is outstanding compared to them. I feel very supported by the staff. They look after [person] very well and they look after me too."
- The care and support people received was tailored to their individual needs. The staff were flexible in how they delivered support, taking into consideration people's choices and giving them control over their care.

Improving care quality in response to complaints or concerns

- The provider had effective systems in place for managing complaints. Complaints were recorded, investigated and responded to.
- People we spoke with told us they had not had any reason to raise a complaint. They told us they raised any issues informally with staff or the registered manager. They told us the registered manager resolved any concerns they discussed. Staff were confident any concerns or complaints they raised would be dealt with satisfactorily.

End of life care and support

- People's care plans reflected their wishes on how they want to be cared for at the end of their life. The provider had a policy in place which stated the care and support people and their relatives could expect to receive towards the end of person's life.

Is the service well-led?

Our findings

We have inspected this key question to follow up the concerns found during our previous inspection on 28 February 2018. At that inspection we found the provider had not ensured there were always sufficient processes in place to assess, monitor and improve the health and safety of service users. This meant this was a breach of the Health and Social Care Act 2008 (Regulated Activities) 2014; Regulation 17 (2b).

At this inspection we saw improvements had been made. The provider was no longer in breach of the Health and Social Care Act 2008 (Regulated Activities) 2014 Regulations.

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

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- Staff praised the support they received from the registered manager. They told us there was an open culture where they had easy access to the managers for guidance and support when required. A staff member said, "They [managers] are very supportive."
- The home had a detailed business continuity plan. This meant people could be assured they would continue to receive care and support in the event of an emergency occurring.
- The registered manager told us the provider supported them very well in their role. They said, "[The provider] is brilliant, provides anything we want."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Working in partnership with others

- There was a registered manager in post who understood the regulatory responsibilities of notifying CQC of relevant events at the service. People and staff told us the registered manager provided the leadership and support they required.
- We reviewed records dated in March 2019 which showed the service worked within the expectation of their local authority who regularly monitored the service. They stated the registered manager was responsive at working with the local authority.

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

- The registered manager took steps to involve the people who used the service and the staff team on how the service was run and how best to meet people's needs. We reviewed records of meetings such as staff meetings and saw they listened to staff suggestions. For example, we saw the use of communications books to share information was implemented following a staff meeting. Staff we spoke with told us they found the communications book very effective.

- We saw people were engaged in making crafts for the upcoming events at the home. They spoke excitedly about their coming summer event and other social events people were involved in. This also supported the home to maintain links with the local community.
- The registered manager had systems in place to collect and collate feedback about the service. They did this through informal conversations, surveys and questionnaires. We reviewed details of the April 2019 relatives and residents questionnaires. We saw that the feedback was positive, and people spoke highly of the service they received. Following people's feedback, the managers identified areas of the service where they could further improve.

Continuous learning and improving care

- The registered manager and staff team improved the service following issues identified at their previous CQC inspection. At this inspection, they took immediate actions to make improvements regarding an issue we highlighted to make a person's bedroom safer.
- They also managed incidents and accidents well. They used this to improve the care people received.
- The registered manager used a monthly reward and recognition to encourage high performance from staff.
- The registered manager had systems in place to check and assure themselves that people received a good quality of care.