

Wellburn Care Homes Limited

# St Catherine's Care Home

## Inspection report

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## Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

### About the service

St Catherine's Care Home is a residential care home providing personal and nursing care to 26 people aged 65 and over at the time of the inspection. The service can support up to 55 people in one adapted building.

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

People benefitted from improvements in the safety of the service and were protected from abuse and avoidable harm. There were enough staff to care for people safely and people gave positive feedback about staff. Staff administered people's medicines on time and as prescribed and referred people to other healthcare services when necessary.

Improvements had been made to the provider's quality assurance systems. Managers carried out regular audits and checks which identified potential concerns and areas for improvement.

The provider had appointed a new manager who took a proactive approach to driving improvements in the service. The manager was a visible presence in the home and we received positive feedback from staff, relatives and professionals working with them.

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](http://www.cqc.org.uk)

### Rating at last inspection and update

The last rating for this service was requires improvement (published 10 October 2019). 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.

### Why we inspected

The inspection was prompted in part due to the intelligence we held about potential risks to people's safety. A decision was made for us to carry out this focused inspection and examine those risks.

This report only covers our findings in relation to the key questions, safe and well-led. The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for St Catherine's Care Home on our website at [www.cqc.org.uk](http://www.cqc.org.uk).

#### 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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# St Catherine's 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 Care Act 2014.

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 two inspectors.

#### Service and service type

St Catherine's Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 was in the process of registering a manager with the CQC. 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

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 and professionals who work with the service. The provider was not asked to complete a 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. We used all of this information to plan our inspection.

#### During the inspection

We spoke with two people who used the service and two relatives about their experience of the care provided. We spoke with 11 members of staff including the registered manager, deputy manager, two senior care workers, care workers and maintenance and housekeeping leads. We also spoke with a visiting healthcare professional. We observed care and interactions between people and staff to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and records relating to the employment of agency staff. We also reviewed a variety of records relating to the maintenance of the premises.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at a range of records relating to the management of the service including training data, quality assurance records and policies and procedures.

# 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 requires improvement. At this inspection this key question has now improved to good. This meant people were safe and protected from avoidable harm.

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

At our last inspection systems were either not in place or robust enough to demonstrate safety was effectively managed. This was a breach of regulation 12 (Safe Care and Treatment) 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.

- Staff had assessed and managed risks relating to the health and safety of people who used the service. Improvements had been made to the monitoring of people's food and fluid intake, to prevent people from becoming dehydrated or malnourished.
- Staff protected people from the risk of developing pressure ulcers. People had access to specialist equipment and staff supported them appropriately to follow specialist advice.
- Staff kept people safe by using their skills and knowledge of people to tailor their approach in challenging situations. The manager told us additional training was planned for staff in supporting people living with dementia.
- Staff identified changes in people's needs and made appropriate referrals to other healthcare professionals. The manager monitored changes to people's health to ensure they continued to get the right care.
- Appropriately trained staff carried out regular checks of the premises and equipment to ensure they remained safe.
- The manager thoroughly investigated safety related incidents and identified actions to prevent reoccurrence. They shared learning with staff and analysed themes and trends to drive improvements in the safety of the service.

Using medicines safely

At our last inspection systems were either not in place or robust enough to demonstrate medicines were safely managed. This was a further breach of regulation 12 (Safe Care and Treatment) 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.

- Staff administered people's medicines on time and as prescribed. Staff kept accurate medicines records

and stored and disposed of medicines appropriately. Managers assessed the competency of staff administering medicines.

- Staff had clear guidance about when to administer 'as required' medicines, such as pain relief. The manager monitored the use of 'as required' medicines and made referrals for medicines reviews where necessary.
- Staff followed guidance provided by the GP and pharmacist when administering medicines without people's knowledge or consent. They did this in line with legal requirements to protect people with limited capacity to make decisions about their own care.
- The deputy manager carried out regular medicines audits to ensure good practice standards.

#### Staffing and recruitment

- There were enough staff to care for people safely.
- The manager took a systematic approach to calculating the number of staff needed to care for people during the day and at night. They had considered the deployment of staff across the service to best support people.
- Improvements had been made to the recruitment of staff, including carrying out necessary pre-employment checks.
- Regular agency staff were used to cover staff absence and vacancies. Agency staff completed an induction prior to working at the home. Checks were carried out to ensure they were suitable and had the right skills to care for people.

#### Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from the risk of abuse and ill-treatment.
- Staff had received training in this area and the manager reminded staff of their responsibilities at staff meetings. One staff member told us they had found the training useful and would report poor care to their line manager.
- The manager knew to follow local safeguarding procedures and dealt with matters in an open and transparent way.

#### 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 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.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.



# 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 requires improvement. At this inspection this key question has now improved to 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; 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 Systems were either not in place or robust enough to demonstrate safety and quality was effectively managed. 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.

- Staff and managers had carried out checks and audits of the safety and quality of the service and made improvements to how risk was managed. A recent audit had prompted action to provide physical activities as a way of reducing falls.
- The provider had appointed a new manager who took a proactive approach to driving improvements in the service. The manager planned to centralised audits to ensure they had complete oversight of the running of the service.
- Staff were clear about their roles and responsibilities and received regular supervision and attended staff meetings. The manager held daily meetings with key members of staff working across the service.
- The manager had made improvements to how safety related incidents were investigated and had a strong focus on continuous learning. They told us it was their ambition to run a safe and transparent service.

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

- The atmosphere in the service was warm and welcoming and people benefitted from a compassionate and caring team of staff. A staff member told us they enjoyed working at the service and that staff worked well together. One person told us St Catherine's Care Home was a "nice place to be" and another person described the staff as "brilliant."
- The manager demonstrated a vision for providing high-quality, safe care and was a visible presence in the home. Staff described them as approachable and told us they felt well-supported.

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

characteristics; Working in partnership with others

- The service had strong links with other healthcare services and staff supported people to access these. We received positive feedback from a visiting healthcare professional about the care people received.
- Managers demonstrated an openness and met with people using the service to gain their views about the service. Relatives told us they were confident in the new manager and that any concerns they had would be addressed.