

Care Homes UK Ltd

# Victoria House

## Inspection report

2 Nostell Lane  
Ryhill  
Wakefield  
West Yorkshire  
WF4 2DB

Tel: 01226727179

Date of inspection visit:  
23 April 2019  
29 April 2019

Date of publication:  
10 June 2019

## Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

**Requires Improvement** 

Is the service effective?

**Requires Improvement** 

Is the service caring?

**Good** 

Is the service responsive?

**Good** 

Is the service well-led?

**Good** 

# Summary of findings

## Overall summary

About the service: Victoria House is a nursing and residential care home that was providing personal and nursing care to 29 older people.

People's experience of using this service:

People felt safe and staff used health and safety equipment safely. People had risk assessments although information about risks to people was not always comprehensive. There were enough staff to keep people safe, but the staffing arrangements did not always provide sufficient time for staff to give person centred care. Medicines were managed safely. Staff followed infection control procedures and received infection control and food hygiene training.

Staff had the skills and knowledge to deliver care effectively and they received good support from the team and the registered manager. Systems were in place to make sure people's health and nutritional needs were met. People were comfortable in their environment; the provider was improving the décor.

At the last inspection the provider was not supporting people to have maximum choice and control of their lives. At this inspection they had improved how they supported people to have maximum choice and control, but further improvements were required. The policies and systems in the service required further development to support this practice.

People who used the service, family and friends, without exception, provided positive feedback about the service and were complimentary about staff and management. Other professionals told us the service was caring.

The provider was introducing a new electronic care recording system. The transition had created some difficulties which resulted variable care plans. The registered manager was looking at ways of involving people more in the care planning process. People engaged in one to one and group social and leisure activities. During the inspection 'Friends of Victoria House' were holding a coffee morning. This was a pleasant and lively atmosphere, and well attended.

Feedback about the registered manager was consistently good. People who used the service and visiting relatives and friends told us they would recommend the service to others.

Quality management systems were in place but these were not always effective because they did not always drive improvement. The provider had not identified some of the issues picked up during our inspection. The registered manager was responsive and where appropriate, took swift action to address shortfalls. They were keen to develop and improve their quality management systems and provide people with consistently high quality care.

Rating at last inspection: Requires improvement. The report was published on 28 April 2018.

Why we inspected: This was a planned inspection based on the rating at the last inspection.

Follow up: We will continue to review intelligence about the service and visit again within our recommended return inspection timescales. If any concerning information is received we may inspect sooner.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

## 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 not always effective

Details are in our Effective findings below.

**Requires Improvement** ●

### 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** ●

# Victoria House

## 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:

On 23 April 2019, the inspection team consisted of two inspectors 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. On 29 April 2019, two inspectors carried out the inspection.

#### Service and service type:

Victoria House 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. Victoria House can accommodate up to 30 people.

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:

This inspection was unannounced.

#### What we did:

We reviewed information we had received about the service since the last inspection. We asked for feedback from other agencies such as the local authority. Providers are required to send us key information about their service, what they do well, and improvements they plan to make. This is called a Provider Information Return (PIR) and helps support our inspections. They sent us this information in March 2019.

During the inspection we spoke with eight people using the service, 14 visiting relatives and friends, three

visiting health professionals, eight members of staff and the registered manager. We looked around the service and observed how people were being cared for and supported during meal times.

We reviewed a range of records. These included four people's care records, three staff files, records of accidents and incidents, a training matrix, audits and other records relating to the management of the service.

# Is the service safe?

## Our findings

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

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

- People's safety was risk assessed and managed although records varied in detail. Risk assessments identified what actions to take to minimise risks although some did not fully explain these. For example, one person was identified as at heightened risk of infection, but the assessment did not say what signs and symptoms would indicate infection. There was no information to show this had led to harm.
- Some charts for monitoring risk were not fully completed such as fluid intake.
- A new care recording electronic system had recently been introduced and some information was still being transferred. The registered manager said monitoring records and risk assessments would be comprehensive by the end of June 2019 when the transition of records would be completed.
- Staff understood how to provide care safely to people and knew how to use specialist equipment which helped keep everyone safe. One person said, "Carers are all brilliant. I can't fault them. They all understand my special equipment and help me to use it."
- Certificates and records confirmed checks had been carried out to make sure equipment and the premises were safe.

### Staffing and recruitment

- There were enough staff to keep people safe. However, some routines did not appear to be person centred. For example, staff told us people who were nursed in bed received a bed bath very early in the morning. The registered manager agreed to review the staffing arrangements and use a formal tool to assess staffing levels.
- Other people told us they received support when they needed it. One person said, "Carers respond quickly when I press the call button." Another person said, "Staff are excellent and are always available." A visiting health professional said, "If people are buzzing staff are there."
- The service had a low turnover of staff, and many members of the team had worked at Victoria House for many years. This meant staff knew people well and were familiar with their routines.
- Staff responded to requests for support and did so in a positive way.
- Recruitment checks were carried out before staff started work to make sure they were suitable. Some candidates had not provided a full employment history and this had been discussed during their interview. However, records did not always confirm gaps had been fully explored so the registered manager agreed that future records would be more detailed to demonstrate a full history.

### Preventing and controlling infection

- Systems were in place to prevent and control infection.
- The service was clean and there were no odours.

- Equipment for preventing the spread of infection, such as disposable gloves and appropriate handwashing facilities were available throughout.
- Staff followed infection control procedures by wearing appropriate protective clothing and received infection control and food hygiene training.
- Several people used hoisting equipment to move and transfer. The service had a variety of slings which were used with hoists and stand aids. People's risk assessments identified the type of sling to use which made sure people were moved safely. However, people did not have their own sling. Good practice guidance for the prevention and control of infections recommends that 'slings should be laundered in hottest wash cycle allowable according to the manufacturers' instructions and not shared between residents.' The registered manager agreed to review their arrangements and allocate individual slings.

#### Using medicines safely

- Medicines were managed consistently and safely.
- People's medication administration records confirmed they received their medicines as prescribed. People had protocols to guide staff around administration which ensured medicines were administered in a way that met people's individual needs and preferences.
- Medicines were stored appropriately and regular checks were carried out to make sure storage met the recommended temperatures.
- Staff responsible for administering medicines had completed medicines training and their competency had been assessed to ensure they practiced safely.

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

- People were safeguarded from abuse, neglect and discrimination.
- Everyone spoken with during the inspection felt people were safe. One person who used the service said, "I feel safe here." A visiting relative said, "There is a very safe and happy atmosphere here." A visiting professional told us, "When I am in need of a safe place to which a patient can be safely referred this home is one of my "go-to" places."
- Staff received safeguarding training and knew what to do to protect people. They were confident the management team would respond appropriately to concerns raised and act promptly.
- Records and notifications submitted to CQC showed the provider had responded appropriately to allegations of abuse, accidents and incidents.
- Information about safeguarding was displayed in the home, which helped ensure people knew how to stay safe and report any concerns.

#### Learning lessons when things go wrong

- Accident and incidents were recorded and showed action was taken to reduce the risk of repeat events.
- All accident and incident reports were monitored by the registered manager to determine if there were any lessons to be learned.



# 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

The effectiveness of people's care, treatment and support did not always achieve good outcomes or was inconsistent.

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.

At the last inspection the provider was not meeting legal requirements as required under the MCA. At this inspection there was still areas to improve around supporting people who lacked capacity, but the provider was no longer in breach of this regulation.

- Assessments of people's mental capacity were completed although some were not decision specific. The registered manager said they were reviewing this process as records were being transferred to the electronic system.
- Best interests' decisions were recorded, but these did not always show who else had been involved in the decision making process.
- DoLS applications were made where appropriate although some improvements were needed in relation to the overview of DoLS management. The registered manager sent a plan after the inspection visit which showed this was being addressed.

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

- The provider had recently introduced an electronic care recording system; a standard care planning and risk assessment format was used when assessing and identifying people's needs
- People's needs were assessed before they moved into the service although a recent assessment contained limited detail about the person's needs and wishes. The registered manager said future assessments would be more comprehensive.

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

- People were comfortable in their environment although the premises were not designed in an accessible way.

- None of the accommodation rooms were en-suite. The service had two bathrooms; one on the ground floor and one on the first floor. The first floor bath had a fixed bath chair lift. The ground floor bath had no assisted bathing facility so people accessed the bath using a mobile hoist. No shower facility was available. The provider said people were made fully aware of the limited bathing facilities prior to deciding to move into the service.
- There was communal space for people to use, which included three lounge and three dining areas. There was opportunity for people to spend time alone or in private with visitors without going to their room.
- People had personal items, such as photographs of family and friends in their room. The service had twenty single rooms and five double rooms. People who shared a room had their own furniture and call bell. Privacy screens were provided in each double room.
- Some areas required decorating. The service had a full time maintenance person who was decorating at the time of the inspection. The registered manager said they were in the process of developing a formal plan which would include decoration, repairs, and replacement furniture and flooring.
- At the front of the service temporary fencing had been erected; the registered manager said this was because the provider had longer term plans to extend and develop the premises.

#### Staff support: induction, training, skills and experience

- Staff were competent, knowledgeable and had the skills to carry out their role and responsibilities.
- Staff worked well as a team. One member of staff said, "We have an approach here; everything needs doing and we are all responsible for making sure everything is done."
- Staff told us they received training which equipped them to do their job well and records confirmed this.
- At the last inspection we recommended the provider introduce the Care Certificate for inexperienced staff who commenced employment. The registered manager said they were planning on all staff completing the Care Certificate within the next 12 months to refresh on good care practice.
- Staff felt well supported. They said they had opportunities to talk with a supervisor about their role and received feedback about their performance.

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

- People's nutritional needs were met.
- Without exception, people were complimentary about the food and choices at mealtimes. One person said, "Food is excellent; I've had some good meals here. Snacks and drinks are always available."
- At lunch people had a pleasant dining experience and those who needed assistance to eat and drink received appropriate support.
- Catering and care staff had a good understanding of people's nutritional and dietary needs.

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

- People's health needs were met and the service worked with others effectively.
- Health professionals who visited Victoria House said good systems were in place for accessing healthcare support. A visiting community nurse said, "People are well looked after and staff are very attentive. They are compliant with our advice." A visiting GP told us they were requested to provide support when it was appropriate. They said, "They follow advice and are responsive. They have a holistic approach to care; they look at health, spiritual and social needs. They know when and why I've been asked to visit and are expecting me."
- Visiting relatives told us systems were in place to access medical services, and staff at Victoria House arranged this as appropriate.
- Care records showed people received support from a range of other health professionals.

## 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

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 who used the service, family and friends, without exception, provided positive feedback about the service and were complimentary about staff and management. One person said, "This is the best place I could be. I never felt this good until I came here."
- Other professionals told us people were well cared for. One health professional told us staff were pleasant and helpful. Another health professional said, "If ever you need to go into a nursing home this would be the one, I would use it for my family."
- Staff were confident people were well cared for and gave examples of how this was achieved. One staff said, "It's homely. Residents and staff are treated like family."
- People enjoyed the company of staff. Staff spent time chatting with people and during interactions they were positive and cheerful.
- Systems were in place to help promote equality and diversity. The provider had guidance and staff received training around treating people fairly and ensuring everyone was entitled to freedom from discrimination.

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

- Staff explained what was happening and offered people choice. For example, staff offered people a range of drinks and snacks during the day. A member of staff reassuringly informed one person how their medicines were being obtained.
- People's care records had information about their preferences.
- Staff knew people well and were familiar with their family members and friends. One person wanted chips and staff knew they liked lots of vinegar.
- Information was displayed to help everyone understand what was happening in the home others.

Respecting and promoting people's privacy, dignity and independence

- People's care records had information about promoting privacy and dignity. For example, offering people the choice of a clothes protector.
- People looked well cared for. They were dressed in clean clothes, an important aspect of comfort and dignity.
- People were supported to maintain relationships with family and friends. A visiting relative said, "We can't fault this home." Another visitor said, "I think it is brilliant here. Staffed by angels."
- On occasion, staff discussed personal information about people in communal areas and in ear shot of others; this did not demonstrate respect and confidentiality. This was discussed with the registered

manager who agreed to continue to remind staff about good care practices.

## Is the service responsive?

### Our findings

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

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:  
End of life care and support.

- People told us they received personalised care and staff were responsive. They said they were asked about how they wanted their care delivered although they were not familiar with the care planning process. The registered manager said they would be looking at how people could be more involved.
- When the provider sent information to the Commission in March 2019 they told us they had identified the electronic care recording system as an area for improvement; the inspection findings confirmed this. The management and staff team were still getting familiar with the new system and some information required transferring from the paper based system.
- The quality of care plans was variable. Some had good detail, for example, one person's nutritional care plan clearly showed how their needs should be met and staff followed this guidance during lunch. Other care plans lacked detail, for example, one person's 'final days' was blank and another person's made reference to using a funeral director but not who this was. Information about people's history and background was limited. There was no information to show this had led to poor outcomes for people.
- The registered manager said they were aware of shortfalls in people's care records and anticipated by June 2019 all electronic care records would identify how people's needs should be met.
- The registered manager said they were looking at developing accessible information to meet people's communication needs. For example, introducing more pictorial and easy read information. A staff meeting was planned for May 2019 and accessible information was included on the agenda.
- A health professional had visited the service just before the transfer of care records. They told us, "care plans were person centred and they were up to date with appropriate information. Supplementary charts were completed with accurate information and care plans documented any actions required."
- During the inspection 'Friends of Victoria House' group was holding one of its two weekly coffee mornings. This was well attended by people who used the service, and family and friends of current and past people who used the service. The group generated a very pleasant and lively atmosphere and was an outstanding feature of the service.
- The activity worker was enthusiastic and planned opportunities for people to engage in one to one and group sessions. Occasional outings were arranged.
- Recent sessions included, soft movement exercise, bingo, singing group, film afternoon, music events, quizzes, ukulele band, chocolate tasting and a Methodist church "service".

Improving care quality in response to complaints or concerns

- People who used the service and visitors said they had not had reason to raise a concern or complaint. They said they understood the procedure if ever they needed to.
- People were comfortable talking with staff and the registered manager.

- No formal complaints had been received.
- The complaints procedure was displayed near the entrance and positioned so visitors would see it.

# 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

The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility; managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements.

- Feedback was consistently good. People told us the service provided high quality care. One person said, "I am treated very well here. Everyone is so nice and obliging. They make my life as comfortable as possible."
- People who used the service and visiting relatives and friends told us they would recommend the service to others. One person said, "I would definitely recommend here. I am happy and content."
- People who used the service, visitors and staff were complimentary about the registered manager. One person said, "The manager is very accessible and frequently walking around." A member of staff said, "We are like a family. We get really good support. [Name of registered manager] is always there."
- Quality management systems were in place but these were not always effective. Some audits drove improvements for example, a care documentation audit identified gaps and actions were recorded. However, other audits such as an environment audit identified areas to improve but there was no action plan. After the inspection visit the registered manager wrote to us and said, "To ensure audits are more thorough, I will be delegating these to competent staff members to undertake and I will oversee/check. I will also be carrying out more in-depth audits of the home." They told us a new laptop would be purchased to ensure staff could access and monitor systems.
- The provider had picked up issues around the electronic care records and were introducing better support to make sure quality and safety was not compromised.
- Some staff information was not readily accessible. The registered manager said they had been archiving and reorganising files in preparation for moving the main office.

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

- People who used the service and staff were invited to meetings and encouraged to share their views and put forward suggestions through individual and group meetings.
- Surveys had been completed by visiting health professionals, family and friends during March and April 2019; feedback was positive. The registered manager said they were in the process of analysing responses and would then produce a summary of results.

Continuous learning and improving care

- The registered manager was responsive to the inspection findings and where appropriate took swift action to address shortfalls. They were keen to develop and improve their quality management systems and provide people with consistently high quality care.

### Working in partnership with others

- The management and staff team worked positively with key organisations to benefit people using the service and improve service development.