

# Oxbridge Care Limited

# Windsor Lodge

## Inspection report

60 Bowesfield Lane  
Stockton On Tees  
Cleveland  
TS18 3ET

Tel: 01642617306  
Website: [www.windsorcourtuk.com](http://www.windsorcourtuk.com)

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

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

Windsor Lodge is a residential care home registered to provide accommodation and personal care for up to 15 people living with a mental health condition. Accommodation was provided over three floors with communal lounges and dining space. Bedrooms all had ensuite facilities. At the time of our inspection six people were living at the service but only one person was receiving support with personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating.

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

People were receiving their medicines as prescribed and accurate medicines records were kept. Risk assessments were in place to help staff minimise risk. There were systems and processes in place to help protect people from the risk of abuse.

There were enough staff on duty to meet people's needs. Staff understood the needs of the people they supported well. Safe recruitment procedures were followed.

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.

Mealtimes were flexible and relaxed and the quality of food was good. People were supported to have a varied and balanced diet. People had access to a range of healthcare professionals to ensure they remained healthy.

There was a caring culture supported by a strong staff team who respected people and treated them with dignity. Staff encouraged independence and supported people to maintain their skills. The service had a relaxed atmosphere and visitors were always welcome.

People's care was delivered around their wishes and preferences and support plans reflected this.

People had access to a variety of activities inside and outside of the home.

A range of audits and checks were carried out to monitor the quality and safety of the service. Action was taken if any issues or concerns were identified.

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

### Rating at last inspection

The last rating for this service was good (published 25 August 2017).

### Why we inspected

This was a planned inspection based on the previous rating.

#### 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?

The service was safe.

Details are in our safe findings below.

Good ●

### 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 ●

# Windsor Lodge

## 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.

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

Windsor Lodge 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 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 before the inspection

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 the information the provider sent us in the 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 lived at Windsor Lodge but did not receive personal care. The person who was receiving personal care was not able to speak with us during the inspection. We spoke with five members of staff including the provider, registered manager, deputy manager and two support workers. We spoke with a visiting health professional. We also made observations throughout the day.

We reviewed a range of records. This included one person's care records and medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

# 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 good. At this inspection this key question has now remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had systems in place to help protect people from the risk of abuse. Staff had received safeguarding training and were knowledgeable about what action they would take if abuse were suspected.
- The registered manager understood their responsibilities with regards to safeguarding people. Referrals were made to the local authority safeguarding team where appropriate.

Assessing risk, safety monitoring and management

- Staff supported people in a way that kept them safe. Records confirmed that risks were being appropriately assessed, monitored and managed.
- The registered manager ensured all necessary checks and tests were carried out to make sure the building was safe.

Staffing and recruitment

- There were enough staff to meet people's needs.
- Safe recruitment procedures were followed to help ensure suitable staff were employed.

Using medicines safely

- Staff ensured medicines were ordered, stored and administered correctly. Accurate medicine records were kept.
- People were supported to take their medicines by staff who had been trained to do this safely.

Preventing and controlling infection

- The home was clean and tidy throughout. Staff had completed infection control and food hygiene training.

Learning lessons when things go wrong

- Staff recorded accidents and incidents. The registered manager reviewed these to identify any themes or trends so action could be taken to reduce the risk of any reoccurrence.

# 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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. 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

- People's support needs and preferences were assessed before they moved to the home. This meant the registered manager could ensure staff could safely and effectively meet people's needs in line with latest guidance and best practice.

Staff support: induction, training, skills and experience

- People were supported by staff who had completed training to meet the specific needs of people who used the service. One member of staff told us, "I'm happy with the training we get, I can always ask for some extra training if I feel I need it."
- There was a supervision and appraisal system in place and staff told us they felt well supported.

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

- Staff prepared meals for people and these were served in a communal dining room. Some people were encouraged to be involved in food preparation and we saw some people helping themselves to drinks and snacks throughout the day.
- Mealtimes and menus were flexible to suit the needs of the people living at the service.

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

- People's rooms were personalised by them to reflect their individual style and preferences. There were also comfortable communal areas where people could go to relax, socialise or have quiet time.

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

- People were supported to have access to a range of healthcare professionals to help ensure they remained healthy.
- Staff were aware of the importance of good oral health and encouraged people to keep their teeth clean and attend dental appointments.
- Staff worked closely with external healthcare professionals to meet the needs of the people living at Windsor Lodge.

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 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.

- Nobody was deprived of their liberty. Everybody had capacity to make their own decisions about all aspects of care.
- Consent to care and support was sought in line with legal requirements.

## 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.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant 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

- Staff treated people with respect, compassion and kindness.
- People who lived at Windsor Lodge were happy with the support they received and complimentary about the staff. One person told us, "All the staff are good, I'm happy enough here."
- People's religious and cultural needs were discussed and respected. Staff supported people in a way that respected their individuality.

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

- People's views were recorded within their care plan. People were able to express their views informally with staff and the registered manager on a day to day basis. More formal one to one meetings and care plan reviews also took place.
- People were supported to access advocacy services where needed. Advocates help ensure that people's views and preferences are heard.

Respecting and promoting people's privacy, dignity and independence

- People were treated with dignity and respect. Staff delivered care in a friendly, professional way and helped and encouraged people to maintain their independence.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People received care and support that was focused on their individual needs, preferences and what was important to them. Care plans contained people's life history and reflected their likes and dislikes
- The registered manager and staff ensured that care was delivered in a flexible way to meet a person's changing needs.
- The registered manager and staff understood the importance of promoting equality and diversity and respecting individual differences.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The management team ensured people's communication needs were assessed and any measures put in place to support them. Care plans contained relevant information about people's communication needs and information could be provided in different formats if this was required.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- The people who lived at the home were very independent and able to follow their own hobbies and interests. Activities and outings were arranged and information was shared to ensure anyone who wanted to take part could.
- People's visitors were made to feel welcome when they visited the home.

Improving care quality in response to complaints or concerns

- The provider had systems in place to learn from and respond to complaints.

# 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 good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager had a good knowledge of the people within the home. Both the registered manager and provider engaged with people, visitors and staff in a friendly and informal way.
- Staff said the registered manager was approachable and supportive. One staff member said, "I would speak to [registered manager] if I was concerned about anything. I have raised things in the past and they've listened."
- There was a positive atmosphere in the home. Staff told us they felt valued and enjoyed working at the home.

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

- The registered manager understood their duty of candour responsibilities. They had submitted notifications of specific events in line with legal requirements.
- The registered manager and provider were open and honest with us about the service, its strengths and weaknesses and areas they were further developing.

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

- The registered manager undertook a range of audits and checks on a regular basis to help ensure high standards were maintained.
- The provider was very involved in the service and committed to continuous improvement.
- The registered manager supported us throughout the inspection process and was open and responsive to our feedback

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

- The provider sought feedback from staff and people using the service. This feedback was acted upon to make improvements in the service.
- Staff meetings were held regularly and minutes of the meetings were available for staff who had not been able to attend.

Working in partnership with others

- Staff liaised with health and social care professionals to make sure people received joined up care which met their needs. One health professional told us, "[Registered manager] has really engaged well with us. They are always keen to be involved and support us in new initiatives."