

Woodhall Support Services Ltd

# Woodhall Support Services Ltd

## Inspection report

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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?	Requires Improvement ●

# Summary of findings

## Overall summary

### About the service

Woodhall Support Services is a domiciliary care agency. They provide assistance with personal care to people living in their own home. At the time of inspection, they were supporting 13 people, five of whom received support with personal care.

Not everyone who used the service received support with personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

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

The provider had not consistently applied their recruitment procedures due to pre-existing knowledge of some of the staff employed. The provider took immediate action and all the information was in place before the inspection activity concluded.

People felt safe with the care received. Risks to people's safety were considered on a day to day basis and in the event of adverse situations, such as bad weather.

People received their medicine on time by staff who had received training in the safe administration of medicine. People were protected from the risk of infection by staff who all had access to adequate personal and protective equipment.

Accident and incident forms were reviewed to ensure any necessary lessons were learnt and shared with the rest of the team.

People's care needs were assessed, and care plans were devised which contained all the necessary information. People had access to healthcare, support with maintaining a balanced diet and, in maintaining contact with other agencies who were involved.

Staff received training to support them in their role and staff felt they had sufficient knowledge to fulfil their role.

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.

People were well treated. Their views were encouraged and their right to privacy was respected.

People's care plans were personalised to their individual needs and people received care and support at a

time that suited them. People's communication needs were considered at all times.

People were supported to access their community and we received positive feedback regarding the companionship offered.

People knew how to raise a complaint and the provider had a process in place to ensure all concerns raised were investigated and feedback was provided.

The provider was not supporting anyone with end of life care at the time of inspection but were looking to increase the staff training in this area.

People were complimentary about the service and staff felt they were supporting people to achieve positive outcomes. The provider monitored the quality of the care being delivered and were aware of their duty of candour.

The provider worked with others and could demonstrate continuous learning and engagement with staff and the people they supported.

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

This service was registered with us on 27 February 2019 and this is the first inspection.

#### Why we inspected

This was a planned inspection based on the date the service first registered with us.

#### 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 not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

# Woodhall Support Services Ltd

## **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

This inspection was carried out by one inspector.

#### Service and service type

This service is a domiciliary care agency. It provides personal care to people living in their own houses and flats.

The service had two managers registered with the Care Quality Commission and a third manager who worked alongside them. Together they were also the provider and legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the registered managers would be in the office to support the inspection.

Inspection activity commenced 21 February 2020 and finished 26 February 2020.

#### What we did before the inspection

We reviewed information we received about the service since they were first registered. The provider was not asked to complete a provider information return prior to this inspection. This 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 the inspection

We spoke with one person who used the service and three relatives about their experience of the care provided. We spoke with six members of staff including the two registered managers and care workers. We also spoke with an external training provider who was present on the day of the site visit.

We reviewed a range of records. This included two people's care records and one person's medication records. We looked at three 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.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We also sourced feedback from the local authority.

# Is the service safe?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their families told us they felt safe with the support from staff. One person said, "I feel very safe with the staff who come to me."
- Staff had received training in recognising and reporting the signs of abuse in adults.
- We discussed with the registered managers whether the staff needed to complete safeguarding training for children. This was because some staff came in to contact with children at people's homes. The provider said this was something they would source.
- Within each person's care file, the staff had access to a cause of concern form which had been produced by the provider. Staff completed the forms and shared them with the registered managers when something worried them. The form listed the different types of abuse as a prompt for staff to consider when documenting what concerned them.

Assessing risk, safety monitoring and management

- Risks to people's safety were assessed and actions to mitigate the risk of harm were clearly recorded. People's health conditions, any equipment used, and their environment were all assessed. For example, one person had a risk assessment which reminded staff to ensure the breaks were always applied on a commode to prevent the person from slipping off.
- Risks due to adverse weather conditions were assessed and plans were in place for each person to ensure their care needs would be met during extreme weather conditions.
- The potential risks to staff due to lone working were assessed and mitigated. The provider monitored staff signing in and out of visits and one of the managers was always available for support. Staff were equipped with a first aid kit and a personal alarm, as part of their induction pack.

Staffing and recruitment

- People were supported by staff who were either well known to the provider or were staff who had transferred with them as part of a changeover of care provider.
- Recruitment processes were in place for new staff. However, we found incidents where the process had not been applied as robustly as required. A full employment history, references and criminal record checks had been requested but had not been fully obtained before some staff commenced working with people. When we asked why this had happened, we were advised that a level of trust had been applied to people known to either the provider or a person being supported. The provider acknowledged this was not in line with current guidance and took immediate action to mitigate any risk and sped up the process of gathering the required information.
- All recruitment processes were completed before our inspection was concluded.
- People were supported by a consistent staff team and shortfalls were covered by staff already known to the

person.

#### Using medicines safely

- The provider only supported one person with their medicine. We reviewed their Medicine Administration Records (MAR) as part of the inspection process. We saw the records were completed in full. The registered managers audited the medicine records on a regular basis and any errors were investigated such as, a missed signature.
- Information was available to assist staff understand the various medicines people took and why they were prescribed.
- Staff had received training in the administration of medicine and were assessed as competent before being permitted to give people their medicine.

#### Preventing and controlling infection

- People were supported by staff who used personal and protective equipment (PPE) such as, gloves and aprons when supporting people with their personal care.
- From a review of people's daily records, we could see the staff recorded good food hygiene when supporting people to prepare meals. As well as supporting people to check use by dates on food produce.

#### Learning lessons when things go wrong

- Accident and incident forms were completed and reviewed by the management team to see if there were any lessons to be learnt. We reviewed one incident where a staff member had been assaulted. The management team had reviewed what happened and the provider's policies were amended as a result.
- The provider had introduced an internal reporting system to review anything that had impacted on the effectiveness of the care delivered. We saw forms had been completed for a range of issues and action was taken. For example, the providers on-call phone once ran out of battery so portable battery chargers were immediately purchased.



# 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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- Holistic assessments were carried out with people to confirm both their physical and emotional needs. The information gathered was used to develop a care plan which people were then asked to agree.
- People's care plans detailed how they wanted their personal care needs met and included aspects such as their oral health care needs.
- Staff told us the care plans contained all the relevant information they required, and they were reviewed on a regular basis. One staff member said, "We read the care plan and get to help update it if anything ever changes."

Staff support: induction, training, skills and experience

- Staff received training to ensure they had the knowledge and skills to meet people's needs. One staff member told us, "I have never worked in care before and they have given me loads of training and support". Another staff member said, "I'm really impressed. We get to shadow other staff, get to know people and the managers make sure we have all the right training to support people properly."
- We spoke with an external training provider who was assessing the registered managers as part of a diploma they were completing. They told us, "You can tell that they [registered managers] want to learn as they always ask questions and talk about how they want to make sure they get things right."

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

- People were supported to access drinks, meals and snacks as agreed in their care plan.
- One person had a care plan in place that advised staff on how to meet their nutritional needs. Another person was supported to go food shopping on a regular basis and prepare meals of their choosing, throughout the day.

Staff working with other agencies to provide consistent, effective, timely care

- The provider worked alongside various health and social care agencies and followed any professional advice they received.
- Staff told us they were always kept up to date with changes in people's care plans. One staff member said, "Communication is great, we are always kept up to date."

Supporting people to live healthier lives, access healthcare services and support

- People were supported to maintain healthy lives and access services when needed. We reviewed one person's daily records and saw entries evidencing they had been supported to make and attend healthcare appointments.

- Staff understood people's physical and mental health needs and provided guidance to staff to help the person manage both. For example, guidance to help calm a person experiencing anxiety.

#### 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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty. We checked whether the service was working within the principles of the MCA.

- Most of the people being supported had been assessed as having capacity to make decisions about their care. Where capacity was questioned, relatives and involved professionals were engaged in making best interest decisions.
- It was recorded in people's care files if someone had power of attorney over someone's health and welfare or their finances.

# 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.

This is the first inspection for this newly registered service. This key question has been rated good. 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

- People told us they were well supported. One person said, "Everything is fine, I'm happy and I get the right support." Another person's relative said, "I have peace of mind knowing my [relative] is being so well supported while I am out. It means I can relax and enjoy what I am doing. I don't have to worry."
- People's protected characteristics were recorded in their care plan such as their race and religion. This is in line with the Equality Act 2010.

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

- People told us, they were able to express their views and received the care they wanted.
- Staff told us they were given adequate time to get to know people and understood how people wanted their care delivered. One staff member said, "I think it's great. We get time to get to know people before starting work with them. The manager's make sure people know who we are and that they are happy for us to provide their support."

Respecting and promoting people's privacy, dignity and independence

- Within people's care plans their right to privacy was expressed. For example, one person needed support with continence care, but they did not want to talk about it. This was clearly explained to ensure staff could respect the person's view.
- People were supported to maintain their independence and participate in daily living activities. One of the registered managers told us, "As part of the initial assessment we find out exactly what people want us to do and how we can promote their independence."

# Is the service responsive?

## Our findings

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

This is the first inspection for this newly registered service. This key question has been rated good. 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's care was planned around their individual needs. Within care files we saw a breakdown of routines that were important to people. For example, one person's bath time routine was broken down in to each individual task from start to finish. This ensured staff did things in the exact order the person wanted.
- One of the registered managers told us, "We tailor every care package to the individual. We get know people and how they want their care delivered."
- People's rotas were arranged around the times that suited them. People were supported by staff of their choosing and any changes were discussed in advance.

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.

- People's communication needs were assessed, and it was recorded whether someone experienced any level of sensory loss. At the time of inspection we did not identify anyone who required information to be made more accessible.

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

- People were supported to access community activities and engage in meaningful conversation.
- People were complimentary of the company the staff provided. One relative told us, "They give me respite to do the things I need to do and thankfully my [relative] likes spending time with the staff. They chat to each other and go for short walks to get out and enjoy some fresh air."

Improving care quality in response to complaints or concerns

- People told us they knew how to raise a concern if needed and had received a copy of the providers complaints procedure.
- We reviewed the complaints the provider had received since they became registered. We saw complaints were clearly logged, investigated and the outcome was shared, including any changes made as a result of the complaint.

End of life care and support

- The provider was not delivering end of life care at the time of inspection.

- The provider told us they planned to deliver staff training in this area to support people with this level of care in the future.

# 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.

This is the first inspection for this newly registered service. This key question has been rated requires improvement. This meant the service management and leadership was inconsistent.

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

- The provider had not consistently applied their recruitment procedures prior to the inspection. We identified two recruitment files where the necessary checks had not been completed prior to the staff members starting work. The provider acknowledged that despite their previous knowledge of the staff members, the various checks should have been completed. They took immediate action to gather the missing information and we were provided with an updated recruitment procedure before the inspection concluded.
- We saw how the provider monitored the quality of the care delivered and shared information with the team on a day to day basis to support their practice. One staff member told us, "The manager's review everything we do and, you can tell they really want to do things right and run a good business for the people we support."

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

- People were complimentary about the service. One person's relative told us, "Woodhall Support Services are exceptional. I could not be happier."
- Staff told us they enjoyed working for the provider and were positive about the outcomes achieved. One staff member told us, "I feel really valued as a staff member. I'm happy and genuinely feel like I make a difference."

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 provider was aware of and understood its duty of candour. However, no incidents had occurred where the provider had needed to apply this duty.

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

- People's feedback was gathered on a regular basis. Any points raised were explored to see if changes were needed to either the care provision or, how the service operated.
- People told us they did not have any concerns but felt confident speaking to the provider, if needed. Staff supported this view. One staff member told us, "The manager's really listen to any concerns and will deal with anything that comes up."

#### Continuous learning and improving care

- The provider had robust learning systems in place and every event or incident was reviewed. Action was taken when identified. For example, policies were updated following an incident which occurred.

#### Working in partnership with others

- The provider worked in partnership with other agencies. They were able to provide examples of how they had worked alongside other agencies to ensure people received joined up care.