

# Partners4Care Limited

# Winford House

## Inspection report

The Causeway  
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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

Winford House is a domiciliary care agency and extra care housing service which provides personal care and support to people who live in their own flats within one purpose-built building. The service supported adults some of whom were living with physical and mental health conditions, including dementia.

Not everyone who used the service received 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. At the time of inspection 40 people who lived at Winford House received personal care from the service.

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

People told us the service was safe. Medicines were well managed, and people were happy with the way staff gave them their medicines. Staff were aware of how to identify and report safeguarding concerns. Staff followed infection control procedures.

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 involved in their care planning. Records were regularly reviewed to ensure people's up to date needs were reflected. Staff ensured people had access to healthcare professionals, for example contacting their GP or emergency services if they became unwell. People were supported with meals and any special dietary requirements were met. Staff received appropriate training and support.

The service was caring. People told us the staff treated them with kindness and respect. Staff were aware of how to protect people's privacy and dignity and people told us the staff did this well.

Staff had access to detailed information to provide people with safe care and support. Care records were on an electronic system and were regularly updated. People were involved in decisions about their care. Staff were aware of people's communication needs and how best to support them. Complaints were handled in line with the provider's policy.

Quality assurance systems were in place to monitor the quality of care and support people received. The provider sought feedback from people using the service and used this information to make improvements where necessary. We found the management team receptive to feedback and keen to improve the service. The registered manager worked with us in a positive manner and provided all the information we requested.

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 18 March 2020 and this is the first inspection to look at all five domains and award a rating.

#### Why we inspected

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

#### 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 effective?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# Winford 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. 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 an inspector 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.

#### Service and service type

This service is a domiciliary care agency and extra care housing service. It provides personal care to people living in their own flats in a purpose-built building. The accommodation is bought or rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

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

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the provider or registered manager would be in the office to support the inspection.

Inspection activity started on 29 April and ended on 6 May 2021. We visited the office location on 29 April 2021.

#### What we did before the inspection

We reviewed information we had received about the service. 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. 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. We used all of this information to plan our inspection

#### During the inspection

We spoke with five people who used the service and nine relatives about their experience of the care provided. We spoke with nine members of staff including the registered manager, director, team leader and care workers.

We reviewed a range of records. This included four people's care records and multiple 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 looked at training data and quality assurance records.

# 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

- Systems and processes were in place to keep people safe from avoidable abuse.
- Staff were aware of the steps to follow to raise any safeguarding concerns. One member of staff told us, "If I thought there was anything wrong, I would report it to the management. The manager is approachable so I would have no issue going to them."

Assessing risk, safety monitoring and management

- Staff understood where people required support to reduce the risk of avoidable harm. Most care plans contained clear assessments of risk and included control measures for staff to follow to keep people safe. We found some risk assessments needed further information. We discussed this with the registered manager and immediate action was taken.
- People felt safe and secure with the support they received. One person told us, "I do feel safe I have a list of carers coming and if they are going to be late the office will phone me."
- Environmental checks of people's homes had been done to ensure the safety of people and staff.

Staffing and recruitment

- The provider had processes in place to ensure the safe recruitment of staff and these had been correctly followed.
- There were systems in place to ensure that there were enough suitably trained staff to effectively meet people's care needs and to keep them safe.
- People received consistency of care from staff who knew them well most of the time. One person told us, "We have the same team of three or four carers and the office will notify us of any changes that may be needed."

Using medicines safely

- Medicines were administered safely. People who required help to take medicines received support from trained staff.
- The management team carried out regular medicine audits and action had been taken where issues had been identified.

Preventing and controlling infection

- The service had an infection prevention and control policy in place. Additional guidance in relation to infection prevention and control during the pandemic was introduced to provide staff with current information about COVID-19.

- Staff had received training in infection prevention and control, including donning and doffing of PPE. Staff told us they were supplied with enough PPE to undertake their work safely. People confirmed that staff always wore PPE.
- The provider was accessing regular testing for staff.

#### Learning lessons when things go wrong

- Accidents and incidents were reported and recorded appropriately. These were analysed to look for any patterns or trends and lessons learnt to keep others safe in the future.



# 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

- People's care needs were assessed when they started to use the service and reviewed regularly. Care records included information about people's choices and preferences which staff respected. One relative told us, "Staff know what is needed and ask my mum what meals she would like. They treat her like family really."
- Care records included evidence of people's consent to their care and support. People and relatives confirmed consent was sought appropriately.

Staff support: induction, training, skills and experience

- Staff had the skills and knowledge to carry out their role effectively. New staff were provided with an induction programme to ensure they could carry out their role safely and competently. One relative told us, "We do feel safe around [staff], they seem to know what they are doing."
- Staff told us they felt well supported. Staff had received regular supervision. One member of staff told us, "Staff recently asked for more specialist training around diabetes. All staff within Winford house were provided with diabetes training. Management will listen and take on board suggestions."

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

- Staff provided support with food preparation where the care package required it. Staff had received training to prepare food safely and people were happy with their support in this area.

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

- People were supported to have access to a range of healthcare professionals to help ensure they remained healthy.
- Staff had a good understanding of the people they were caring for and how to manage any health-related concerns. One relative told us, "They help [my relative] by encouraging exercise and walking in the home."

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.

- There was nobody under a Court of Protection order at the time of our inspection. Consent was obtained prior to care being delivered and best interest decisions were made where necessary.
- People told us they were involved in decisions about their care. One person told us, "I did go into the office and have a review of my care with [the registered manager] a while ago, and I do know the office staff too."

# 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 and their relatives were very happy with the care provided. One relative told us, "The carers are as much a social support as anything. My mum has never been so happy as she is now, all due to the carers and the support they give."
- Care plans contained information about people's religious and cultural needs. Staff were also mindful of any additional needs people may have, for example due to sensory loss.

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

- Staff encouraged people to make decisions about their day to day routines and their care needs, in line with their personal preferences. People could express their views as part of daily conversations with staff, monthly review meetings and customer surveys. One member of staff told us, "We see people as humans and it's their right to make their own choices about their care and support."
- People had access to advocates if this was required. An advocate helps people to access information and be involved in decisions about their lives.

Respecting and promoting people's privacy, dignity and independence

- The registered manager and staff respected and promoted people's privacy and dignity. One member of staff told us, "I'd always ask before touching someone. We knock or speak before entering and make sure curtains, screens or doors are properly closed before giving personal care."
- Staff encouraged people to maintain their independence whenever possible. One relative told us, "[Staff] know what to do and ask [my relative] what is needed."
- People's information was stored securely used appropriately in line with the provider's confidentiality policy and government regulations.

# 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 received care and support that was focused on their individual needs, preferences and what was important to them.
- 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

- Staff supported people to take part in activities they enjoyed. For example, one person was regularly taken swimming. One relative told us, "[Staff] chat with [my relative] while working, this helps her relax and is very good for her socially"

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure in place. People were supported to raise any concerns and action was taken in response to these. One person told us, "I would be happy to raise a concern with the office if I had one but not had to so far."

End of life care and support

- There was nobody receiving end of life care at the time of our visit. The registered manager told us they would accommodate a person's wishes to stay at Winford House and provide appropriate care as required. Staff had received training in this area.

# 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 good. 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

- Staff told us communication and guidance from management was good. One member of staff said, "I have no problem discussing any issues with the registered manager."

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 to CQC in line with legal requirements.
- The registered manager was 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.
- Staff told us they had been kept up to date with changes to guidance during the pandemic.
- The registered manager was open and responsive to our inspection feedback. They were passionate about the service and committed to continuous improvement.

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

- The provider had a clear and comprehensive policy on equality and human rights. We saw evidence within people's care records that this policy was followed. People were treated with respect and as unique individuals.
- The provider asked people for feedback in the form of questionnaires. One person told us, "We had a review over the phone back in December and we have just returned a questionnaire in the last few days." However, some people told us they had not received questionnaires and we fed this back to the registered manager who was looking into it.
- Staff meetings had not been taking place regularly due to the pandemic. Staff we spoke with said they found the manager approachable, however, night staff did feel they did not have regular contact. We discussed this with the manager who told us they would look at ways of engaging with night staff more.

#### Working in partnership with others

- The registered manager and staff worked in partnership with health and social care professionals who were involved in people's care and there was a good relationship with the local authority.
- The provider worked closely with the landlord of the building.