

Regal Care Trading Ltd

Woodlands Nursing Home

Inspection report

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Tel: 02086459339

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

Woodlands Nursing Home is a residential care home that provides accommodation and nursing for up to 18 older people, some living with dementia. At the time of this inspection 11 people were living in the home.

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

Systems remained in place to protect people from abuse and staff had been trained in safeguarding adults.

There were enough staff working at the service to meet people's needs and checks were carried out on new staff to make sure they were suitable to work in a care setting.

People's risk had been identified and systems were in place to make sure staff knew how to manage and reduce risk. Staff knew what to do in an emergency and had additional information, training and meetings to keep their knowledge and skills updated. People's medicines were managed safely.

The home was clean and free of unpleasant odours. People were protected from the risk and spread of infection because staff followed the provider's infection control procedures.

The provider recorded and monitored accidents and incidents in order to identify trends and put systems in place in order to minimise recurrence.

Systems were in place to monitor the quality of care people received at the home, learn lessons when things went wrong and make improvements to the care and support people received.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was good (published 23 October 2018).

Why we inspected

This inspection was prompted in part by notification of a specific incident, following which a person using the service died. At the time, we undertook enquires to establish the circumstances around the person's death and we worked with the local authority and the provider to make sure people were safe. We carried out this unannounced focused inspection to review the key questions of safe and well-led to make sure the changes the provider had made were embedded and people remained safe. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well-led sections of this full report .

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. Therefore, we did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at this inspection.

The overall rating of good for the service has not changed. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Woodlands Nursing Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor the information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.
Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.
Details are in our well-led findings below.

Woodlands Nursing Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Woodlands Nursing Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service 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 professionals who work with the service. 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 this information to plan our inspection.

During the inspection

We spoke with one person who used the service and we observed how people were supported and how they interacted with staff. We spoke with four members of staff, the chef, the registered manager and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We reviewed a range of records. This included four people's care records and medication records. We looked at two staff files in relation to recruitment.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

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 remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were observed to be relaxed and comfortable with their surroundings and with staff. Staff knew people well and we saw interactions were kind and supportive. One person told us, "I'm not too bad and the staff are very good".
- Staff confirmed they had received training in safeguarding. They knew the action to take and how they should report concerns if they needed to. Staff felt confident that managers would take appropriate action to keep people using the service safe.
- Safeguarding procedures were displayed for people, their relatives and staff, with clear details about what people should do if they have concerns and who they should contact.

Assessing risk, safety monitoring and management

- People's risk was assessed when they first started to use the service and then regularly updated when their care and support needs changed. Although one person's care records did not include risk of choking, we found staff had the information they needed in the person's room and knew how to manage the person's risk appropriately. The registered manager made sure the person's care records were updated as soon as we brought it to their attention.
- Staff had regular handovers to make sure they were aware of people's risk and any changes in their support and care needs. Handover sheets gave staff clear guidance about people's mobility and where people had agreed, do not attempt cardiopulmonary resuscitation (DNACPR) instructions were clearly marked. Staff told us they were clear on the emergency procedures in place and what they needed to do if a person became unwell or stopped breathing. Additional guidance was placed around the home to give staff additional information on what to do in an emergency.
- People had call bells in their room, we tested four call bells and staff attended immediately. Call bells were regularly tested to make sure they were working correctly. Staff made sure people were checked at regular intervals during the night to make sure they were safe. Records confirmed these checks.
- Staff were able to contact the registered manager, the deputy manager and the nominated individual in an emergency and contact names and numbers were clearly displayed in the office.
- Environmental risks were identified, and improvements made when necessary to keep people safe.
- Health and safety and fire checks were routinely carried out at the service.

Staffing and recruitment

- There were enough staff on duty to keep people safe. The registered manager confirmed staffing numbers were based on people's needs and showed us how they calculated the number of staff needed. A dedicated housekeeper and chef supported the care staff and the registered nurse, and laundry duties were shared

between housekeeping and care staff. There was not an activities co-ordinator on site, but the registered manager explained they hoped to increase the number of activities when the COVID-19 restrictions eased.

- During our inspection staff were always visible and on hand to meet people's needs and requests. Duty rotas and shift plans confirmed staff numbers.
- The provider followed safe recruitment practices. Checks were carried out before employment started to make sure staff were suitable for the role.

Using medicines safely

- People received their prescribed medicines safely. People's medicines were kept securely and systems were in place to order and dispose of people's medicines when required
- The medicine administration records (MAR) for the four people looked at were error free. Additional information was provided for most 'as required' or PRN medicine. This gave information about the medicine including when it was needed and why. We found one person did not have PRN guidance in place for their medicine. We spoke to the registered nurse who administered people's medicines and they were able to explain why this medicine was given and when. The registered manager put PRN guidance in place for this person on the day of our inspection.
- Only qualified staff administered people's medicine. The registered manager made sure competency checks were completed and staff continued to have the training, skills and knowledge to keep people safe.
- Staff carried out daily checks on people's medicines to make sure the numbers were correct. We carried out checks during our inspection and found there were no errors with the medicines we looked at.

Learning lessons when things go wrong

- The registered manager explained the lessons they had learnt following one incident and the actions they had taken and the improvements they had made to make sure people were safe. This included additional staff training, regular conversations and information sharing during staff meetings and forming links with healthcare professionals to improve systems and processes. This meant staff had the information and knowledge they needed to help keep people safe.
- Staff were supported to report concerns and incidents and knew they would be listened to by the registered manager. The registered manager reviewed all accidents, incidents and safeguarding concerns to analyse and investigate and make changes to reduce future risk. For example, following a fall, one person's risk assessment had been amended, additional checks put in place and healthcare professionals contacted to make sure the risk of the person falling again was reduced.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as 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.

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

- There was a clear governance structure in place. The registered manager was supported by the provider to meet their legal and regulatory requirements.
- The provider had recently introduced a robust quality assurance program that allowed them to monitor and assess the quality of care people received. Policies and procedures were regularly discussed during staff meetings to make sure staff understood what was required of them.
- The registered manager was aware of their regulatory requirements, such as what issues they were required to notify the Care Quality Commission (CQC) about. Records confirmed that the provider had notified CQC of significant events as appropriate

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Staff told us they felt supported in their jobs and worked well as a team, they told us they would speak to either the registered manager or the deputy manager if they had any concerns. Staff told us they were able to share their views and experiences with the registered manager at any time and during their staff meetings and supervision.
- People were supported during the pandemic to keep in touch with their friends and relatives and staff explained the various methods of communication they used including video conference calls. During our inspection we saw how staff facilitated relatives' visits to the service in line with government guidance to make sure people and their relatives had the time they needed together.
- The registered manager explained they had not held a residents meeting during the pandemic however they and the chef would walk around each day to speak with people and ask how they were and what they would like to eat. They explained this was a good opportunity for people to tell them about any worries or concerns they may have and involve them in conversations about their care.
- The registered manager promoted a positive culture at the service. They explained the importance of equality and diversity and treating people as individuals and gave examples of how they included and involved people in their everyday care. Such as ensuring people were able to communicate with staff when English was not their first language.

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; continuous learning and improving care

- The registered manager and provider worked well together to develop and improve the service. They genuinely welcomed feedback and made changes where improvement was needed.
- When things went wrong the registered manager explained they shared lessons with staff to help reduce risk and improve people's care. Following the specific incident, the local authority had provided training on reflective practice to help the service engage in a process of continuous learning. The registered manager told us they felt confident they had made improvements and were able to build on best practice going forward. Staff were aware of the specific incident and told us about the ongoing training and support they received during team meetings and supervision. This meant they had the knowledge and skills to make sure people were safe.

Working in partnership with others

- The registered manager had built positive relationships with the local authority and other healthcare professionals and these had been reinforced during the pandemic. The registered manager explained if they had concerns, they would contact the local authority who always responded with advice and support. In addition, the GP and regular multi-disciplinary team meetings gave assurance about people's care, support and advice when people's needs changed.