

# Community Integrated Care

# The Whinnies

## Inspection report

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Date of inspection visit:  
18 February 2020  
26 February 2020

Date of publication:  
20 March 2020

## 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

The Whinnies is a residential care home which provides accommodation and personal care for up to three people with learning and physical disabilities. At the time of our inspection three people were using the service.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

People received a good service from staff who understood their needs and were committed to promoting their well-being.

There were systems in place to protect people from the risk of abuse. Staff underwent pre-employment checks to assess their suitability for their role. There were enough staff on duty to meet people's needs. People were comfortable in the presence of staff.

Staff were supported with supervision and training in a variety of subjects. The training included administering people's medicines. Medicines management in the home was safe.

Staff worked well with other professionals to maintain people's health. Professionals involved in people's care reported staff listened to and followed their advice.

People's care plans were person-centred and contained useful information to support staff to communicate with people. Staff understood people's dietary requirements.

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.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence. The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

The provider had effective audits in place to monitor the quality of the service. Since our last inspection improvements had been made to fire safety.

Plans were in place to change this service from a care home to a supported living service. In a supported living service people are encouraged to be more independent and people's care and housing are provided under separate contractual agreements. The registered manager had involved staff in thinking how this change would work. Staff had confidence in the registered manager.

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 13 July 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 ●

# The Whinnies

## 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

The Whinnies 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 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. We did not ask the provider for a provider information return. This is information we ask providers 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 took this into account during our inspection. We used all of this information to plan our inspection.

#### During the inspection

We spoke with two people who used the service and three relatives about their experience of the care

provided. We spoke with five members of staff including the registered manager and four care staff. We observed interactions between people and the staff.

We reviewed a range of records. This included two people's care records including their 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 remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff had received training on how to safeguard adults. They were confident if they approached the registered manager with any concerns, the registered manager would take appropriate action.
- The provider had systems in place to document and review any safeguarding concerns.
- Professionals told us staff kept people safe from harm. The registered manager carried out regular checks on people's money to avoid any financial abuse.

Assessing risk, safety monitoring and management

- Risks to people's safety were assessed and actions put in place to risk the risk of harm.
- Actions had been taken to make improvements to the fire safety aspects of the home. Each person had a personal emergency evacuation plan in place and fire drills were carried out.

Staffing and recruitment

- Staff were required to complete an application form which detailed their employment history and experience. The provider carried out pre-employment checks on staff to assess their suitability for their roles.
- There were enough staff on duty to meet people's needs.

Using medicines safely

- People's medicines were managed in a safe manner.
- Staff were trained in medicines management and could tell us the reasons why people had been prescribed particular medicines.

Preventing and controlling infection

- Staff carried out cleaning duties to prevent and control the risks of infections.
- The home was clean and tidy throughout.

Learning lessons when things go wrong

- The registered manager and staff anticipated the possibility of things going wrong and had sought solutions involving other professionals to keep people safe.
- The provider had arrangements in place to learn lessons and avoid repeat incidents.

# 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

- There was a comprehensive approach to assessing people's needs. People received support in line with best practice guidelines.
- The home was changing from a care home to a supported living service. People's care and housing will be provided under separate contractual agreements..

Staff support: induction, training, skills and experience

- Staff who were new to the service were supported through a period of induction to familiarise themselves with people's needs.
- The registered manager provided support to staff through the use of supervision and ensured staff training was up to date.

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

- Staff understood people's dietary requirements and supported people to eat and drink enough to maintain good health.
- Staff had included advice from dieticians in people's care plans and had rigorously followed the guidance given by other professionals. This included a staged plan for one person who was at risk of choking.

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

- Good working relationships were in place between the staff and other external professionals to provide people with effective care. One professional told us they found staff supported people to have a good quality of life.
- The service had systems in place to assist good communication and enable staff to work together for the benefit of people.

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

- The home is a bungalow with wide doorways and wheelchair accessible bedrooms and bathrooms to meet people's needs. People had easy access to the outside of the property.
- People's rooms were adapted and designed to meet their needs.

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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The service worked within the principles of the MCA.
- The registered manager had made appropriate applications to the local authority to deprive people of their liberty. The local authority had granted permission for this to occur. Specific information relating to people's individual needs to keep them safe had been incorporated into their care plans.

# 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 kindness and compassion. One professional told us, "I have observed staff to be caring and kind towards the residents with a clear understanding of their likes and dislikes." People were calm and comfortable in the presence of staff.
- Staff knew people well and genuinely cared for them. During the inspection we observed staff provide emotional support and reassurance. Relatives described staff as 'caring' or 'very caring.'
- Staff treated people as individuals. Irrespective of their abilities, staff found ways to engage people and support them to have their voice heard.

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

- People were encouraged to make decisions about their daily care. Staff found ways to engage people to support them to make decisions.
- Staff listened to relatives as natural advocates for people. An advocate visited the service on a regular basis to support one person. Staff understood the role of advocacy in supporting people.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's choices and promoted their dignity and privacy. Work was underway with a local day centre to promote one person's dignity and provide care consistent with the service.
- People were encouraged to be as independent as possible to promote their well-being. This involved people making their own daily choices.

# 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

- Staff had written people's care plans in a very person-centred way which showed people had been given choice and control.
- People's preferences were well documented. Staff understood what people liked.

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 AIS was met. Detailed communication plans were in place to promote staff delivering information to people.
- Staff had documented words people used and their meaning to meet people's communication needs.

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 maintain relationships which were important to them. Relatives told us they were welcomed into the service.
- The service used people's individual vehicles to take them out into the community. Individual diaries had recently been put in place to show when people had participated in activities. Work had begun to review people's personal activities as the service was due to transition from a care home to a supported living service.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy in place. There had been no complaints made since our last inspection.
- The registered manager offered relatives an opportunity to meet with them every month to discuss any concerns. Relatives told us they found these meetings useful.

End of life care and support

- Staff had engaged people to discuss their end of life care wishes. These had been documented in an easy to read format.

# 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

- Staff felt able to be open with the registered manager and raise any issues. A professional told us the registered manager listens to queries and responds in a timely manner. They said, "The [registered manager] is a good manager who offers person centred care and seeks support from others whilst advocating for individuals."
- The registered manager had engaged staff in thinking about the future supported living service and how this would impact on people.
- The provider had a recognition programme in place known as Acorns. Staff had been recognised for their work in supporting people through a difficult and emotional time.

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 the duty of candour and had made a safeguarding alert to the local authority.

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

- All staff understood their roles and responsibilities. The registered manager and the staff had a good relationship. Staff understood the role of the registered manager in supporting both them and people who lived in the home.
- The provider employed staff to carry out quality assurance visits to the home. They continually reviewed the progress of the home and reviewed actions they had identified in previous reviews.
- The registered manager carried out effective audits to monitor the quality of the service. These included health and safety and medicines audits.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager chaired staff meetings and provided advice and guidance.
- Consultation had taken place with each stakeholder to discuss the proposed transition to a supported living service. The registered manager and the staff were implementing a phased transition. Stakeholders confirmed they had been involved and were being kept up to date with the different stages.
- The service worked in partnership with external agencies to deliver a good quality of care for people. Staff

regularly sought advice from specialist services to meet people's needs. One professional said, "The clients I am allocated enjoy a good quality of life and are known in the community."