

Independence with Care Ltd

Worstead Lodge

Inspection report

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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

Worstead Lodge is a residential care home providing personal care and support to 19 people with a learning disability, autistic people, or people with mental healthcare support needs. The service can support up to 20 people. Accommodation was spread over five buildings; the main house and four self-contained bungalows.

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

People were encouraged to manage their medicines independently, with staff support available where required. People were responsible for maintaining the cleanliness and condition of their own bedrooms, bathrooms, as well as communal spaces, with staff oversight in relation to COVID-19 checks. People understood about COVID-19 risks, testing, vaccines, social distancing and the importance of hand hygiene. Staff were observed to wear personal protective equipment appropriately throughout the visit to maintain people's safety.

People were involved with the day to day running of the service, and their individual lives; staff told us they worked alongside people to support personal achievement. The service was well-led, with strong, and consistent leadership. The registered manager, and overall provider team were passionate about giving people consistently good standards of personalised care.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of key questions Safe and Well-led, the service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. People received personalised care and support, tailored to their individual needs and wishes. People were able to make choices about who they wished to live with, what they wanted to do and where they wanted to spend their time.

Prior to the pandemic, people had active social lives within the local community, including having jobs and access to educational courses. Whilst the pandemic had curtailed some people's abilities and confidence to safely access the local community, changes have been made within the care environment to reduce the risk of social isolation and loss of hobbies, whilst maintaining adherence to COVID-19 risk management guidelines. People consistently told us they felt safe, supported and well cared for living at Worstead Lodge, and this was reinforced by feedback received from people's relatives.

Right support:

- Model of care and setting maximises people's choice, control and independence.

Right care:

- Care is person-centred and promotes people's dignity, privacy and human rights.

Right culture:

- Ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives.

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

Rating at last inspection

The service was last inspected on 02 April 2019 and rated Requires Improvement; the report was published on 18 July 2019.

We carried out an unannounced, comprehensive inspection of this service on 02 April 2019. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve regulation 17 (good governance).

Why we inspected

This was a planned inspection based on the previous rating.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

We undertook this focused inspection to check the provider had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the key questions Safe and Well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. 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 Worstead Lodge on our website at www.cqc.org.uk.

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 well-led?

Good ●

The service was well-led.

Details are in our well-Led findings below

Worstead 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.

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

Consisted of one CQC inspection manager and one inspector.

Service and service type

Worstead 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. Members of the provider team were also responsible for the day to day running of the service alongside the registered manager and are referred to throughout the report.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

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 reviewed information

we held about the provider and liaised with social care professionals involved with the service.

During the inspection

We spoke with 12 people who used the service and observed care being provided in the communal areas. We spoke with the registered manager, member of the provider team and a senior member of care staff.

We reviewed a range of records, including three people's care records and three medication records. We looked at two staff files in relation to recruitment and staff supervision. As well as 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 spoke with three people's relatives by telephone. We provided final inspection feedback to the registered manager on 02 December 2021 by teleconference.

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 Requires Improvement. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

Using medicines safely

At our last inspection, a recommendation was made in relation to people's handling and self-administration of their own medicines, including safe storage, and risk management.

Enough improvement had been made at this inspection and the provider had met the recommendation made.

- People were assessed to manage their own medicines independently wherever safe to do so. People told us they liked being independent and were able to show us how their medicines were safely stored. Staff completed regular checks to ensure people were taking their medicines as prescribed.
- Staff were trained to give people their medicines, with their competency to do so safely regularly reviewed.
- Staff had good working relationships with the GP and pharmacy and were able to put arrangements in place to support people's individual needs relating to their medicines.

Systems and processes to safeguard people from the risk of abuse

- People told us they felt safe and well cared for living at Worstead Lodge. This feedback was reinforced by people's relatives who told us they were confident staff supported their family members to maintain their safety whilst maximising levels of independence.
- Staff were familiar with the provider's safeguarding policies and procedures. Incidents and accidents had been referred onto the local authority safeguarding team as required. We did identify some examples of where notifications should also have been submitted to CQC, however as situations were appropriately dealt with, this did not impact on the standards of care provided. After the inspection, the provider team confirmed changes were being made to their paperwork to ensure notifications to CQC were made when required.

Assessing risk, safety monitoring and management

- People were supported to take positive risks and were encouraged to be as independent as possible. Staff worked collaboratively with people to maintain their safety.
- Staff were familiar with people's individual support needs. People told us they felt comfortable speaking with staff if concerned or having a day where they needed additional support. People also had access to personal items they found to be therapeutic to help them when they felt anxious.
- People had individualised risk assessments in place. This supported people to be as independent as possible with tasks such as cooking and cleaning, as well as activities such as woodwork and going out independently in the community.
- People had access to their own summer houses, sheds, caravans and outside areas, to give time away from others. People told us this assisted them in the management of stress, or where they wanted to spend

some time alone with their own thoughts.

- Checks were in place to maintain gas, electric and water safety.

Staffing and recruitment

- The service had a stable staff team. This resulted in staff being familiar with people's individual support needs, preferences and wishes. Staff also knew people's relatives and friends well. Relatives told us they felt assured that staff turnover was low, resulting in staff knowing their family member well.
- Staff told us they felt valued and well supported by the provider team. This included while working during the COVID-19 pandemic. Staff and people's relatives acknowledged the personal sacrifices made by the provider team, who moved onto the site to support staff and people during the pandemic.
- Recruitment checks and processes were in place to ensure the staff appointed were appropriate to work with people in a care setting. Staff told us they received regular training and supervision.
- There was one sleeping staff member on shift at night time, and this was the consistent level in place. We suggested for the provider to complete night time fire drills to ensure one staff member was enough in the event that the service needed to be evacuated. After the inspection visit, we received updates from the provider team on how they planned to monitor night time staffing levels, and what their plan of approach was going forward.

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.

Learning lessons when things go wrong

- The provider team had drawn on their experiences working through the COVID-19 pandemic to continue to develop and adjust the service to meet people's individual needs. Changes to the care environment such as installing a running track and opening up a pop-up café prevented people feeling socially isolated and enabled people to continue to participate in their hobbies and interests while unable to access facilities in the local community.
- Staff told us they were kept well informed of the outcomes of any incidents or accidents. This ensured lessons were learnt and changes were implemented into practice.

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 Requires Improvement. At this inspection this key question has now improved to Good. 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; Continuous learning and improving care

At our last inspection the provider was not maintaining clear and up to date records and the quality monitoring systems did not drive service-wide improvement. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- The provider had implemented changes since the last inspection. Standards of record keeping, and the quality of information in people's care records was of a consistent standard.
- The provider had made changes in line with their action plan, as an outcome of the last inspection. This resulted in the breach of regulation being met, but also was reflected in the overall improvement in rating.
- Staff worked collaboratively with people to maintain consistently safe standards of care and support. The provider team monitored people's care closely and reviewed the levels of support provided to ensure any adjustments were made when required, particularly during the COVID-19 pandemic.
- Quality audits were in place. The provider team, and designated staff were responsible for completing regular audits, to maintain a safe care environment. The provider and registered manager recognised their own levels of accountability within this process.

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

- People and their relatives told us they could speak openly with staff and the provider team. People and their relatives were actively encouraged to give feedback and make suggestions. Relatives told us they felt the provider team, "Went above and beyond," to ensure people had a good quality of life.
- Staff told us they felt valued and cared for by the provider team. Staff gave examples of the personal and professional support given to them. Staff told us the provider team had an open-door policy.
- People's quality of life was at the centre of the care provided. Staff and the provider team treated each person as an individual. People's relatives also told us they felt supported by the staff, particularly when they were unable to visit due to the COVID-19 pandemic visiting restrictions.

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

- People and their relatives told us they felt able to speak with the registered manager or members of the provider team if they had any concerns or complaints. People and relatives said they felt listened to, and any issues were always addressed quickly, one relative stated, "They are all good communicators."
- The provider team understood their responsibilities under the duty of candour. From reviewing accident and incident records, these showed the provider team kept people and their relatives updated if something happened. This openness was also reflected in the practices of the staff team.

Working in partnership with others

- Staff worked closely with external health and social care professionals. People had continued to access medical appointments as required throughout the COVID-19 pandemic. Relatives gave positive feedback regarding the staff support people received to attend appointments.
- Care provision was a team approach. The provider team, staff, and relatives worked collaboratively with people to ensure they achieved the best quality of life and were able to be integrated fully within the local community.
- Relatives gave examples of how joint working with the staff team supported people when they were unable to go home last Christmas due to COVID-19 restrictions. This included, ensuring family traditions were maintained, such as what people had for breakfast on Christmas morning, to ensure the day was as close to people's usual Christmas experience as possible.
- The provider team were open and accepting of any feedback provided as an outcome of the inspection.