

Help At Home (Egerton Lodge) Limited

# Help at Home (Waterside Court)

## Inspection report

Waterside Court  
1 Regent Wharf Place  
Loughborough  
Leicestershire  
LE11 5BP

Date of inspection visit:  
11 August 2021

Date of publication:  
28 September 2021

### 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

Help at Home (Waterside Court) is a domiciliary care/extra care housing service providing personal care to older and younger adults with needs relating to dementia, mental health, physical disability, and sensory impairment.

People using the service live in a large modern building with 62 flats. 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 our inspection visit there were 40 people receiving personal care at the service.

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

Prior to our inspection we received information of concern about the service from people and staff. In response the provider put a new management team in place and significant improvements were made.

People said the quality of the care was much better, and well-trained, caring staff were in post. A person said, "I love it here now. It's a different place. The manager and the staff are fantastic and so kind." A relative said, "The staff have worked so hard to bring this place up to scratch."

Staff had confidence in the way the service was being managed and said any concerns they had were addressed. A care worker said, "I think this is the nicest place you could send someone, I feel I trust all the staff, and would let a relative come here."

Although some improvements were needed to written risk assessments, staff understood people's needs and how to keep them safe. A care worker said, "There are a lot of caring staff here and I've never seen poor care, but if I did, I'd tell the manager and they'd deal with it."

Staff sought people's views on the service, listened to what they said, and made changes and improvements. For example, new activities, events and meetings were introduced to give people the opportunity to socialise if they wanted to.

The cultures of the service, staffing levels, call times, and medicines management had improved, and audits introduced to ensure staff provided people with good-quality care and support. People and staff said the manager was approachable and were confident they would address any concerns raised.

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 under the previous provider was Requires Improvement (published

07/02/2020).

#### Why we inspected

The inspection was prompted in part due to concerns received around poor leadership and governance, staffing and medicines. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore 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 for the service has changed from Requires Improvement to Good. This is based on the findings at this inspection.

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

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Help at Home (Waterside Court) on our website at [www.cqc.org.uk](http://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 reinspection 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.

# Help at Home (Waterside Court)

## **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 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 an extra care scheme. It provides personal care to people living in their own flats to enable them to live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care; this inspection looked at people's personal care and support.

The manager, who was registered with the Care Quality Commission, had left the service and has since de-registered. The service was managed by one of the provider's regional managers. This meant the provider is legally responsible for how the service is run and for the quality and safety of the care provided. Following our inspection visit, a new manager was appointed and in the process of applying for registration with CQC.

#### Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to ensure senior staff would be available on site to support the inspection.

We carried out a site visit on 11 August 2021 when we visited the registered location and met with staff and people using the service.

#### What we did before the inspection

We reviewed information we had received about the service since it was registered. We sought feedback from the local authority. 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 using the service and three relatives to gain their views about the care and support provided. We spoke with the regional manager, the provider's training co-ordinator, a team leader and three care workers.

We reviewed a range of records including people's care records and a sample of medicines records. We also looked at a variety of records relating to staffing and the management of the service including audits, policies and procedures, and infection control documentation.

#### After the inspection

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

# Is the service safe?

## Our findings

Safe – this means 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 had improved to Good. This meant people were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People felt safe at the service. A person told us, "I am not frightened or worried. I feel safe with them [staff]." A care worker said, "If there was a safeguarding I would immediately tell the manager or whoever is in charge at the time."
- Staff were trained in safeguarding [protecting people from harm] and understood their safeguarding responsibilities. Some care workers said they hadn't always felt listened to when they raised concerns, but the culture of the service had changed and now managers acted quickly to address any shortfalls in people's care.
- Managers and staff followed the provider's safeguarding and whistleblowing policies and procedures. Records showed that concerns about people's safety or welfare were addressed and reported to the local authority and CQC.

Assessing risk, safety monitoring and management

- Improvements were needed to some people's risk assessments. Staff knew people well and understood how they were at risk, but this information was not always in their care records.
- The manager was aware of these issues and was reviewing and improving risk assessments and care plans to ensure they included all the information staff needed to provide safe care.
- Where necessary people had supportive technology to reduce risk, for example call bells and moving and handling equipment. A person with hearing needs had a light up doorbell to alert them if somebody was at their door.
- Staff meeting minutes showed risk was discussed by the staff team. For example, at the July 2021 meeting, staff were reminded that hot weather could pose a risk to people and staff and were given guidance on how to reduce this risk.

Staffing and recruitment

- People and relatives said staffing at the service had improved. A person told us, "There is no waiting for staff to come for a call. They phone and come to you. I have four visits each day." A relative said, "Things here are improving. They were short staffed, but they are now getting there."
- Staff also commented positively on staffing levels and competence. A care worker said, "[Manager] has employed some new staff and they're really good, [they have the] right attitude. We have a good staff team now with four more due to start."
- The manager had increased the number of staff on duty during the day to ensure they could meet people's needs. Night staffing levels had not increased, but the manager said if a person had extra needs at

night, for example if they were unwell, they would put a further member of staff on duty.

- The manager had reviewed the timing and length of calls and found that some people's calls were too long or too short in relation to their needs. They raised this issue with the local authority and requested they review people's needs to ensure staff have the right amount of time to support them appropriately.
- Since the new manager took over there have been no missed calls. A staff member checked call logs daily to ensure calls had been made and personal care given as planned. Any shortfalls were reported to the manager for action.
- Staff were no longer shared with another service owned by the provider. This meant they could focus solely on supporting people at Waterside Court. People now received a weekly rota so they had advance notice of which staff would be providing their care.
- Staff training had improved. A person said, "The staff are better trained now than before." A care worker told us, "I have had all the training I need." The provider's training coordinator had brought induction and other essential training up to date, and dates for future training were shown on the service's training matrix.
- Staff were safely recruited with managers following the providers recruitment policies and procedures. Staff records showed pre-employment checks were carried out to ensure staff were suitable to work in a care environment.

#### Using medicines safely

- People were satisfied with how staff gave them their medicines. A person said, "They [staff] do my tablets and aren't late with my medication." Another person told us staff intervened when they stopped taking their medicines. They said, "The staff were not happy [and] got on my nerves asking me questions about the tablets. I started to take my tablets again." This was an example of staff intervening to support a person to take their medicines as prescribed.
- Medicines management had improved. When the manager took over 15 different pharmacists were supplying medicines to people at the service. This meant multiple records and systems were in place. Following consultation with people, the manager negotiated a free single pharmacy service for the 16 people using medicines. People signed their agreement/consent to this service which the manager said was simpler and easier to administer.
- The service had a new medicines lead who had an hour a day to check medicines had been correctly administered and recorded. This reduced the likelihood of medicines errors occurring.

#### Preventing and controlling infection

- The service was COVID-19 free throughout the pandemic. All people and staff were double-vaccinated and regularly tested. Staff followed the provider's policies and procedures to protect people from the risk of infection.
- There were good stocks of personal protective equipment (PPE) and staff wore masks, gloves and aprons in line with government guidance. Staff understood the importance of regular hand-washing and other infection control practices. Staff cleaned communal areas and, where necessary, supported people to keep their flats clean.

#### Learning lessons when things go wrong

- The service kept a record of accidents and incidents and analysed these to learn lessons and reduce the risk of re-occurrence.
- When mistakes were made these were addressed. For example, a person who requested female carers only was sent a male carer. To prevent this happening again the manager changed the service's computerised allocation system so people's choices and preferences could be met through the allocation of staff.



# 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 our last inspection this key question was rated as Requires Improvement. At this inspection this key question has 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.

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

- People and relatives were satisfied with the quality of the care. A person said, "I've been here for [several] months and I am doing very well. I love it here. The staff are very friendly and look after you. Nothing is too much trouble for them." A relative told us their family member's health and well-being had improved since they started using the service.
- Prior to our inspection we received information of concern about poor management and leadership at the service. People and staff said they hadn't been listened to when they raised concerns. There had been a delay in the provider recognising the problems at the service. The manager said this was because quality visits to the service had been suspended due to COVID-19.
- Since then the provider had put a new management team into the service and the previous registered manager had left and since deregistered with CQC. People and staff said the service had improved significantly and they were pleased with the changes made which included regular opportunities to speak out and share their views on the service.
- The service celebrated and supported equality and diversity. The culture was open, inclusive and empowering and people and staff were encouraged to be themselves and make their own lifestyle choices.

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 manager understood their responsibilities with regard to duty of candour. They were open and honest when incidents occurred and liaised with the local authority, CQC and other relevant agencies.
- People said the manager was approachable. A person told us, "[Manager] is brilliant, lovely, and is a good manager. You can tell [manager] anything." A staff member said, "If I have any concerns, I tell [manager] and they sort it out straight away."

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- All areas of the service were audited and managers and staff worked to action plans to address any shortfalls identified. Senior staff were taking the lead in improving key areas for example, care plans, medicines and staff training.
- A staff member said, "Things have changed for the better but it's a process and we're working hard as a team to make this a top quality service. Already the atmosphere is better and staff and service users are happier."

- The manager carried out daily audits and 'spot checks' to ensure the service was running effectively. The focus was on providing personalised care and giving people the opportunity to be more independent and active if this was what they wanted.

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

- People had regular quality assurance visits where they had the opportunity to raise any issues or concerns they might have. Records showed people were satisfied with the improvements made. One person had said, "The scheme is a much happier place now."
- Service user meetings, which stopped during the COVID-19 pandemic, had been re-instated. A meeting was planned for the month of our inspection visit and advertised in communal areas.
- Staff supervisions were ongoing. They gave staff the opportunity to discuss training and career development opportunities and to feedback on the service. A care worker said they were a positive experience and made them feel valued and appreciated.

Continuous learning and improving care

- Managers and staff were committed to improving the service. Records showed most concerns raised by people and staff had already been addressed and resolved although there was still some work in progress.
- Following an audit of people's views, the manager identified that some people had become isolated during the pandemic. To counteract this staff organised events to bring people who wanted company together. These included a monthly bistro night with a visiting chef, bingo, and a 'knit and natter'. People said they enjoyed these activities.

Working in partnership with others

- At the time of our inspection visit the service was working with the local authority to review some placements and ensure people were safe at the service.
- People received care from healthcare professionals, including GPs, chiropodists, opticians and chiropodists. For example, a relative said their family member had regular visits from a community nurse to support them with a health condition.