

Nestlings Care Ltd

# Woodhall House

## Inspection report

City Gate  
Gallowgate  
Newcastle Upon Tyne  
NE1 4PA

Date of inspection visit:  
23 January 2023

Date of publication:  
23 February 2023

### Ratings

Overall rating for this service	Inspected but not rated
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Is the service safe?	Inspected but not rated
Is the service well-led?	Inspected but not rated

# Summary of findings

## Overall summary

### About the service

Woodhall House is a children's home providing treatment of disease, disorder or injury to up to three people. The service provides support to children and young people aged between 10 and 18 years who have difficulties with emotional wellbeing and mental health. At the time of our inspection there were three children using the service.

Ofsted are the lead regulator for Woodhall House as it is a children's home. The service is also registered with the Care Quality Commission for the regulated activity of treatment, disease, disorder or injury.

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

The provider had taken steps to make improvements to the services provided since the last inspection visit.

Prescribed observations of children were better documented, and records reviewed indicated that these had been undertaken consistently, reducing the risk of potential harm to children who used the service.

Risk management plans reflected the most up to date information about known risks and provided enough guidance for staff to follow in keeping children safe from harm.

Investigations into reported incidents were more detailed and had been reviewed by managers. Actions had been identified to reduce the risk of similar incidents happening again. This could be further strengthened if the provider considered ways to make sure that there was a formal policy or procedure to support staff in how to manage lower level incidents.

The provider had strengthened the systems that were used to maintain oversight of the services provided. For example, audits had been used in a meaningful way so that further improvements had been made when needed.

Managers had a better understanding of risks that were present at Woodhall House and steps had been taken to reduce these as much as practicably possible.

Since our last inspection, managers had developed a better understanding of the risks that were present at Woodhall House. Although overall risks had been better managed, further work was needed to make sure that there were clear policies and procedures in place to support staff in how to document and manage all levels of risk.

### Rating at last inspection and update

CQC do not currently rate services that are defined as being a children's home and which are also registered with Ofsted.

Following our last inspection, the provider had taken steps to improve the services provided.

At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Why we inspected

We undertook this targeted inspection to check whether the Warning Notice we previously served in relation to Regulations 12 and 17 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 had been met.

We use targeted inspections to follow up on Warning Notices or to check concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about.

#### Recommendations

We have made a recommendation that the provider consider ways in which to better document the expectations of how lower level incidents should be managed in appropriate policies and procedures, providing better guidance for staff to follow.

We have made a recommendation that the provider consider implementing formal policies and procedures to support staff which clearly outline the expectation of how organisational risks are identified, documented, escalated and managed.

#### Follow up

We will meet with the provider following this report being published to discuss how they will make further changes to the services provided. We will work with the local authority to monitor progress. We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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 inspected but not rated. We have not looked at all of the key question at this inspection as this was a targeted inspection.

**Inspected but not rated**

### **Is the service well-led?**

The service was inspected but not rated. We have not looked at all of the key question at this inspection as this was a targeted inspection.

**Inspected but not rated**

# Woodhall House

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check whether the provider had met the requirements of the Warning Notice in relation to Regulation 12 (Safe care and treatment) and Regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

#### Inspection team

The inspection team consisted of a CQC children's services inspector as well as a children's services manager.

#### Service and service type

Woodhall House is a children's home, providing support to children and young people aged between 10 and 18 who have difficulties with emotional wellbeing and mental health.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

#### Notice of inspection

This inspection was announced at short notice which means that that the provider was aware of the inspection before we arrived on site.

#### What we did before the inspection

The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make.

#### During the inspection

During the inspection visit we spoke to people who lived at Woodhall House along with their parents and carers. We spoke to staff members, including managers, as well as members of the senior leadership team.

We reviewed information during the visit, such as policies, procedures and personal records. The provider also sent us information following the inspection visit.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

### Assessing risk, safety monitoring and management

At our last inspection we found that risk management plans did not always contain up to date information which reflected the key risks for individual children. This placed people at risk of harm. This was a breach of regulation 12(1) 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 12.

- All children had risk management plans which contained key information as well as now reflecting all risks that had been identified to support staff in keeping them safe. We saw evidence that regular risk reviews had been undertaken to determine if any further action was needed and positive behaviour support plans had also been completed.

At our last inspection we found that prescribed observations had not always been completed as expected. This placed people at risk of harm. This was a breach of regulation 12(1) 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 12.

- We saw that improvements had been made since our last inspection. The provider had taken action to change the way that observation records were completed, supporting staff to make sure that all observations of children were better documented. The improvements made had included the delivery of additional training, as well as updating relevant policies and procedures.

- Staff who we spoke with during the inspection told us they understood the changes that the provider had made and were aware of the records that they were expected to complete.

- We sampled observation records between 1 January and 23 January 2023 for all three children who lived at the home, finding that they had been completed fully on all occasions.

## Learning lessons when things go wrong

At our last inspection we found that reported incidents had not been investigated in a way that reduced the risk of similar incidents happening again. This placed people at risk of harm. This was a breach of regulation 12(1) 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 12.

- At our last inspection, we found that the system used for reporting and managing incidents had been strengthened. During this inspection, we found that the changes made had been sustained and that previously revised incident reporting forms had been better used.
- We reviewed all incidents that had been reported between 28 October 2022 and 23 January 2023, finding that the detail of incidents had been documented clearly by staff. Managers had reviewed all reported incidents and had documented actions that were needed to reduce the risk of similar incidents happening again.
- However, although we found identified actions that we sampled had been completed, this had not been documented consistently on the incident reporting forms. This meant that there was an increased risk that managers would not always have oversight of whether all identified actions had been completed.



# 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.

The purpose of this inspection was to check if the provider had met the requirements of the warning notice we previously served. We will assess the whole key question at the next comprehensive inspection of the service.

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

At our last inspection we found that systems had not always been effective in monitoring the services provided. For example, making sure that prescribed observations had been completed as expected. This placed people at risk of harm. This was a breach of regulation 17(1) 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.

- Since our last inspection, the provider had taken steps to further strengthen systems that were used to maintain oversight of the services provided.
- We saw evidence that additional audits had been implemented. For example, a weekly audit had been introduced to monitor the completion of prescribed observations of children. On reviewing audit records, we found that these had been completed consistently between 28 October 2022 and 23 January 2023, meaning that managers had been aware when further improvements had been needed.
- Importantly, we also found that managers had taken action when areas that had needed further improvement had been identified. Recent records of audits along with observation records that we sampled indicated that improvements had been made and sustained as a result of this.
- The provider was committed to strengthening the governance and oversight of the services provided even further and had drafted a revised governance structure which was due to be implemented shortly after the inspection visit.

At our last inspection we found that some policies did not always reflect current practice to support staff. This placed people at risk of harm. This was a breach of regulation 17(1) 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 made sure on most occasions that changes which had been made since our last inspection had been reflected in appropriate policies and procedures. For example, the observations policy had been updated to reflect the additional documentation that had been introduced for staff to complete.
- However, although we found that all levels of reported incidents had been better managed, the provider had not yet updated policies and procedures to support staff by outlining the expectations of how to document and manage lower level incidents.

We recommend the provider consider ways in which to better document the expectations of how lower level incidents should be managed in appropriate policies and procedures, providing better guidance for staff to follow.

At our last inspection we found that risks had not always been identified or had not always been mitigated as much as practicably possible. This placed people at risk of harm. This was a breach of regulation 17(1) 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.

- Since our last inspection, managers had developed a better understanding of the risks that were present at Woodhall House. This increased oversight had led to more actions being taken to reduce identified risks as much as practicably possible. The provider had used tools such as formal risk assessments to document and manage some risks that had been identified.
- Although overall risks had been better managed, further work was needed to make sure that there were clear policies and procedures in place to support staff in how to document and manage all levels of risk.

We recommend the provider consider implementing formal policies and procedures to support staff which clearly outline the expectation of how organisational risks are identified, documented, escalated and managed.