

Watermoor House RCH

# Watermoor House

## 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

Watermoor House is a residential care home providing accommodation and personal care to 29 older people and people living with dementia at the time of the inspection. Watermoor House can accommodate up to 38 people in one adapted building which has a range of communal areas, an external courtyard and outdoor areas people can use.

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

People and their relatives told us Watermoor House was a safe home, which met people's needs.

People's risks were assessed and managed. Where possible, people were involved in decisions regarding their care and potential risks, enabling them to take 'positive' risks. People were supported by staff with their physical, mental and spiritual needs.

Staff understood their responsibilities to protect people from avoidable harm. The registered manager and provider acted in accordance with the duty of candour. People's relatives told us they were kept informed of any changes and spoke positively of the communication they had received from the service during the Covid-19 pandemic.

People's medicines were safely managed and administered. The registered manager, medicines officer and provider ensured robust systems were in place for the management of people's medicines. These systems enabled them to identify any errors, promoting people's wellbeing and staff learning.

Staff had received the training and support they required to meet people's needs. Staff spoke positively about the support they had received from the registered manager during the pandemic. The registered manager and provider focused on staff wellbeing and promoting a whole home 'caring' culture.

The registered manager and provider had implemented robust governance systems to monitor the quality of care people received. The Board of Trustees (which oversees) the home, received reports from the registered manager, including specific reports in relation to the management of the home and people's needs during the pandemic.

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 and update:

The last rating for this service was Requires Improvement (report published 25 October 2019) and we identified three breaches of the regulations. This included a breach of regulation 19 (Fit and proper persons employed), regulation 12 (Safe care and treatment) and regulation 17 (Good Governance). We imposed a condition on the provider's registration. This included providing CQC with regular service improvement updates.

We found significant improvements had been implemented and sustained at this inspection and the provider and registered manager were now meeting all of the relevant regulations.

#### Why we inspected

We undertook this focused inspection to identify if the service had improved and to confirm they now met the legal requirements. We also 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 coronavirus and other infection outbreaks effectively.

This report only covers our findings in relation to the Key Questions Safe and Well-led which contain those requirements. 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.

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

#### Enforcement

We imposed conditions on the provider's registration following our previous inspection (published on 25 October 2019). This required the provider to send us a monthly update of progress made to improve the service. We will discuss with the provider if they wish to apply to remove these conditions.

#### Follow up

We will return to visit as per our 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.

# Watermoor House

## 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

Watermoor House 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 announced. Due to pressures from COVID-19 we gave the service 48 hours' notice of our visit.

Inspection activity started on 24 September 2020 with a visit to the care home and continued with desk top activity which ended on 1 October 2020.

#### What we did before the inspection

We reviewed the information we held about the service since the last inspection. We reviewed information

we had requested from the registered manager in relation to a range of the service's management and quality assurance systems. 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.

#### During the inspection

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We reviewed the arrangements for safe administration and management of people's medicines, including relevant records. We looked around the building and reviewed housekeeping and social distancing arrangements. We spoke with the registered manager, medicine management officer and three other members of staff, both care and housekeeping.

#### After our site visit

We sought and received feedback from 14 people's relatives and friends/visitors of Watermoor House. We spoke with the Chair of Board of Trustees for Watermoor House.

# 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 improved to Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

At the last inspection in June 2019 the provider and registered manager had not always ensured people's prescribed medicines were managed safely, and that the risks associated with people's care had not always been assessed. This was a breach of Regulation 12 (safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Additionally, the provider and registered manager had not always ensured staff were of good character before they worked at the home. This was a breach of Regulation 19 (fit and proper persons employed) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. Following the inspection, the provider supplied us with monthly information about the actions they had taken. They discussed the actions they had taken as part of an emergency support framework call with CQC in May 2020. At this inspection we found improvements had been made and the regulations were now being met.

Using medicines safely.

At our last inspection the provider had failed to ensure people's medicines were managed safely. Topical creams which were flammable had not been clearly identified. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- People's prescribed medicines were managed safely. There were robust systems in place for the safe storage, administration and disposal of people's prescribed medicines. Any medicines which were flammable had clear warning labels in place. These medicines were routinely audited to ensure any risks were identified.
- Staff kept a clear record of people's medicine stocks, and these were checked daily and audited both weekly and monthly by care staff and the management team. These audits identified any errors or instances where people had not received their medicines as prescribed. This enabled staff to take effective action to maintain people's health and wellbeing and reflect on their practice.
- People were supported to administer their own medicines where appropriate. Staff assisted people with the supply of these medicines. Staff had systems in place (with the agreement of people) to ensure people had the support they required and protect them from avoidable harm.

Assessing risk, safety monitoring and management

At our last inspection the provider had failed to ensure people's needs and risks were assessed and that staff had the information they required to protect people from avoidable harm. This was a breach of regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found the provider was meeting this regulation.

- People's needs were assessed, and staff knew how to protect people from avoidable risks. One person was at risk of falls. Staff worked with the person to reduce the risk of falls, including reviewing the equipment they used and seeking the advice of external professionals. The person was supported to make decisions and take positive risks to maintain their independence.
- One person was living with diabetes. There was clear guidance in place for care staff to follow to maintain the person's health and wellbeing. This included guidance on when to use medicine and the action they should take if the person became unwell.
- Staff had guidance on how to assist people who could become anxious. There were clear plans in place personalised to the person on how staff should assist them. Staff understood what was important to people and the reassurance they required.
- People could be assured that the building, equipment used to meet their needs were safe. The registered manager and staff ensured the building was maintained and that all equipment was serviced and fit for use. There were clear fire safety processes in place, including personalised emergency evacuation plans for each person.

### Staffing and recruitment

At our last inspection the provider had failed to ensure staff were of good character before they worked at Watermoor House. This was a breach of regulation 19 (Fit and Proper Persons) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. At this inspection we found the provider was meeting this regulation. The regulation was now being met.

- People were protected against the employment of unsuitable staff because robust recruitment procedures were followed. Checks had been made on relevant previous employment as well as identity and health checks. Disclosure and Barring Service (DBS) checks had also been carried out. DBS checks are a way that a provider can make safer recruitment decisions and prevent unsuitable people from working with at risk groups.
- People were supported by enough staff who had been recruited safely. We observed staff spending time with people throughout our inspection. Relatives felt prior to the pandemic there were enough staff in place to meet people's needs and hadn't felt this had changed. One relative told us, "There appears to be an exceptionally low turnover of staff which I find comforting."
- Staff told us there were enough staff and time to meet people's needs in the way they liked. Comments included: "There is always plenty of staff on shift, we have time to spend with people, it's particularly important at the moment (Covid-19 pandemic)" and "We have enough staff to really look after people, physically and mentally."

### Preventing and controlling infection

- The service had ensured that all staff had received training in relation to Covid-19, which included personal protective equipment (PPE) training from the local fire and rescue service and a bespoke training session. The registered manager ensured all staff received up to date information on Covid-19 included changes in government guidelines. Staff understood the provider's expectations. One member of staff told us, "We have all the information and PPE we require."
- The provider had ensured all staff had appropriate PPE. Senior staff carried out spot checks on staff. This enabled them to ensure staff wore PPE as expected. During our inspection we found that staff used PPE appropriately and ensured visitors (including contractors) to the home used PPE and followed social distancing guidelines to protect people from avoidable harm.

- The home was clean throughout the course of our inspection. Housekeeping staff told us they had enough staff, time and resources to ensure the home was clean and free from any unpleasant odours.

#### Systems and processes to safeguard people from the risk of abuse

- Staff were able to describe the arrangements for reporting any allegations of abuse relating to people using the service and contact details for reporting a safeguarding concern were available.
- The registered manager was aware of their responsibilities in reporting any concerns or incidents of abuse. Safeguarding processes had been followed appropriately where necessary.

#### Learning lessons when things go wrong

- The registered manager ensured lessons were learnt when things went wrong. Whenever a medicine error had occurred, staff were supported to reflect on this incident. Any learning was then shared in team meetings to help implement improvements.
- Systems were in place for staff to report and record any accidents and/or incidents. The registered manager worked with healthcare professionals to assess and manage people's risks.
- The registered manager and staff used observations and supervisions to identify and follow up on any shortfalls. Staff were supported to reflect on their own practice and identify actions or support they required to develop their personal skills. Staff spoke positively of the support they received from the registered manager and provider.

# 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 Inadequate. At this inspection this key question 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.

At our last inspection the provider had not operated effective good governance systems to maintain and improve the quality of care people received. This was a breach of regulation 17 (Good Governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. We imposed conditions on the providers registration for Watermoor House. These conditions required the provider to submit monthly information in relation to the management of the service. We originally planned to visit in April 2020. However, this was delayed due to the Covid-19 pandemic national lockdown. During this time the provider and registered manager had effective systems in place to maintain the quality of the service.

### Continuous learning and improving care

- The registered manager and provider had implemented robust systems to monitor and improve the quality of care people received. These systems were carried out by the registered manager, the deputy manager and care officers. This gave staff ownership of certain auditing processes, such as the management of medicines.
- The registered manager and care officers carried out a comprehensive range of audits, which included people's prescribed medicines, infection control, health and safety, Covid-19, incidents and accidents and people's care plans. Audits were carried out every month, with medicine audits being carried out weekly. Medicine audits evidenced a reduction in incidents of administration errors and of recording errors on people's medicine administration charts. Any shortfalls identified in the medicine audits were fed back to staff through meetings and clear actions were implemented.
- The registered manager had adapted their audits during the pandemic to focus on areas they had identified as important, such as PPE, cleanliness and the wellbeing of people. Additionally, the registered manager had implemented Covid-19 care plans for each person and was able to generate a report of any concerns around Covid-19 to the Board of Trustees.
- The deputy manager and registered manager carried out a number of spot checks of staff, as well as a documented daily walk around of Watermoor House. Any concerns identified were addressed through staff meetings and one to one supervision meetings. The aim of these processes was to identify any issues and drive improvements.

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

- People's relatives spoke positively of the service and told us that communication had been good during the pandemic, which put their minds at rest. Comments included: "Watermoor House has sent me monthly updates and requested my views. I am in regular contact with many staff"; "The team have been in regular

contact by email to update me on changes" and "They have been outstanding during this lockdown at keeping us informed and in contact with [relative]." A member of a local Mind Song group (focusing on music for older people and people living with dementia) who solely visited Watermoor House told us, "We are very well communicated with, and always in a polite and friendly way. We are made to feel appreciated for our efforts."

- People, their relatives and staff views had been sought regarding how the home had managed during the Covid-19 pandemic. The registered manager had collated all responses they had received from the surveys and had created an action plan, which included actions around reducing people's loneliness due to the restrictions of the pandemic and facilitating more physical activities. One person's relative told us they felt the service had managed well during the pandemic, "Exceptionally well, since there have been no infections and no deaths attributable to Covid-19 I think the facts speak for themselves."
- The deputy manager carried out daily walkarounds of the home, they used this as an opportunity to engage with people and seek their views, as due to social distancing, full home meetings were not possible. They documented people's views and any needs they had.
- The activity co-ordinator ensured people's views were sought on activities carried out in the home. This enabled them to provide a tailored activity plan which promoted people's physical, mental and spiritual wellbeing.
- Care staff were provided with clear information about people's needs and the provider's expectations. Staff informed us they were involved in discussion changes and were given the information and reassurance they required during the pandemic.

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

- Staff were supported by the registered manager and provider and understood their individual roles in supporting people. Comments included: "[Registered manager] is incredibly supportive, really gives us the support we need to ensure the residents get the best support" and "[Registered manager] will always give us an answer if we have a question. She looks after us. They have provided us with reassurance, brilliant."
- The provider and registered manager had a clear overview of the training needs of all staff. They had ensured staff received Covid-19 specific training during the pandemic. The registered manager used one to ones to discuss staff needs and any training they would like.
- The registered manager and provider were fully aware of their legal responsibility to notify CQC of notifiable events. The provider understood their responsibility to be open and honest when an incident had occurred. They had demonstrated this when following up concerns; they had ensured people and their representatives, as well as appropriate authorities, had been informed.

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

- Relatives and visitors of Watermoor House spoke positively about the ethos and caring culture of care staff. Comments included: "[Registered manager] and her senior team are all doing a great job in what is a very difficult period. I would have no issues to recommending the home for loved one"; "In my opinion Watermoor is so successful because the staff do so much extra for the residents," and "I think they set a wonderful standard. The staff at Watermoor are special. The residents are treated with respect, care, love and humour."
- Care staff spoke positively about the caring ethos and culture the registered manager instilled in the home. Staff spoke positively about how the provider and registered manager supported them and their wellbeing, which enabled them to focus on people's wellbeing. One member of staff told us, "We are fully supported, there is a clear ethos on promoting people's wellbeing. We remember people come here to live,

and they should be supported to follow their interests as much as possible."

- The registered manager had implemented clear support for all staff during the pandemic. This included carrying out wellbeing phone calls to staff who had to self-isolate during the pandemic. They also had wellbeing action plans in place for staff if they required. Where staff had taken annual leave and been stuck in difficult situations due to changes in lockdown rules, the registered manager ensured these staff were supported. The registered manager spoke positively of the support they received from the board to provide this support and the positive impact it had on staff and the people living at Watermoor House.

Working in partnership with others

- The registered manager and provider recognised the importance of working with other agencies and seeking their support. The registered manager actively engaged in support networks for care services in the area. The service worked alongside their supplying pharmacist to manage a change in their medicine administration system.

- The registered manager and provider had sought the support of local authority resources during the pandemic, which included support in the training of PPE. The registered manager spoke positively about the support they had received from local healthcare services.