

Accomplish Group Limited

Woodlands

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Requires Improvement ●

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

We carried out this unannounced inspection on the 6 November 2018. At our last inspection we rated the service good. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

Woodlands is a care home that provides care and support for 6 people who are living with mental health conditions. 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. There were 5 people living at Woodlands at the time of the inspection and one person was currently in hospital.

There was a registered manager at the service who was present throughout the inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People were supported by staff who understood the signs of potential abuse and the appropriate steps to take should they have concerns. Whilst the service had managed people's daily risks well we found one instance where they had not identified safety risks or put plans in place to mitigate these risks. Following the inspection the registered manager advised that this event was being investigated and that procedures would be put in place to minimise the risk of a similar event occurring.

People received support to take their medicines safely by staff who had been assessed as competent to provide this support. Medicines were stored safely and there were systems in place to regularly check that people's medicines were given as prescribed.

People were supported by staff who had the skills and knowledge to meet their needs. Staff training had been provided around people's individual needs including training on mental health conditions. People had their healthcare needs met and were assisted to have foods and drinks they enjoyed.

People were supported to have maximum choice and control of their lives and staff supported people in the least restrictive way possible. The policies and systems in the service supported this practice. People were supported by a range of healthcare professionals as required to promote their physical and mental health.

Staff demonstrated that they enjoyed their work with the people who lived at the service. We saw people were relaxed around the staff and natural conversations took place throughout the day. People had their independence encouraged and promoted in many aspects of their lives.

People were involved in planning daily aspects of their care to ensure it met their individual needs. Formal

reviews of people's care took place to ensure the care provided continued to meet their needs. Many people had a full and active life and took part in activities that were of interest to them.

People were involved in monitoring the quality of the service. The provider had monitoring systems in place to ensure the service continued to be safe and of a good quality in line with people's needs and wishes.

Further information is in the detailed findings below.

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 has deteriorated to Requires Improvement

Requires Improvement ●

Is the service effective?

The service remains Good

Good ●

Is the service caring?

The service remains Good

Good ●

Is the service responsive?

The service remains Good.

Good ●

Is the service well-led?

The service remains Good

Good ●

Woodlands

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This comprehensive unannounced inspection took place on 6 November 2018 and was carried out by one inspector.

As part of the inspection we looked at information we already had about the provider. Providers are required to notify the Care Quality Commission about specific events and incidents that occur including serious injuries to people receiving care. We refer to these as notifications. Before the inspection, the provider had completed a Provider Information Return (PIR) and returned this to us within the timescale requested. This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed the information from notifications and the PIR to plan the areas we wanted to focus our inspection on. We received feedback from the local authority about the provider. The local authorities are responsible for funding people receiving care and for monitoring the quality of care provided.

We spoke with three people, the registered manager and three staff. We spent time in communal areas observing how care was delivered. We looked at records including two people's care plans and medication administration records. We looked at one staff file to review the provider's recruitment process. We sampled records from staff training plans, incident and accident reports and quality assurance records to see how the provider monitored the quality and safety of the service. As part of the inspection, we sought the views of one relative of a person using the service.

Is the service safe?

Our findings

At our last inspection on 7 June 2016 we rated the service as 'Good.' At this inspection the rating has changed to requires improvement as the service had not consistently mitigated risks to people.

Our inspection identified a concern that had not been identified by the service and had put people, visitors and staff at potential risk of harm. Whilst some controls had been put in place, consideration of all the risks associated with the situation had not occurred. No action had been taken to review the event or to put steps in place to ensure that should a similar event happen again that people would be safe. The registered manager had not recognised this was a safety concern and therefore had not done everything possible to mitigate the risks associated with the situation. Following the inspection we received confirmation from the registered manager that this event was being investigated and that changes would be made to reduce the risk of a similar situation occurring again. Whilst this risk had not been appropriately managed we saw that there were systems in place to identify everyday risks associated with people's care. Assessments had taken place with other professionals involved in people's care in order to put strategies in place to minimise identified risks to people.

The provider had ensured that the premises were safe and suitable to meet people's needs. Regular maintenance checks were carried out. We saw that fire safety systems had been checked and that each person had an evacuation plan in case of a fire. However, we found that one piece of equipment to be used in an emergency situation had not been monitored or maintained. Following the inspection the registered manager provided us with evidence that systems had been put in place to make sure this was rectified.

Whilst we found that improvements were required in these two areas we found that the service had continued to provide safe care in other areas.

People were supported to take their medicines safely. We saw that medicines were administered in a dignified way. All staff responsible for administering medicines were required to undertake training in safe medication administration and to have their competency tested before they were allowed to administer medicines. We saw that there was information available to staff about when people may need their medicine on an as required basis. There were systems in place to ensure people received their medicines safely.

People were supported by staff who understood the signs of abuse and appropriate action to take should they have concerns. Where people's behaviours put them at risk of abuse, the service had put measures in place to reduce the likelihood of this occurring.

On the day of the inspection there were sufficient staff available to support people. Staff told us that they thought there were sufficient staff available to support people. Staff confirmed the necessary recruitment checks were carried out prior to them starting work at the service. Records we sampled showed the provider's recruitment process had been followed and included obtaining a Disclosure and Barring Service Check (DBS) to check whether staff were safe to work with people.

People were protected from the risk of infection. Staff had access to personal protective equipment (PPE) and cleaning materials. People were encouraged to clean their own bedrooms independently. Systems were in place to monitor and ensure the cleanliness of the home.

Where behavioural incidents had occurred, we saw there were systems in place to firstly check on the person's safety. These incidents were reviewed to determine if anything could be changed to reduce the chance of a reoccurrence and to see if there were any patterns in incidents. The provider monitored incidents that had occurred to ensure the registered manager had completed certain actions within a set timescale.

Is the service effective?

Our findings

At our last inspection on 7 June 2016 we rated the service as 'Good.' At this inspection the rating remains unchanged.

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 with appropriate legal authority. 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. People told us they were offered choices in their care and we saw this carried out in practice. Staff and the management team had a good understanding of how to support people in line with the MCA and one staff member told us their understanding was, "Trying to help them [people] in their best interests." Where it was thought a person may lack capacity to make a specific decision we saw that assessments and best interest meetings had been carried out. The service had identified that some restrictions on care were needed to keep people safe. In these instances, the registered manager had made appropriate applications for a DoLS and had notified CQC of these authorisations in all but one case. The registered manager has submitted this notification following the inspection.

Staff had the skills and knowledge to meet individual people's needs. Staff informed us they had received an induction and additional planned training which equipped them with knowledge of people's individual needs and in mental health. One staff member told us, "I love the training and always want to do more. The company has really good informative training." Systems were in place to ensure staff knowledge was kept up to date and in line with legislation.

People were supported to eat and drink sufficient amounts to maintain their health. People could freely access the kitchen whenever they wished and we observed people making their own drinks throughout the day. The kitchen was a central hub of the home where people sat and chatted with one another and staff throughout the day. Menus were planned around people's known preferences and considered people's cultural requirements. Alternatives were readily available. People were asked individually what they would like to eat and were encouraged to eat a healthy diet.

People had regular input from professionals to maintain their healthcare needs. A number of health professionals were involved in monitoring people's general healthcare needs. Where people had refused healthcare input we saw that the service had tried many ways to support the person. We saw instances where the service had been proactive in sourcing medical advice when people's healthcare needs had changed. The service had ensured staff had access to information about people's individual needs in

relation to their health so that staff could work consistently and effectively in supporting people.

Staff knew people well and could see when people needed immediate support with their mental health needs to prevent further decline. People had named professionals to support them with their on-going mental health needs and also in a mental health crisis. Where people were in a mental health crisis, additional monitoring was carried out and appropriate healthcare support had been sought. One person told us, "They spoke to the right people and got me sectioned. When I come home they always welcome me back." People had a mental health support plan and associated risk assessments.

Is the service caring?

Our findings

At our last inspection on 7 June 2016 we rated the service as 'Good.' At this inspection the rating remains unchanged.

Throughout the inspection visit we saw people approach staff at ease and talked freely with them in a relaxed conversation style. Staff knew people well and the service had a homely environment. Staff explained that they got to know people through talking with them to find out their likes and dislikes. One person told us, "I love it here, it's my home." Another person told us, "I get on with staff." A further person said, "I like it here."

People had been supported to maintain their independence through all aspects of their care. We saw that throughout the day people accessed the kitchen to make their own drinks and to help prepare food. One person told us that they went to the supermarket with staff to buy the food they wanted. Where it had been assessed as safe to do so, people accessed the community independently and had their own set of front door keys so they could come and go as they wished.

We were provided with examples of how the service had worked with people over a period of time to stabilise their mental health and in turn increase their independence. This had resulted in one person getting their driver's licence back and moving into their own flat. The service had achieved many positive outcomes for people over time that resulted in improvements to people's overall well-being.

People were supported to maintain their dignity and their privacy was respected. We saw that people were encouraged to maintain their personal appearance and prompts were given in a discreet and respectful manner.

The service had pet chickens in the garden and had acquired two rabbits for one person following their request. The rabbits were the responsibility of the person who had named them and took care of them on a daily basis. This enhanced the person's self-worth and sense of responsibility.

Staff we spoke with enjoyed supporting people at the home. One staff member told us, "I like seeing them progress and seeing them happier in themselves. It could mean everything to them." Another staff member told us, "When you've achieved something.... It makes you feel really good."

People who wanted to were supported to keep in touch with friends or family who were important to them. Some people went to stay with family for short periods at their request. People also had the opportunity to have friends visit the home. Advocacy services had been requested where necessary to ensure people had access to independent support when making decisions about their care.

Is the service responsive?

Our findings

At our last inspection on 7 June 2016 we rated the service as 'Good.' At this inspection the rating remains unchanged.

People had a full and active life and were encouraged to be part of the local community. People told us about the activities they had recently taken part in which included trips to the sea life centre and a local theme park. One person told us, "They never say no to activities." We saw throughout the inspection that where people had requested to go out in the community, staff were available to support people to do this. The service had supported one person to go to college and to become part of a local community group. Activities were planned with the person and also occurred on an adhoc basis. People were encouraged to engage in activities of interest to them.

People were actively involved in all aspects of their daily support needs. Staff were aware of people's likes, dislikes, interests and preferences for care, and spent time with people getting to know them. Whilst some aspects of people's care plans had not involved the person due to the impact it would have on their mental health, they had been developed in consultation with other healthcare professionals who knew the person well.

People had their care reviewed to ensure it continued to meet their needs and preferences. Each person at the service had a keyworker who reviewed people's care needs with the person. Meetings took place in line with the person's wishes and the person chose with who and where they wanted their review to take place. People's care was also reviewed at other key times, such as after an incident, to ensure updates were made to promote the person's wellbeing and safety. Any key changes to a person's care were shared with the staff team to ensure continuity of care for the person.

There was a complaints procedure in place. Where complaints had been received we saw that the process had been followed. People were informed of their right to complain when they first moved into the home.

Is the service well-led?

Our findings

At our last inspection on 7 June 2016 we rated the service as 'Good.' At this inspection the rating remains unchanged.

The service had a registered manager in post who was present throughout our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager was supported by a deputy manager and senior staff who could provide leadership should the registered manager be unavailable. The registered manager was aware of their responsibilities to inform the Commission of specific events that had occurred at the home and had ensured the latest inspection rating had been displayed.

The service had a clear vision of enabling people to have positive outcomes in their lives. The registered manager led this vision and described the improvements in well-being for one person and confirmed, "We want to work with her for the best results." People were involved in their care and support, and there were systems in place to regularly seek people's feedback on the service and how this could be improved. One person told us that staff asked them, "What they could do to make things better."

Staff felt supported in their roles and received supervision where there was an opportunity for staff to receive support and guidance from the management team. When speaking about the management team, one staff member told us, "They are here to talk to, always available and probably the best manager I've had....I am supported yeah." Another staff member told us, "The managers are open to supporting you."

Systems had been developed to monitor the quality and safety of the service. In-house audits as well as provider checks were carried out to ensure the service was meeting the provider's expected standard. The provider had also developed a system called 'quality checkers' whereby people who accessed the service would go to different homes, owned by the provider, and comment on the quality of the care provided.

From the records we viewed we could see that the service worked closely with other healthcare professionals involved in a person's care. This collaborative working allowed a holistic view of people's needs to be achieved. The collaborative working included working closely with people's mental health teams.