

Brunelcare

# Woodland Court

## Inspection report

Woodland Court  
Partridge Drive  
Bristol  
Avon  
BS16 2RF

Tel: 01179061400  
Website: [www.brunelcare.org.uk](http://www.brunelcare.org.uk)

Date of inspection visit:  
06 May 2016

Date of publication:  
06 June 2016

### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

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

This was an announced inspection carried out on the 6 May 2016. This is a new service registered with the Care Quality Commission on 30 July 2014. We gave the registered manager 48 hours' notice of our intention to undertake an inspection. This was because the organisation provides a domiciliary care service to people in their own homes and we needed to be sure that someone would be available at the office.

Woodland Court provides personal care and support for people within their own flats. At the time of our inspection 17 people were receiving care and support from this service.

There was a registered manager in post. 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 and their relatives told us that staff were available to meet their [or their family members] individual needs. We found that staff were trained and competent to support the people who lived there effectively and safely. Staff told us and records we looked at confirmed that they received induction training and the support they needed to ensure they performed their job safely.

People told us they received their medicines safely and when they should. There was a comprehensive medicines policy in place. This was to guide staff in all medicines management procedures.

Staff understood the requirements of the Mental Capacity Act (MCA) 2005 and Deprivation of Liberty Safeguards (DoLS). We found that the registered manager was meeting the requirements set out in the MCA and DoLS to ensure that people received care in line with their best interests and were not unlawfully restricted. They knew that regarding extra care services any DoLS referral would have to be made to and approved by the court of protection.

Staff supported people with their nutrition and health care needs. We found that people were able to make decisions about their care and they and their families were involved in how their care was planned and delivered. Systems were in place for people and their relatives to raise their concerns or complaints. Staff supported people to keep in contact with their family as this was important to them.

Staff supported people to be as independent as possible. People were encouraged and supported to undertake daily tasks and attend to their own personal hygiene needs.

People received assessment and treatment when needed from a range of health care professionals including their GP, specialist consultants and nurses which helped to promote their health and well-being.

People we spoke with told us that the quality of service was good. This was confirmed by all of the relatives

we spoke with. The management of the service was stable, with processes in place to monitor the quality of the service.

## 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

Staff had received training and guidance and medicines were managed safely.

People and their relatives told us that the service was safe.

Staff knew how to support people appropriately to prevent them being at risk of abuse and harm.

There were sufficient staff that were safely recruited to provide appropriate care and support to people.

### Is the service effective?

Good ●

The service was effective.

People received effective care and support. The staff were trained to ensure they had the skills and knowledge to support people in the way that they preferred.

The registered manager and staff understood the requirements of the Mental Capacity Act 2005 and Deprivation of Liberty Safeguards. Staff ensured that people were not unlawfully restricted and received care in line with their best interests.

People were supported to eat and drink what they liked in sufficient quantities to support their health and wellbeing.

Staff communicated and worked closely with health and social care professionals to provide effective support.

### Is the service caring?

Good ●

The service was caring.

People and their relatives told us that the staff were kind and they gave people their attention and listened to them.

People's dignity and privacy was promoted and maintained and their independence regarding daily life skills and activities was

encouraged.

Staff encouraged people to make their own choices regarding their daily routines.

### Is the service responsive?

Good ●

The service was responsive.

People's needs were assessed regularly and their care plans were produced and updated with their and their family involvement.

Staff were responsive to people's preferences regarding their daily wishes and needs.

### Is the service well-led?

Good ●

The service was well led.

The registered manager knew their legal responsibilities to ensure that the service provided was safe and met people's needs.

Management support systems were in place to ensure staff could ask for advice and assistance when it was needed.

The service was monitored to ensure it was managed well. The management of the service was stable, open and inclusive.

# Woodland Court

## **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 inspection took place on 6 May 2016 and was announced. The inspection team consisted of one inspector.

Before the inspection, we reviewed all the information we held about the service. This included any statutory notifications that had been sent to us and information from the local authority. A notification is information about important events, which the provider is required to tell us about by law.

We visited one flat so as to gain their view of the service. During our visit we spoke with the registered manager, care team leader, two people who used the service, one visitor and two care workers.

We looked at three people's care and medicine records, accident records and the systems the provider had in place to monitor the quality and safety of the service provided. We also looked at three staff recruitment records, supervision and the training matrix. Following our inspection we spoke with three additional relatives by telephone to get their views on the service provided. We also contacted three social and healthcare professionals who were involved with care and support of some of the people who used the service after our visit.

# Is the service safe?

## Our findings

All people we spoke with told us that they felt safe. A person said, "I feel very safe with the girls". They are very skilful. They have to use the hoist to get me in and out of bed so they make sure I am safe. They are really good". Another said, Oh yes I feel safe here. I have known the staff for a long time. I absolutely trust them. I have no concerns at all. They are very good. The front door is always locked someone has to let you in and I always lock my door too". A relative we spoke with told us, "They take my relatives safety very seriously I have no concerns at all about their safety. I know the staff very well. They are very consistent as a team and they have been looking after my family member for a long time. I trust them". Another relative said "My relative is extremely safe with the staff. They give them a regular shower and the staff are very mindful of her safety so she doesn't fall over."

All people and relatives we spoke with confirmed that there were no concerns about abuse or neglect. A person who used the service told "I have never heard anything like that here. All the staff are very good". A relative said, "No, I am confident that mum will not face anything like that I trust the staff". Social and healthcare professionals we spoke with told us they had no concerns with the agency. One told us "They are always doing their best to keep people safe". One medical professional told us "Safety is always paramount for the service". One staff member said "Our team make every effort to make people feel secured and independent and make people feel confident in themselves. That's what makes people feel safe in themselves".

Training records that we saw and staff we spoke with confirmed that they had received training in how to safeguard people from abuse. Staff knew how to recognise signs of abuse and how to report their concerns. A staff member said, "There is nothing that I am concerned about. If I saw something I would definitely report it to the manager or the team leader. I know it would be dealt with it immediately". This confirmed that staff were aware of the reporting systems they should follow, in order to protect people who used the service from abuse.

We saw that people had pull cord call alarm in the flats to summon help in an emergency. One person who used the service told us that the 'call alarm' is very important to them as they were at risk of falls. They said, "I feel safe knowing I can use them at any time" Staff we spoke with were aware of people's safety. For example, how to minimise the risk of developing pressure sores

We saw records to confirm that risk assessments were undertaken to prevent the risk of accidents and injury to the people who used the service. These included mobility assessments, risks relating to people accessing the community and when partaking in daily living activities.

People told us staff delivered care in accordance with their care plans and records we reviewed confirmed this. Staff confirmed they undertook shopping for people who used the service. Records were made of all financial transactions which were signed by the person and the staff member. One staff member said "We make sure that it is all recorded and financial sheet completed with all the receipts. Financial risk assessments were in place when needed. For example, some people's support plans included risk

assessments about their vulnerability to financial abuse and the measures needed to safeguard their finances. One relative told us "Staff does shopping for my relative. It is always recorded and I always get the receipts and I check it whenever I visit".

Staff told us what they would do in an emergency. They gave us a good account of the actions they would take which included, reassuring the person, summoning help from other staff and dial 999 or call the GP if that was needed. They told us that they would complete accident records following the incident. This showed that staff had the knowledge to deal with emergency situations that may arise so that people should receive safe care in such circumstances.

People who used were able to manage their own medicine if they wanted to and had been assessed to do so. People we spoke with told us that they would rather the staff looked after their medicine. A person who used the service said, "staff give me my medicine that I need". Another person said, "The staff give me my medicine properly and on time". The registered manager told us that safe storage was provided in each person's flat and that was where their individual medicine and medicine records were kept.

We looked at the arrangements the provider had in place for safe management of medicines. Supporting information for staff to safely administer medicines was available. In particular we looked at four people's records who were prescribed medicines to be given 'when necessary' or 'as required'. We found that there was supporting information available that enabled staff to make a decision as to when to give the medicine. This meant that staff were able to give the medicines if and when it was needed.

We found that medicine administration records for 10 people had been correctly maintained as they should. When medicine had been received this had been accounted for on the MAR. Previous stock balances from the previous MAR had been carried over onto the MAR if it was necessary. This meant that the registered manager ensured that all medicines were accounted for.

Medication administration record charts viewed showed staff had always recorded a signature when administering people's medicines or a code to indicate why medicines had not been given. This ensured that staff were able to ascertain whether people had received their medicines in accordance with the provider's policy. There was a comprehensive medicines policy in place to guide staff on how to safely administer medicines.

People had given their consent for staff to handle their medicines. Staff had received training in medicine administration, which was refreshed every year. This was followed by a competency check to test staffs knowledge and understanding of the training. There had been one reported medicine error within the last 12 months. We saw that this was thoroughly investigated and further training and competency checks had been undertaken by the staff member concerned.

On the day of our visit we found that the service had the sufficient numbers of staff required to support people and meet their needs. The staff members told us that there were three staff in the morning, one staff in the afternoon and one staff in the evening until 10 pm.

People assured us that there were enough staff. A person told us, "The staff always come to me when they should". A relative said, "There are adequate staff. I am sure that the staff do above what they should". Staff we spoke with told us that staffing levels were adequate to meet people's needs and to keep them safe. The staff members told us they rarely used agency staff to cover sicknesses and absences by if they did the same agency was used for consistency. They told us that staff would rather take on extra hours. This meant that the provider had contingency plans in place to ensure that the people who used the service could be appropriately supported at all times by staff who knew them well.



We found that safe recruitment systems were in place. Staff we spoke with confirmed that checks had been undertaken for them before they were allowed to start work. Staff recruitment records showed that pre-employment checks had been carried out. This included the obtaining of references and checks with the Disclosure and Barring Service (DBS). The DBS check would show if prospective staff member had a criminal record or had been barred from working with adults due to abuse or other concern. Staff we asked confirmed that checks are carried out before new staff were allowed to start work. The registered manager told us, "No new staff can start work before their checks have been completed". These systems minimised the risk of unsuitable staff being employed.

# Is the service effective?

## Our findings

All of the people and relatives we spoke with told us that the service provided was effective. A person said, "It is very good here". Another person told us, "I have been here for years. It is very good". A relative said, "The service is excellent". Another relative told us "The care is effective. Whatever they are doing with my relative works. He is happy and I am happy" Another relative said " The care is effective, My relative was developed a skin condition over the years due to their medical condition but it is improving since staff at Woodland Court took over. They are very good in action sensitively when my relative needs it. It gives then very good quality of life".

The registered manager told us and records we looked at confirmed that in-house and corporate induction training was provided to new staff. This included reading policies, working with experienced staff, attending training and attending a corporate welcome. All staff we spoke with told us that they received supervision and support Records that we looked at showed that the supervision sessions had been regular. . They showed us a supervision matrix that they had produced to ensure that any shortfall in regards to staff supervision and appraisals could be identified and action taken to ensure that staff members were well supported on their roles.

Staff told us and the training matrix we looked at confirmed that they had either received all the training they needed or it had been highlighted that the training needed to be arranged. One staff member said, "I have done all my training. We all have to do the training that is required". A relative told us, "The staff are all very good. We could not wish for a better place. They [their family member] are cared for extremely well. One staff member told us "Our training is always hands on. We are never allowed to do things that we are not trained for. For example when someone came back from the hospital with a percutaneous endoscopic gastrostomy ( PEG) feeding we had to be trained for it so we can support the person properly. One relative told us "They seem to take training very seriously. The recently had training on peg feeding, That means that they have gone above and beyond even though they are not very involved" This showed that the provider had taken steps to ensure that the staff were supported and trained to ensure that they provided appropriate, safe care and support.

Staff and relatives told us that non-restrictive practice was promoted. A person who used the service said, "I go out whenever I want to and do what I want to". Another person said, "I can go to anywhere I like at any time. There are no restrictions". All staff we spoke with told us that no person's daily routine or preferred lifestyle was restricted. The Deprivation of Liberty Safeguards (DoLS) requires providers to submit applications to a 'Supervisory Body' for authority to deprive someone of their liberty. CQC is required by law to monitor the operation on the DoLS and to report on what we find. Records showed that all staff had received DoLS training. The registered manager and the staff we spoke with knew of their responsibilities regarding DoLS. They knew that regarding extra care services any DoLS referral would have to be made to and approved by the court of protection. This demonstrated that the provider had taken action to ensure that people did not have their right to freedom and movement unlawfully restricted.

The Mental Capacity Act 2005 (MCA) sets out what must be done to make sure that the human rights of people who may lack mental capacity to make decisions are protected, including when balancing autonomy and protection in relation to consent or refusal of care. People told us that staff asked their permission before they carried out personal care tasks. The relatives we spoke with told us that they or their family members were given the opportunity to consent to or refuse care and this was also confirmed by the staff we spoke with. We saw that staff gave an explanation to people and waited for them to respond before they helped them to mobilise or undertake tasks. Assessment and care planning records that we looked at showed that staff determined if the person had or did not have capacity. Where it was determined that a person lacked capacity staff involved family members, an advocate and healthcare professionals to ensure that decisions that needed to be made were in the persons best interest.

Staff we spoke with and records we looked at showed that staff worked closely with the multi-disciplinary team of healthcare professionals to provide effective support. This included GP's specialist health care teams, the community mental health team and speech and language therapists. The registered manager told us that the GP from a nearby surgery visited Woodland Court routinely every week to attend to people who were unwell. We saw that information on the notice board to enable people receive regular dental and optical checks. This ensured that the people who used the service received the health care support and checks that they required.

One person said, "If I am ill or anything the staff get the doctor". A relative said, "The staff always get the doctor and call me if mum is not well. They are very proactive in making sure mum had the best health care". Another relative said "They will always ring the GP if my relative is not well and then contact me to let me know".

All people we spoke with told us that they were supported to have the food and drinks they liked in sufficient quantities. A person told us "Staff prepare my breakfast and they wheel me down to the restaurant for lunch. Staff are always around if I need them". Generally, people who used the service purchased their own food and drinks and if it had been assessed that they required support to prepare and cook meals this was provided.

The majority of people chose to have their lunch time meal in the restaurant. One person said, "The meals are nice. The chef always finds out what I want". We have variety of choices everyday". We observed lunch time in a communal dining room and saw that staff were available to assist people to eat and drink. One staff member told us "We always encourage people to eat and drink". This showed that staff knew the importance of encouraging people to take a healthy diet and drink sufficient fluids to support their health and wellbeing.

## Is the service caring?

### Our findings

People and relatives we spoke with were very complimentary about the staff. They described them as being, "Excellent Carers", "Superb" and "Caring". A person said, "All of the girls are very good I can't speak more highly of them. They look after us". Another person said, "The staff are very caring and lovely". A relative told us, "The staff are wonderful, very caring". We observed staff interactions with the people who used the service. We observed that staff greeted people and asked how they were. We saw that staff took time to listen to what people said. We saw that people responded to this by talking with staff and having confidence to inform them of they wanted and their needs.

People we spoke with told us that staff were polite and helpful. A person said, "The staff are very polite and very nice". Another said, "The staff are respectful. They never go in my flat without my permission". During the day we heard staff speaking to people in a respectful way. All relatives we spoke with told us that the staff were polite and friendly towards them. One relative told us "Staff are caring and polite. They worry about my relative. They just care. They are caring and polite towards us as a family too. They are doing a good job".

Staff we spoke with were able to give us a good account of how they promoted dignity and privacy in every day practice. This was ensuring toilet and bathroom doors were closed when providing personal care and knocking people's front doors and waiting for a response before entering. Records showed that staff addressed people the way they preferred and we heard that this was the name they used when speaking to them.

The people and relatives we spoke with all confirmed that the staff communicated with them respectfully. We saw that staff supported someone with mobility problem in a caring and reassuring manner while at the same time communicating to them. We saw that person appreciated what the staff member did and responded by communicating back to staff.

A person said, "I like to be independent and do things I can do and ask staff to help me with the ones I can't". A staff member told us, "We always encourage people to do as much as they can for themselves. We get to know them and what they are capable of doing themselves. Care plans we looked at showed that where possible staff should encourage people to be as independent as possible in regards to daily living tasks.

People told us that they could attend to their laundry needs and where possible prepared meals. This ensured that staff knew it was important that people's independence was maintained. A person told us, "My family visit me a lot they can visit whenever they want and I like that". Records we looked at and staff we spoke with showed that there were no visiting restrictions and families could visit when they wanted to. All people we spoke with told us that it was important to them where possible to maintain contact with their family. All relatives we spoke with confirmed that staff enabled them to have as much contact with their family member as possible. One relative told us "They send me some reassuring text messages if I can't visit to keep us in touch. This is really thoughtful".

## Is the service responsive?

### Our findings

People told us that staff involved them in care planning so they could decide how they wanted their care and support to be delivered. One person confirmed, "I am asked when and how I want my support". Another person said, "Staff always do what I tell them and how I want my care done ". A relative said, "We are always involved in everything about her care to make sure they receive good care".

Records we looked confirmed that people's needs were regularly reviewed by the service. These processes enabled the agency to confirm that they could continue to meet people's needs in the way that they preferred.

People told us that staff supported them with their preferred lifestyles. One person said, "I am given the opportunity of support to do what I want but I like to go out on my own with staff". Another person said, "I like to do my own thing. We can go into the bar and have a bit of drink ".

People told us and records showed that people had been asked about their personal spiritual needs. The registered manager told us that some people were supported to attend church services on Sundays. This showed that staff knew it was important that people were offered the choice to continue their preferred religious activities if they wanted to.

A person who used the service said, "I know what to do if I was not happy. I would speak to the staff". A relative told us, "We have no concerns or complaints if I did I would speak to the management. I know they would deal with it". One relative told us "they respond appropriately to my relative's needs. We have no concerns".

A copy of the provider's complaints procedure was available in the premises for people to read and access. The complaints procedure explained what people should do if they were not satisfied with any part of the service they received. It gave contact details for the local authority and other agencies they could approach for support to make a complaint.

Records we looked at and the registered manager confirmed that no complaints only numerous compliments had been made. They included "The care that both my relatives have received is very exemplary. The carers are so professional and they do it with much kindness" and I would like it to be known that I appreciate the care and warmth of those who go the extra mile or caring for those in residence. I have found nothing but good communication between myself, the receptionist and members of staff".

## Is the service well-led?

### Our findings

We found that a positive culture was promoted within the service that was transparent and inclusive and was evidenced in a number of ways. For example one person said, "The manager and staff are very helpful. It is good". A relative said, "They always keep us informed". We saw from records and this was confirmed by the people who used the service that they and their relatives were invited to regular reviews and had the opportunity to discuss and raise issues. A relative said, "We are invited to reviews. We also have constant communication with staff. We feel that we are listened to".

The provider had a clear leadership structure that staff understood. There was a registered manager in post. All conditions of registration were met and the provider kept us informed of events and incidents that they are required to inform us of. One staff member said, "The management are incredibly supportive. They would join us to care to people if it becomes necessary". Another said, "They are always there to support us with people's care. The team leader is very good and always at the end of the phone when needed" Staff we spoke with explained the on-call process and who they needed to contact in an emergency.

Staff told us that they felt valued and were encouraged to contribute any ideas they may have for improving the service. They told us and records we looked at confirmed that regular staff meetings took place. One staff member told us "I feel valued by the management. I enjoy working here. I get thanked by clients and get a chance to make a difference in their lives. We get asked how we can improve things"

We saw that a written policy was available to staff regarding whistle blowing and what staff should do if an incident occurred. Staff we spoke with gave us a good account of what they would do if they learnt of or witnessed bad practice. One staff member said, "If I saw something I was concerned about I would not hesitate to report it". This showed that staff knew of processes they should follow if they had concerns or witnessed bad practice and had confidence to report them to the registered manager.

We saw audits were completed regarding for example, care plans, financial transactions and medicines records. We saw that where needed corrective action had been taken to make improvements.

We saw that where issues of concern had been identified an action plan had been completed for improvements to be made. This showed that the provider had taken steps to ensure a good quality of service.

We spoke with two social care professionals and one healthcare professional about Woodland Court. They told us people they were involved with seemed happy with the support they received and that if they had concerns they were quickly resolved by the registered manager and staff. One comment included "A lovely service, very supportive and would listen. Always do what we ask them to do. Very lovely environment. Someone is always there at the front desk to help you".

The management team understood their responsibilities and had made sure they had submitted statutory notifications to us and completed the Provider Information Return (PIR) as required by the Regulations. We

found the information in the PIR was an accurate assessment of how the service operated.