

Huntsmans Lodge Limited Huntsman's Lodge DCA

Inspection report

The Old Rectory, 8 Main Street Glenfield Leicester Leicestershire LE3 8DG Date of inspection visit: 24 November 2020 25 November 2020

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Ratings

Overall rating for this service

Inspected but not rated

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

Huntsman's Lodge DCA is registered to provide personal care for adults, some of who may be living with a learning disability or other complex conditions such as autism spectrum disorder or mental health. People supported by this service either live in their own homes, or in shared accommodation with others. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of the inspection there were 13 people being supported with their personal care delivered from several supported living sites.

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

Staff followed infection control and prevention procedures to protect people from the risk of infections and COVID-19 as far as possible. People and staff were provided with the information and support they needed to understand risks from infections. The provider had robust infection prevention and control and COVID-19 procedures and regular checks were in place to ensure compliance with these.

Effective systems were in place to check the quality and safety of the service. The manager had good oversight of the service and completed regular visits to monitor and improve the service. People, relatives and staff felt able to share their views and were confident these would be listened to and acted upon.

Why we inspected

We undertook this targeted inspection to follow up on specific concerns relating to infection control and prevention which we had received about the service. CQC have introduced targeted inspections to follow up on a Warning Notice or other specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Huntsmans Lodge Ltd on our website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Good (published June 2018).

Follow up

We will return to visit as per our re-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?	Inspected but not rated
Inspected but not rated.	
Is the service well-led?	Inspected but not rated
Inspected but not rated.	



Huntsman's Lodge DCA Detailed findings

Background to this inspection

We carried out this targeted inspection to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008.

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 This service is a domiciliary care agency providing care and support to people living in supported living.

The service did not have a manager registered with the Care Quality Commission. At the time of our inspection, the manager was in the process of applying to the Care Quality Commission for registration. The provider is legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the manager would be in the office to support the inspection.

Inspection activity started on 24 November 2020 and ended on 25 November 2020. We visited the office location on 24 November 2020 and contacted people, relatives and staff by telephone to gather their views on 25 November 2020.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We focused our inspection planning on concerns we had received in relation to people's safety, in order to assess if the service was safe and well led.

During the inspection

We spoke with the manager and reviewed a range of records at the service office. These included records relating to the control and prevention of infections and audits and checks to support the governance of the service. We also contacted two people who used the service, one relative and three staff members by telephone to gather their views.

After the inspection

We continued to seek clarification from the provider to validate evidence found around the provider's infection control policy and procedures.

Is the service safe?

Our findings

At the last inspection this key question was rated as Good. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to ensure the provider had effective systems in place to manage and prevent the risk of infections, including COVID-19.

Preventing and controlling infection

- Staff were trained in preventing infection and control and the use of personal protective equipment (PPE). They demonstrated a good understanding of their role in protecting people from infections. This included wearing of PPE, such as masks, gloves and aprons.
- Staff competency in following safe infection control procedures was regularly checked by the manager. One staff member told us, "[Name of manager] makes sure we are following the latest COVID-19 guidance. They do spot checks and are quick to pull us up if we slip. [Name of manager] is always reminding us to wash hands, sanitise and wear masks. They make sure we always have enough PPE".
- Staff were provided with detailed guidance to ensure they carried out effective cleaning within people's homes as a measure to manage the risk of infections. One person told us, "They [staff] are paying extra attention to cleaning. They support me to keep me home clean."
- People were provided with the information they needed to understand the risks associated with COVID-19, including the need to isolate where required. People's care plans included risk assessments around COVID-19. This helped to ensure people's specific vulnerabilities were identified and they received information and support in line with their needs and preferences.
- Staff underwent regular testing for COVID-19.
- The provider had implemented robust contingency planning to support staff to manage risks associated with COVID-19.

Is the service well-led?

Our findings

At the last inspection this key question was rated as Good. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about. We will assess all of the key question at the next comprehensive inspection of the service.

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

• Audits to monitor and improve the service were completed regularly. These included checks across a range of areas including observed staff competencies, care and support plans and infection prevention and control. Where any concerning information was raised, actions were taken to remedy the findings. For example, improvements had been made to recording and accounting procedures where people required support to manage their finances. This showed quality assurance systems were used effectively to improve the service.

• The feedback we received about the manager was positive. People, relatives and staff said they felt they were listened to and their views were considered. One person told us, "[Name of manager] is good and always talks to us to check on how we are, not just about our health."

• The manager understood their responsibilities under the duty of candour. They understood the need to inform us of significant events, such as the death of a person using the service, as required.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service promoted an open, inclusive and person-centred approach.
- People and staff told us the manager regularly visited their home to ensure people were receiving the care and support they needed. Staff spoke about the manager as providing a positive role model for staff.
- People who used the service, their relatives and representatives were involved in developing and reviewing care and support plans.

• People, relatives and staff were able to share their views through a range of methods, including direct and indirect feedback. They were consulted and involved in changes which helped to ensure care and support was personalised.