

Parkcare Homes (No.2) Limited

Woodpecker Lodge

Inspection report

Weir End House
Weir End
Ross On Wye
Herefordshire
HR9 6AL

Tel: 01989567711

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05 March 2019

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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

About the service: Woodpecker Lodge is a care home for people with learning disabilities and mental health needs providing accommodation and personal care for up to seven people.

People's experience of using this service:

People told us the registered manager and staff were kind, friendly and fun and looked after them well. They said they felt safe and enjoyed living at Woodpecker Lodge and staff respected their privacy and promoted their dignity.

People were supported by staff who had been recruited safely, appropriately trained and supported. Staffing levels were sufficient and staff appropriately deployed to provide safe care. They had skills, knowledge and experience required to support people with their care and social needs.

People were supported to eat and drink sufficient amounts in line with their assessed needs. Meal times were relaxed and organised around people's individual daily routines.

Medicines were managed safely and according to National Institute for Health and Care Excellence (NICE) guidelines.

Care planning involved people, gave them choice and staff guidance in how to provide care that met people's needs. Staff supported people to manage risks and to stay safe. So they had maximum choice and control of their lives, staff supported them in the least restrictive way possible. They had opportunities to be involved in voluntary work, hobbies and interests of their choice. They told us they felt involved and listened to about how their care would be provided.

Staff worked in partnership with other organisations to ensure they followed good practice and people in their care were safe. People were supported to attend healthcare appointments to ensure their health and wellbeing was maintained. Staff understood the importance of supporting people to have a comfortable, pain free and peaceful end of life. Their end of life wishes were recorded so staff were fully aware of these.

The registered provider and the registered manager used a variety of methods to assess and monitor the quality of the service and seek people's views.

There was a complaints procedure which was made available to people and their representatives. The people we spoke with told us they had no complaints and were supported as they wanted at Woodpecker Lodge.

Rating at last inspection:

Good (Report published 28 April 2016)

Why we inspected:

This was a planned inspection based on the rating at the last inspection. The service remained rated overall good.

Follow up:

We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme or if any issues or concerns are identified.

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 effective?

Good ●

The service was effective

Details are in our Effective findings below.

Is the service caring?

Good ●

The service was caring

Details are in our Caring findings below.

Is the service responsive?

Good ●

The service was responsive

Details are in our Responsive findings below.

Is the service well-led?

Good ●

The service was well-led

Details are in our Well-Led findings below.

Woodpecker Lodge

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

This inspection was carried out by one adult social care inspector.

Service and service type:

Woodpecker Lodge 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 care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

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 comprehensive inspection visit took place on 05 March 2019 and was announced. The provider was given 48 hours' notice because the location provided care to seven adults who were often out during the day. We wanted to ensure people were available at the home to speak with us.

What we did:

Before our inspection we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety

and welfare of people supported by the service and previous inspection reports.

As part of the inspection we used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection we spoke with six people who lived at Woodpecker Lodge. We spoke with seven members of staff including the registered manager.

To gather information, we looked at a variety of records. This included care plan records relating to two people who lived at the home. We also looked at other information related to the management of the service. We did this to ensure the management team had oversight of the service and they could respond to any concerns highlighted or lead in ongoing improvements.

As part of the inspection process we walked around the building to carry out a visual check. We did this to ensure the home was clean, hygienic and a safe place for people to live.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People we spoke with told us they felt safe. Comments included, "Oh yes. I am helped to keep safe by the staff." Another person told us, "The staff look after us and help me be safe. They explain what to do if I feel unsafe when I am out."
- The provider had effective safeguarding systems in place and all staff had received training and had a good understanding of what to do to make sure people were protected from harm or abuse.
- The registered manager was aware of their responsibility to report concerns to the relevant external agencies.

Assessing risk, safety monitoring and management

- Risk was managed and addressed to ensure people were safe. Risk assessments provided guidance to staff. They understood where people required support to reduce the risk of avoidable harm.
- Procedure were in place for staff to follow should there be an emergency. Staff were clear what to do if people needed to be evacuated from the building. We saw personal evacuation plans (PEEPS) were in place to assist with this.

Staffing and recruitment

- People who lived at Woodpecker Lodge, staff and visiting professionals all told us there were no issues with staffing levels and deployment of staff in the home.
- There were sufficient numbers of staff available to meet people's needs. We saw staff had enough time to support people in the home and local community.
- Systems were in place for recruitment of staff. The registered manager made sure appropriate checks were carried out before a new member of staff was employed. This reduced the risk of appointing somebody unsuitable.

Using medicines safely

- We looked at a sample of medicines and medication records and found people's medicines continued to be managed safely and in line with good practice guidance, "Managing medicines in care homes." (National Institute of Clinical Excellence, 2014.)
- Staff told us they received medicines training and regular checks to ensure they had the skills and knowledge to carry out the task safely.

Preventing and controlling infection

- We looked around the home and found it was clean, tidy and maintained. We observed staff making appropriate use of personal protective equipment such as disposable gloves and aprons. when they

supported people with personal care.

- Staff had received infection control training which gave them the skills and knowledge to ensure good infection control

Learning lessons when things go wrong

- Accidents and incidents were recorded and reviewed when they occurred so that lessons could be learnt and the risk of similar incidents reduced.
- The registered manager was aware of their responsibility to report any concerns to the relevant external agencies.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

People's outcomes were consistently good and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The pre-admission processes continued to be robust and thorough to ensure the service could meet each person's needs.
- Care plan records contained a full assessment of people's needs. These were reviewed and updated when changes occurred so they identified people's current needs.

Staff support: induction, training, skills and experience

- Training records showed staff had received training that was relevant to their role and enhanced their skills and knowledge.
- Staff applied learning effectively in line with best practice. This led to a good service for people who lived at the home and a good quality of life.

Supporting people to eat and drink enough to maintain a balanced diet

- People were encouraged to be involved in planning healthy menu choices, completing food shopping and meal preparation.
- Care plans seen confirmed people's dietary needs had been assessed and support and guidance recorded.
- Staff spoken with during our inspection visit confirmed they had received training in food safety and were aware of safe food handling practices.

Staff working with other agencies to provide consistent, effective, timely care

- Staff worked well with other professionals to ensure people's needs were met.
- We saw the service worked closely with health care services including GP's, district nurses, physiotherapists and occupational therapists. This ensured people were able access to healthcare services in a timely manner.

Adapting service, design, decoration to meet people's needs

- We looked around the home and found the building was homely and comfortable and met people's needs. There was sufficient communal and private space. It was suitable for people with reduced mobility and wheelchairs. Aids were in place to meet the assessed needs of people with mobility needs.
- People were encouraged to choose their decor and furnishings and to personalise their bedrooms.

Supporting people to live healthier lives, access healthcare services and support

- We found good evidence to show people were supported to access relevant health and social care

professionals. This helped to ensure people's assessed needs were being fully met, in accordance with their plans of care.

- We found evidence the registered manager and management team were referencing current legislation, standards and evidence based guidance to achieve effective outcomes.

Ensuring consent to care and treatment in line with law and guidance

- 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met. We saw the service were meeting these.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect

People were supported and treated with dignity and respect; and involved as partners in their care. □

Ensuring people are well treated and supported; equality and diversity

- We saw people were relaxed in the company of staff and enjoyed the attention they received from them. Staff were sensitive and patient with people and spent a lot of time interacting with them. People told us staff were kind and friendly and they enjoyed being with them. One person told us, "I love it here. All the staff are my friends."
- Staff spoke with us about the importance of supporting and responding to people's diverse needs. They were aware of people's personal relationships, beliefs, likes and wishes. People said staff knew their preferences and cared for them in the way they liked. These were recorded in their care records and this helped people to receive the right support.

Supporting people to express their views and be involved in making decisions about their care

- People told us they were fully involved in care planning and were consulted with and supported to make their own decisions. Care records we looked at confirmed people and where appropriate, their families had been involved with and were at the centre of developing their care plans.
- Care plans contained information about people's diverse needs, wishes and preferences.
- Information was available about advocacy services should people require their guidance and support. This ensured their interests would be represented and they could access appropriate services outside of the service to act on their behalf if needed.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's choices around privacy and dignity. We saw they knocked on bedroom and bathroom doors before entering and had a sensitive and caring approach when talking about the people they supported.
- Care records seen had documented people's preferences and information about their backgrounds and considered the support needed to maintain their individuality, diversity and independence.
- People's confidentiality was respected and people's care records were kept securely.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs

People's needs were met through good organisation and delivery.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People continued to be empowered to have as much control and independence as possible. Several people were involved in voluntary work of their choice and all were involved in a choice of leisure activities. People told us about their jobs in shops, animal care and gardening. They all said how much they enjoyed them.
- The care files we saw were person centred and individualised. They contained detailed information, providing staff with clear guidance about people's specific needs and how these were to be best met. Details in care records highlighted how they were to be supported and their daily routines
- The registered manager was aware of the accessible information standard. This ensured people with a disability or sensory loss were given information in a way they could understand. Care plans seen identified in detail each person's communication abilities and difficulties.

Improving care quality in response to complaints or concerns

- The people we spoke with knew how to make complaints. They told us they would be confident to speak to the registered manager or staff if they were not happy or had issues and they would deal with it. No complaints had been received since the previous inspection.
- People knew how to provide feedback about their experiences of care and the service provided a range of accessible ways to do this. This included informal chats at people's request, regular residents meeting, one to one time and care reviews.
- There were processes in place to guide staff in the management of complaints. The registered manager told us they used issues, complaints or concerns as a learning opportunity to improve the service.

End of life care and support

- We saw people were able to remain in the home supported by familiar staff when heading towards the end of life. Staff understood the importance of supporting people to have a comfortable, pain free and peaceful end of life and to support their family, other residents and each other.
- People's end of life wishes were recorded so staff were aware of and went out of their way to meet these.

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 service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager followed current and relevant legislation along with best practice guidelines. They understood legal obligations, including conditions of CQC registration and those of other organisations.
- The service was well-organised and there was a clear staffing structure and clear lines of responsibility and accountability. People spoke positively about how the service was managed.
- The management team carried out audits to govern, assess and monitor the quality of the service and staff.
- The registered manager provided a well-run and consistent service. Staff were clear about their roles and were experienced, knowledgeable and familiar with the needs of the people they supported.
- Ratings from the previous CQC inspection were displayed in the service.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- We found the registered manager was open and transparent. People told us they were easy to talk with and available when they wanted to talk.
- The systems ensured people received person-centred care which met their needs and reflected their preferences.
- Policies and procedures provided guidance around the duty of candour responsibility if something was to go wrong.

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

- The registered manager was committed to providing good person-centred care by engaging with everyone at Woodpecker Lodge. They continued to seek the views of people in a variety of ways including informal discussions, meetings and surveys.
- People told us they were encouraged to comment on care, activities and the way the home was run through regular meetings. Action was taken in response to any comments or concerns. This showed the service listened and responded to the views of the people they supported.
- Staff spoke positively about the support they received from the registered manager. They told us they were approachable and available for advice and support. One staff member told us, "[registered manager] is fabulous. She is amazingly supportive."

Continuous learning and improving care

- The registered manager was committed to ensuring continuous improvement. Accidents and incidents were reviewed to see if lessons could be learnt.
- Systems were in place to ensure the quality of service was regularly assessed and monitored. We saw the registered manager had acted upon any findings from the audits. This demonstrated improvements were made to assist the service to continue to provide a good service for people who lived there.

Working in partnership with others

- The registered manager worked in partnership with other organisations to make sure they followed current practice, providing a quality service and people in their care were safe.