

Quality Care Homes Limited

Whitelodge Care Home

Inspection report

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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

Whitelodge is a residential care home providing residential care for up to 21 people in one adapted building. At the time of the inspection 21 people were using the service. Some of the people who lived at the service needed care and support due to dementia, sensory and /or physical disabilities.

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

There were some areas of the service which required additional heating due to the system not always being effective. Some rooms had portable heaters to ensure a consistent temperature. The providers were aware of the issue and were taking action to address this. Portable heater risk assessments were in place to ensure safety.

Staff understood their role in protecting people from harm and assessing avoidable risks. There were enough staff to provide care to people and they were available when people needed support.

People received their medicines as prescribed. There was limited storage space in the room being used to store medicines. However other, more suitable options were being investigated by the registered manager and deputy manager.

People received care and support from staff who knew them well. Staff were trained and competent in their roles and monitored people's health and wellbeing. When needed, referrals were made to other healthcare professionals. Staff responded to advice given to ensure people received the care they required.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests. The policies and systems in the service supported this practice.

People told us they felt happy and safe living in Whitelodge. One person told us, "I have everything I need here. I am very happy and the staff are wonderful."

The service was clean although there were some low-level odours in some areas of the service. Refurbishment plans were in place to address this.

Care plans were personalised and reflected people's individual needs. The service supported people to engage in activities both inside and outside of their home. People's communication needs were being met and complaints were acted upon.

The quality of the service was monitored regularly through audit checks and receiving people's feedback.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update

The last rating for this service was Good (Published 14 July 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

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 was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-Led findings below.

Good ●

Whitelodge Care Home

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.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Whitelodge is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We reviewed information from other agencies and statutory notifications sent to us by the registered managers about events that had occurred at the service. A notification is information about important events which the provider is required to tell us about by law.

We used all of this information to plan our inspection.

During the inspection

We spoke with eight people who used the service, one visitor, five staff members and the deputy manager. We spoke with a visiting professional. We reviewed the care records of three people, medication records, records of accidents, incidents, compliments and complaints. We reviewed staff recruitment, training and support information as well as audits and quality assurance reports. 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.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We spoke with the registered manager who was not available on the day of the site visit.

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 Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe living in the service.
- Staff understood their role in keeping people safe from avoidable harm and abuse.
- Staff spoke with confidence about the actions they would take if they thought someone was at risk. They said they would not hesitate to report concerns and knew they would be listened to.
- People and their relatives told us they felt safe and supported by members of staff. People told us, "It gives us piece of mind knowing [Person's name] is safe and well cared for here" and "I love living here. It's such a friendly place."

Assessing risk, safety monitoring and management

- There were processes in place to undertake risk assessments and identify the potential risk of accidents and to mitigate those risks through regular review.
- Staff understood what support people needed to reduce the risk of avoidable harm. One person told us, "When I call for the staff they come very quickly".
- Equipment was safe and maintained. However, the heating was not consistent in some areas. Additional portable heaters had been put in place while the heating system was being checked. The registered manager had risk assessments to support the safe use of portable heaters.
- The fire alarm system was checked and serviced in line with manufacturing guidelines and people had personal emergency evacuation plans (PEEPs) in place to tell staff and emergency services what support they needed.

Staffing and recruitment

- There were safe recruitment processes. Pre-employment checks had been carried out including disclosure and barring service [DBS] checks, and receiving satisfactory references from previous employers. The application form did not ask for a full employment history with gaps explained. The registered manager addressed this quickly
- Staffing levels were sufficient to ensure people's needs could be met. One person told us, "The staff are all very kind and always around when you need them."

Using medicines safely

- Medicines were provided safely. There were systems in place for the ordering, administration and disposal of medicines. The room used to store medicines was small with limited storage capacity. The registered manager and deputy manager were looking at alternative options to improve this.
- Staff who administered medicines did so at the prescribed time and had received the necessary training to

support their responsibilities in dispensing medicines.

- People had care plans which described to staff the support they needed in taking their medicines.

Preventing and controlling infection

- People lived in a clean environment although there was some low level odour in the top lounge. The deputy manager told us there were plans to refurbish this room during the year. Staff received training in infection control practices.
- Staff had access to personal protective equipment such as disposable gloves and aprons.

Learning lessons when things go wrong

- Accidents and incidents were recorded and analysed so any trends or patterns could be highlighted.
- The managers reviewed risk assessments and care plans following accident or incidents to mitigate the risks of them occurring again.

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.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant 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; Staff support: induction, training, skills and experience

- People's care plans were up to date and reflective of their individual needs and choices.
- People said they were supported by a competent, stable staff team who knew them well and knew their preferred routines and needs. One person told us, "All the staff know just what I need and what I like."
- People were supported in accordance with up to date guidance and legislation because staff received regular training to make sure their knowledge was up to date.
- New staff completed an induction programme to enable them to provide safe care. New staff also had opportunities to shadow more experienced staff to enable people to get to know them and for them to understand people's preferences. A staff member told us, "This is my first day and it's going well. The staff are being very supportive."

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

- People had choice and access to a range of food and drinks throughout the day; food was well presented and people told us they enjoyed it. Their comments about food included, "Home cooking. It's lovely," and "I love the food here. It's always well presented."
- Kitchen staff were aware of any specific dietary requirements, for example, if people needed their food to be prepared differently to minimise the risk of choking.
- Care plans included information about people's dietary needs and their likes and dislikes. This included any information about specific aids people needed to support them to eat and drink independently.

Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- Care plans showed people's health was monitored and when people asked to see a healthcare professional this was followed up by staff. A visiting health professional told us staff were responsive to any advice given and said, "They are good at letting us know of any changes. They follow the guidance we provide."
- We looked at how people's oral healthcare needs were being met. Each person had an oral healthcare plan and a toothbrush and toothpaste in their room. People had access to dental care. Staff understood the importance of good oral healthcare through effective training.
- People were encouraged to stay healthy. Staff supported people to continue to mobilise independently.
- The management team engaged with other organisations to help provide consistent care.

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 when this is in their best interests and legally authorised under the MCA. 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.

- The service was working within the principles of the MCA. Where authorisations were in place the service was meeting the conditions set by them.
- Staff had a good understanding of consent. We saw this in care records and practise. Staff always asked permission before supporting people.

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

- Some areas of the service required decoration. There was a refurbishment plan in place.
- People had appropriate space to socialise with others, participate in in-house activities, eat in comfort, meet with visitors or spend time alone within the service.
- People's rooms were decorated with personal belongings to ensure they felt comfortable with familiar items around them.
- Signage supported people living at the service to navigate around the service.

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.

At the last inspection this key question was rated as Good. At this inspection this key question remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- Staff understood the importance of ensuring people were protected from all forms of discrimination. The registered manager and staff were aware of people's equality needs. For example, supporting people through relationships. There was guidance for staff in respecting people's rights to relationships, giving people space and time together in private. People were supported to retain their religious beliefs. Staff supported people's emotional needs by taking time to listen and reassure the person.
- Care records reflected important information in relation to each person's dignity and privacy. It was clear from care records and the attitude of staff that the service ethos was to ensure support given to people who lived at Whitelodge was personalised.
- People's personal relationships with friends and families were valued and respected. For example, staff took time to speak with families when they visited. We observed families were made to feel welcome when they visited.

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

- People told us they were able to make decisions about what they did and the care they received. One person said, "I am very independent and come and go as I want to. The staff are very supportive, but I do like my independence."
- Families and some people told us they were involved in reviews and felt their contributions were respected by staff. One person told us the registered manager had explained to them about what to expect and they had been involved in their relatives care planning and review. A relative said, "The staff are very good at keeping me updated."

Respecting and promoting people's privacy, dignity and independence

- Staff focused on supporting and promoting people's independence and retaining community links. Options were being explored by the registered manager and deputy manager. This was confirmed by our observations during the inspection visit and comments from people. One person said, "I am encouraged to use my Zimmer frame as much as I can. It does help steady me." A relative told us, "The staff do encourage [person's name] to be as independent as possible."
- Staff made sure people's privacy was respected when they were providing personal care.
- Records were stored securely, and confidential information protected.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question remained the same. This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- Staff knew people well and how they liked to be supported. Care was delivered in line with people's preferences which ensured they received care which was personal to them. People were treated as individuals and were able to follow their own routines. Some people were supported to access the community by staff or with family and friends.
- Care plans contained people's likes and dislikes and how they wanted their care to be provided. For example, how people liked to be supported with personal care and how they liked to be dressed.
- Some people needed support to help them to move around. The care plans detailed the equipment required and how staff should support them. One person told us, "They [staff] always remind me that I need my walker."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff were provided with information on people's specific communication needs and care plans included information on the use of any aids or devices to facilitate communication. This included guidance on how to present information to enable people to make meaningful decisions.
- Where people required aids to communicate such as hearing aids or pictorial aids, this was clearly documented. We observed staff asking if people needed their glasses when talking with them.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to lead meaningful lives. They participated in a range of social activities, that met their needs and preferences. For example, taking part in sing along. We observed this on inspection and it was interactive and stimulating. There were annual trips to places including the coast and a zoo. The service had been involved in a project to invite a local school to visit the service. People told us, and photographs showed it had been successful. One person said, "It was amazing how the young and the old all got on so well. It was a lot of fun."
- People's relationships with family members and friends were supported by the service. One person told us, "I am made to feel welcome whenever I call in."
- Some people liked to spend time relaxing quietly on their own. Three people told us they liked to stay in their room most of the time. They told us staff were always 'popping in' to check on their welfare.

Improving care quality in response to complaints or concerns

- Complaints were recorded and action taken to address them in line with the organisations policies and procedures.
- People told us they had not had reason to complain but felt confident to approach the registered manager, or staff with any issues. A person told us, "If I am not happy about something I will tell the manager."
- There were no active complaints at the time of the inspection.

End of life care and support

- People were supported as they were approaching the end of their life and their wishes were documented and planned for as appropriate.
- Staff received training to support people and families at the end of a person's life.
- Staff worked in collaboration with other health care professionals to ensure people's symptoms were well managed.

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 Good. At this inspection this key question has remained the same. This meant 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 was aware of their roles and responsibilities, including what events they needed to notify CQC about. They had submitted notifications in line with legal requirements and displayed the rating of the last inspection in a public area of the service.
- Policies and procedures were in place and updated regularly so information was accurate and reflected current best practice. Staff told us they were required to familiarise themselves with policies and procedures that affected them in delivering care and support. This helped to ensure staff were aware of the expectations of their role and were held accountable for their actions.
- Information related to people who used the service was stored securely and treated in line with data protection laws.

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

- The registered manager was aware of the duty of candour and their legal responsibility to be open and honest.
- The registered manager was visible, and the provider regularly visited. The registered and deputy manager told us they felt supported in their role and had the resources to carry out their role effectively.
- Staff told us it was a good place to work where they felt valued by the management team and supported each other. They said this helped to create a family type environment for people to live in. One staff member said, "We all just get on so well and the managers are really supportive."

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

- People provided positive feedback regarding the quality of the care they received. People told us staff were caring and looked after them well. Comments included, "I have all my needs met here. It's a homely place to live."
- People's relatives and staff described an open culture and homely atmosphere within the service. One relative told us, "It is homely and I think that's why [Person's name] likes it so much here."
- Staff told us they felt listened to and that the registered manager was approachable. Staff consistently told us how supportive the management team were.

- Staff spoke enthusiastically about their work at the service and understood the need to respect and support people's right to make their own decisions, where they were able to.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- People and their relatives completed an annual survey to gain their views of the service and the feedback had been used to continuously improve the service. The most recent survey was very positive in all areas of satisfaction.
- The registered manager and deputy manager continually spoke with the staff team about operational issues and staff told us they felt able to discuss any changes and working practices and raise any suggestions.
- The service worked in partnership with other agencies to achieve positive health and wellbeing outcomes for people.