

Voyage 1 Limited

# Agricola House

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Agricola House is a residential care home providing personal care to six people at the time of the inspection. The care home accommodates up to eight people in one adapted building.

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

People were kept safe from risk of harm and staff had a good understanding of safeguarding processes. Risk assessments were robust and relevant. Staff were recruited safely. Medicines were managed safely. Systems were in place to reduce the risk of the spread of infection. Accidents and incidents were reported and analysed in a timely manner.

The provider was well organised, and the registered manager had a clear vision for the service. Managers were open and honest in their approach to supporting people. The provider had clearly defined roles and managers and staff were clear about their responsibilities. People were given the opportunity to regularly give feedback to improve service provision. The provider had clear audit processes to ensure good quality care. Managers worked in partnership with other organisations to support people's needs.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Rating at last inspection

The last rating for this service was good (published 04 June 2018).

### Why we inspected

We received concerns in relation to staffing. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has not changed. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Agricola House on our website at [www.cqc.org.uk](http://www.cqc.org.uk)

### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## 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 well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# Agricola House

## 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 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

This inspection was carried out by an inspector, a specialist advisor, and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Agricola House is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Agricola House is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection. Agricola House can also provide personal care to people living in their own houses and flats. At the time of the inspection the service was not supporting any people in this way and therefore this activity was not inspected.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

### Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because it is a small service and we needed to be sure the provider or registered manager would be in the office to support the inspection.

### What we did before the inspection

We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

### During the inspection

We spoke with the deputy manager, the operations manager, and three support staff. We spoke with three people receiving support and two relatives. We reviewed four people's care records. We reviewed records and audits relating to the management of the service. We asked the deputy manager to send us documents before and after the on-site inspection. These were provided in a timely manner and this evidence was included as part of our inspection.

# Is the service safe?

## Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had processes to protect people from the risk of abuse.
- Managers acted timely to address concerns and allegations and implemented changes to make sure people were safe.
- Staff had completed safeguarding training and were confident about raising concerns. A staff member told us, "We have training and monthly meetings to discuss issues of safety and agree changes to mitigate risk."

Assessing risk, safety monitoring and management

- Managers identified, assessed and recorded risks. Staff understood and followed risk management plans.
- Managers ensured environmental assessments considered the impact on people with sensory and communication difficulties.
- Staff knew what to do to keep people safe in the event of an emergency. One staff member said, "We have lots of training [in safe practices] and conduct scenarios regularly."

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 MCA 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 Mental Capacity Act (MCA). In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS)

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- The provider had robust recruitment processes to ensure staff were recruited safely with appropriate checks and a formal induction process.
- Managers ensured there were sufficient competent staff to meet people's needs at all times.
- People felt there were enough staff available to meet their needs. One person told us, "Staff are brilliant;

they are always there when you need them."

- Staff told us they felt supported through their induction. One staff member said, "I shadowed other staff and had a lot of training. It helped me to feel comfortable and allowed me to give my best."

#### Using medicines safely

- Medicines were stored, administered and disposed of safely. People's medication records confirmed they received their medicines as required.
- Staff received appropriate training in the management of medicines and competency assessments were completed by managers.
- People felt staff supported them to take their medicines safely. One person said, "Staff take as much time [with me] as I need; I know what medicines I'm taking and I can talk to staff when I have concerns."

#### Preventing and controlling infection

- The provider used effective infection, prevention and control measures to keep people safe and staff supported people to follow them. The provider had good arrangements for keeping the premises clean and hygienic.
- The provider's infection prevention and control policy was up to date.
- Staff supported visits for people living in the home in line with current guidance.

#### Learning lessons when things go wrong

- Accidents and incidents were recorded, and appropriate action had been taken in response.
- Managers ensured all accident and incident reports were reviewed. Lessons learned were shared with staff to prevent re-occurrences.

# 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 our last inspection we rated this key question good. The rating for this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Managers had processes to ensure person-centred care was provided which focused on people's needs, wishes and outcomes.
- Meetings with people who used the service took place before every staff meeting. Feedback was shared directly with staff to ensure effective changes to people's support were led by people receiving a service.
- Staff said there was a positive work culture and good team working. A staff member told us, "I feel supported, well trained, and we are kept up-to-date with changes. I feel comfortable raising concerns. It's a great team [to work with]."
- People told us the support from Agricola House empowered them and promoted their independence. One person said, "I'm overwhelmed by the care here. It's been amazing; it has been a great help to me. I get a lot of help with my memory."

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 were clear about their responsibilities for reporting incidents and concerns. Risks were clearly identified and escalated where necessary.
- The provider had clear processes for reviewing concerns and improving support by learning from the issues identified.
- People said they were asked for regular feedback, and suggestions for improving the service were acted upon by the registered manager. One person told us, "We get to give feedback in different ways. I feel comfortable speaking to managers if I have concerns. We also meet weekly to plan meals and activities."

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

- The provider had processes and structures to ensure managers and staff were clear about their roles and how to meet people's needs effectively. Managers carried out regular audits and acted when any improvements were needed.
- Staff told us they understood their roles and how to support people. One staff member said, "We have regular team meetings. The handover process is really helpful when you have been off."
- Managers told us the provider supported them to review concerns and to improve support for people. A manager said, "All incidents are shared with the company so opportunities to learn can be highlighted and resources provided to improve people's outcomes."



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

- The provider ensured they engaged with people and their relatives to help inform continual improvement to service provision.
- Managers worked closely with people to understand their cultural beliefs and backgrounds.
- Staff were person-centred in their approach to people's support. Staff told us, "It's great seeing people progress and seeing improvements in their mobility and communication; it's really rewarding."

Working in partnership with others

- Managers worked closely with a wide range of professionals to meet people's health and social needs.
- The provider had good links with the local community, providing education and employment opportunities for people and meeting their cultural and religious needs.
- Health professionals told us staff were effective at improving outcomes for people. One health professional said, "I feel staff actions improve the quality of life for the people they support."