

# Community Homes of Intensive Care and Education Limited

## Winton Lodge

### Inspection report

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Date of inspection visit:  
19 June 2019  
24 June 2019  
28 June 2019

Date of publication:  
29 August 2019

### 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

Winton Lodge provides accommodation and personal care for up to nine people who have learning disabilities and mental health needs. At the time of the inspection six people were living at the home.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

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.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence.

People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

People told us they felt safe and that staff had a good understanding of their needs and preferences.

Risks had been identified and measures put in place to keep people safe from harm. Medicines were managed safely and administered by trained staff.

Staff listened to what people wanted and acted quickly to support them to achieve their goals and outcomes.

Staff were well trained and skilled. They worked with people to overcome challenges and promote their independence. The emphasis of support was towards inclusion and enabling people to learn essential life skills.

Equality, Diversity and Human Rights (EDHR) were promoted and understood by staff.

People, professionals and their families described the staff as being, "welcoming, calm, and friendly" and the atmosphere of the home as homely, relaxed and engaging.

People received pre-admission assessments and effective person-centred support. The service was responsive to people's current and changing needs. Regular reviews took place which ensured people were at the centre of their support.

Leadership was visible and promoted good teamwork. People, professionals and staff spoke highly about the registered manager, describing them as showing "strong leadership"; as a result, staff had a clear understanding of their roles and responsibilities. The registered manager and staff team worked together in a positive way to support people to achieve their own goals and to be safe.

The registered manager had implemented many changes which had impacted positively on outcomes for people and staff.

Checks of safety and quality were made to ensure people were protected. Work to continuously improve the service was noted and the registered manager was keen to make changes that would enhance people's lives.

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 requires improvement (published 14 May 2018).

Why we inspected:

This inspection was a scheduled 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.

## 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 ●

# Winton 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. 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

This inspection was completed by two adult social care inspectors.

#### Service and service type

Winton Lodge 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

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

#### 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 spoke with a healthcare professional who worked with the service. 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 used all of this information to plan our inspection.

#### During the inspection

We spoke with two people who used the service and two relatives about their experience of the care provided. We spoke with two members of staff and the registered manager.

We reviewed a range of records. This included three people's care records and medicines records. We looked at two staff files to check the recruitment process. We reviewed records relating to the management of the service and training records. We walked around the home and observed care practice and interactions between support staff and people.

After the inspection

We requested further information from the registered manager related to the service, this was provided promptly.

# 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 in May 2018 this key question was rated as requires improvement. At this inspection we found improvements had been made and this key question has now improved to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff had a good understanding of safeguarding and whistleblowing procedures and knew how to identify and act on any concerns.
- Staff told us they had received safeguarding training and records confirmed this.
- Safeguarding incidents had been referred to the local safeguarding team appropriately.
- Information about abuse and how to contact the local authority safeguarding team was available in the service so anyone could easily access the information.
- People and their relatives told us they felt the care and support they received was safe. One relative said, "I never feel [person's name] is unsafe here".

Assessing risk, safety monitoring and management

- The registered manager described how the service promoted positive risk taking by ensuring people had the information and skills to keep them safe. For example, where people wanted to access social media, support and guidance about keeping safe on the intranet was available and promoted. One person told us this helps them to keep safe and to be aware of the risks.
- Risk assessments were regularly reviewed to identify changes in people's needs and they were amended accordingly.
- Positive behaviour support plans were in place, up to date and in line with best practice. These plans gave staff clear guidelines on approaches to use if people displayed behaviours which may challenge the service.

Staffing and recruitment

- People were supported by a regular team of staff who they knew well and enjoyed working at Winton Lodge. Staff said "Lovely, happy, well run home".
- Staffing levels were based on the people's individual needs. A relative described the staff as, "Confident, calm, friendly and consistent".
- Robust recruitment practices were in place. Full employment checks were in place before staff started working with people.

Using medicines safely

- Medicines were managed safely, the service had implemented safe systems and processes which meant people received their medicines when they needed it and in line with best practice.
- People spoke positively about the support they received with their medicines.
- Where people were prescribed 'as required' medicines there was clear guidance for staff about when these

medicines should be given.

#### Preventing and controlling infection

- People were supported to participate in keeping their home and rooms clean to minimise the risk of infection. We looked around the home and it was very clean. There was handwashing and protective clothing available.
- Staff had received infection control training and understood their responsibilities in this area.

#### Learning lessons when things go wrong

- The registered manager responded appropriately when accidents or incidents occurred. There was an effective system in place which meant these were reviewed, analysed and used as a learning opportunity.
- We saw learning was shared with staff during supervisions and staff meetings.

# 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 in May 2018 this key question was rated as requires improvement. At this inspection we found improvements had been made and this key question has now improved to good. 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

- Assessments had been completed in line with current legislation, standards and good practice guidance and the information was used to create person centred care and support plans.
- People's needs had been identified and choices were supported. Support plans contained detailed information about people's likes and dislikes and how they wanted their support to be provided to them.
- Staff applied learning from training, which was in line with best practice. This led to good outcomes for people and supported them to have a good quality of life.

Staff support: induction, training, skills and experience

- People told us they felt that the staff had the skills and competencies to meet their individual needs.
- Staff knew people's needs well and we heard staff praising and encouraging people. A staff member said, "This helps promote positive behaviour and build self-esteem".
- Staff received an induction and training when they started work at the service.
- Staff completed the Care Certificate as part of their induction programme. The Care Certificate is designed so staff are assessed to ensure they have the skills, knowledge and behaviours expected to provide compassionate and high-quality care and support to people.
- Staff told us they felt supported to carry out their roles. Records confirmed staff had regular one to one supervision sessions.
- Staff training records showed when staff had attended training and when updates were due.

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

- People told us they enjoyed, and were involved in planning what they ate, and one person said they liked helping to prepare meals occasionally.
- People's care records contained information relating to their dietary needs. People's individual preferences were recorded within their care records. This gave staff guidance on knowing what people liked to eat and drink and any special requirements they had.

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

- People were proactively supported to maintain good health and had access to external healthcare support when necessary. One healthcare professional said, "Communication is effective and [the registered manager] has built positive working relationships. Staff follow guidelines which has resulted in reduction in incidents and effective placements for people." Another social care professional gave the following feedback

to the registered manager, "express our heartfelt thanks for an amazing response to a local person with learning disabilities at a very difficult time."

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

- The registered manager described some of the changes to the environment, such as their office was now on the ground floor and more accessible to people, as was the medication room which had been relocated to the ground floor.
- The home had a games room which people used to play interactive computer games. People told us they liked using the room, even if not to play games, as a place to have, "quiet time if I want to".

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

- People received an annual health check as per best practice for people with a learning disability.
- Information was recorded ready to be shared with other agencies if people needed to access other services such as hospitals.

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.

- Each person had an authorised DoLS in place with conditions attached to them, which were being met.
- People living at Winton Lodge had been assessed as having capacity and consent to care had been sought.
- Staff showed a good understanding of the Mental Capacity Act 2005 (MCA) and their role in supporting people's rights to make their own decisions. During the inspection, we observed staff putting their training into practice by offering people choices and respecting their decisions.
- People had signed their care records to show that they consented to the care and support they were being provided with.
- Staff told us how they supported people to make decisions about their care and support. People confirmed that staff asked them before supporting them in tasks or with personal care.

# 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 has 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

- Relatives and a healthcare professional described the staff as being, "Welcoming, home from home," "Friendly and Caring" and, "Always plenty of staff around who are know each person very well".
- People's cultural and spiritual needs were respected. Staff encouraged people to receive visitors in a way that reflected their own wishes, including time spent in privacy.
- Training records showed that all staff had received training in equality and diversity. Staff described the home as having an open and honest culture where, "Everyone is accepted".

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

- People were able to express their needs and choices and staff understood their way of communicating.
- People were encouraged and supported to maintain contact with those important to them including family, friends and other people living at the home.
- Relatives told us they were made to feel welcome and involved in the care and support provided.
- Where needed the home sought external professional help to support decision making for people such as advocacy.

Respecting and promoting people's privacy, dignity and independence

- People were treated with respect. We observed staff knocking on people's doors before entering and not sharing personal information about people inappropriately.
- Promoting independence was important to staff who supported people to live fulfilled lives. People had opportunities to pursue interests and hobbies
- Photographs displayed on the walls around the home showed the varied activities people had participated in.
- People described their being, "lovely banter" between people and staff which promoted a cheerful atmosphere.

# Is the service responsive?

## Our findings

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

At the last inspection in May 2018 this key question was rated as requires improvement. At this inspection we found improvements had been made and this key question has now improved to good. 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 had built good relationships with people and had developed a good understanding of people wants and preferences.
- The service had a system of reviewing support plans regularly with the person it related too, this ensured the person was involved so that it was relevant, up to date and reflected the person's needs.

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.

- Each person had an individualised communication passport detailing their preferred way of communicating, such as Makaton and picture aids which were used widely throughout the home.

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 access the community and participate in activities which matched their hobbies and interests and were reflected in individual support plans. One person said, "I do swimming, bowling and spend quiet time if I need it." During the inspection people were supported with activities such as shopping and attending a day centre.
- The home had a vehicle for people to use to access the community if they wanted to, and there were good links to public transport.

Improving care quality in response to complaints or concerns

- Records showed complaints had been acted upon and dealt with appropriately.
- An easy read version of the complaints procedure had been created to enable people to understand the information.
- Relatives and professionals told us they had no complaints and felt they could approach the staff or management should they have a concern.
- Each person we spoke with said they would speak to any of the staff and were confident they would be listened to.
- The home received a compliment from a member of the public, who had in the past raised a complaint. This showed action had been taken to resolve the issue.

## End of life care and support

- The service was not supporting anyone with end of life care needs at the time of our inspection.
- People had been given the opportunity to discuss their end of life wishes and these were documented, such as their preferred method of burial.

# 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 in May 2018 this key question was rated as requires improvement. At this inspection we found improvements had been made and this key question has now improved to 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

- The registered manager and staff were motivated and passionate about providing the best possible person-centred care and support for people. One person said the registered manager, "Has done a great job". Another said they were, "Very hands on and engaging and has a good understanding of the holistic needs of individuals, takes responsibility for actions and that of the staff". A healthcare professional described the service as being "extremely person centred."
- Some people had been supported to obtain paid employment and attend voluntary work, day centres and social clubs within the community.
- Staff put people they supported at the heart of what they did. Staff visited a person who was in hospital to ensure they were not lonely and to see a familiar face.
- People were involved in the interview process of potential new staff and chose who their 'key worker' was. One person said "I chose my keyworker which is important to me. We know each other well and they help me to do things for myself."

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

- The registered manager promoted the ethos of openness and learning from mistakes. This reflected the requirements of the duty of candour. The duty of candour is a legal obligation to act in an open and transparent way in relation to care and treatment.
- In February 2019 the registered manager was awarded 'employee of the month' from the provider following positive comments from a local authority. This was regarding the registered manager's leadership, support to staff and two internal audits had resulted in minor actions.
- A relative said the registered manager had "developed a very open and transparent service. Concerns are dealt with in a professional manner."

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

- People benefitted from a registered manager who had created an open culture and had developed positive values within the service. Staff described them as being easy to approach, "firm but fair" and good at explaining what is expected.
- Staff spoke positively about the management. They felt the service was well led. Comments included, "I

think the whole service is well managed" and, "I feel the service is well managed for the people we care for and the staff team".

- The service had a robust quality assurance system in place. Audits were regularly undertaken by the registered manager, deputy manager and provider.
- The registered manager had informed the CQC about any events or incidents in line with their legal requirements.

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

- The service had good links with the local community and key organisations, reflecting the needs and preferences of people in its care.
- People were empowered to express their views and suggestions about the service. The registered manager introduced a newsletter as a way of sharing information and personal stories of people and staff achievements. The newsletter includes quizzes and events, workshops and stories written by people who lived at the service.
- There was a positive workplace culture at the service. Staff worked well together and said they were "proud" to be providing a good quality service to people. Each member of staff that gave feedback told us they would recommend the service. One staff member told us, "I really enjoy it here, it's a rewarding job".
- There were regular staff meetings where staff could speak about people's needs and raise any issues or share good practice. We saw minutes of staff meetings where staff efforts were praised and new staff were welcomed. Staff said this made them feel included and valued.

Continuous learning and improving care

- There was a process of continual improvement and quality assurance in place. There was a variety of audits completed on a monthly basis to ensure the quality of care was maintained.
- In April 2019 an expert quality auditor gave the service a score of 85% good overall and reported staff had good fire knowledge and were calm, polite and respectful.
- There was evidence that there was learning from incidents; investigations took place and appropriate changes were implemented.

Working in partnership with others

- The registered manager told us, and records supported that, the service had established good working relationships with health and social care professionals. This enabled the service to ensure the best possible outcomes for the people they supported.
- The service looked at innovative ways to improve the care people received. They regularly met with the community learning disability team to ensure joined up working. This has resulted in improved staff training and support and, proactive strategies for positive behaviour support has resulted in a reduction in incidents.
- A healthcare professional confirmed the service was working well with them and this has had a positive impact on people. The registered manager completed a robust analysis of each incident.