

# Cognithan Limited

# Woodside Court

## 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

Woodside Court provides accommodation and support for up to ten people living with mental health needs. The home was providing a female only service to seven people at the time of this inspection.

At the last inspection in October 2016, the service was rated Good.

At this inspection we found the service remained Good.

The service demonstrated they continued to meet the regulations and fundamental standards.

One person told us they liked staying at Woodside Court and said they felt safe living there. They told us they were not restricted and able to come and go as they pleased.

People were supported to have their health needs met. Staff at Woodside Court worked with other healthcare professionals and obtained specialist advice as appropriate. We saw that people's prescribed medicines were being stored securely and managed safely.

There were systems and processes in place to protect people from the risk of harm and staff were aware of safeguarding procedures.

Staff received training which gave them the knowledge and skills to support people effectively. Staff had received training in the Mental Capacity Act (MCA) 2005 and the Deprivation of Liberty Safeguards (DoLS). People were asked for their consent to the care and support they received.

There was a system in place for dealing with people's concerns and complaints. There were also systems in place to help ensure the safety and quality of the service provided.

The registered manager resigned their position at the time of our inspection. An acting manager was in post supported by a part time deputy manager.

## 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 remains Good

### Is the service effective?

Good ●

The service remains Good

### Is the service caring?

Good ●

The service remains Good

### Is the service responsive?

Good ●

The service improved to Good

### Is the service well-led?

Good ●

The service remains Good

# Woodside Court

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This comprehensive inspection was carried out by one inspector and took place on the 7th and 15th March 2017. The first visit was unannounced.

During our visit we spoke with one person using the service and four members of staff. Other people using the service were either not available or declined to speak with us. The registered manager was not available on the first day of the inspection and we were then informed that they had resigned their position. An acting manager was in post at the time of our second visit. We observed support in communal areas, spoke with people in private and looked at the care records for two people. We also looked at records that related to how the home was managed.

# Is the service safe?

## Our findings

One person using the service told us they felt safe and liked living at Woodside Court. They told us, "It's not bad here" and, "Yes I feel safe here."

The staffing levels reflected the needs of people living there and the staff spoken with said there were enough people on duty each day. Additional staff were provided on shift for supporting people with appointments or for people's or staff safety. The rota showed that a supernumerary senior staff member was available during the day to support staff Monday to Friday. Staff members spoken with said that there were enough staff to support people safely. One staff member said, "The staffing is enough – absolutely safe."

Records confirmed that staff received training in safeguarding adults and knew how to recognise abuse. A staff member told us, "I'd report anything to my line manager, if they did nothing I would whistle blow." People received support to manage their own money and finances according to their different needs. There were systems to make sure that any money handled by staff was managed properly with records kept. We saw staff documenting transactions where money was held on behalf of people using the service.

Staff on duty regularly checked on people's whereabouts and safety depending on their support needs. Observation charts were kept and people were signed in and out of the building.

Medicines management in the service was safe. We saw medicines were kept safely and securely in a locked cabinet in the office. People using the service had medicines administration records (MAR) that were up to date. A small number of omissions were noted during our first visit however recording had improved by our second day of inspection. Records showed that staff received training to manage medicines safely and there was a system for new staff to shadow existing staff when administering medicines before being signed off as ready to do so.

The house was clean and well maintained when we visited. The staff carried out regular checks on the safety of the environment. Regular checks took place, for example, of the fire alarms and maintenance of the building.

## Is the service effective?

### Our findings

The person spoken with was happy with the support provided by the staff working at Woodside Court.

Recent staff turnover meant recruitment was on-going to establish and maintain a consistent team of staff working at the service. One staff member told us they had opportunities for on-going training and there was an on-line system to make sure staff received relevant mandatory training and this was kept up to date. Records showed that staff had recently undertaken classroom training across a number of areas including safeguarding adults, risk management and emergency first aid. Staff confirmed they were supported by senior staff both through formal one to one supervision meetings and day to day contact on shift.

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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

One person using the service told us they were able to come and go as they pleased. They said staff encouraged them to share their plans for the day including when they would be coming back to the service. We saw other people using the service going out on both days of inspection. DoLS applications had been submitted for authorisation where people's liberty had been restricted in the service. Staff completed MCA and DoLS training that helped them to understand issues around capacity and support people effectively.

A person told us they enjoyed the meals provided to them saying, "The food is not bad." A part time cook supported staff by preparing lunch on some days alongside a cooking rota for people using the service. One person told us that staff encouraged them to cook but they preferred not to.

People's health needs were met. Staff were out supporting people to attend appointments on both days we visited. Care plans outlined the support people needed to help maintain their physical and mental health. Staff kept records about people's healthcare appointments and any action required.

## Is the service caring?

### Our findings

A person told us they liked living at Woodside Court and the staff were supportive and caring. They said, "I'd give them a score of eighty percent" and "The staff are alright. "

There was a relaxed atmosphere in the service on both days we visited. People were able to choose what to do, where to spend their time and who with. Most people spent time in their rooms and people went out independently throughout the day. Communal lounges and a dining area were provided as well as kitchen and laundry facilities. A covered smoking area was situated in the garden for people to use.

Staff we spoke with were familiar with the needs of people and knew their daily routines. One staff member told us, "People are treated well here, we take that seriously." Another staff member said, "Very good care here." A staff member talked about one person's individual needs and how they supported them. For example, responding to their behaviour and helping them to stay calm.

We saw information about people was stored securely and confidentially. Files were kept securely in the office and staff closed the door when sharing information.

## Is the service responsive?

### Our findings

Following a referral, an assessment of people's needs took place including risks to themselves and others and identification of any additional support that would be required. Care files included reports from commissioners and healthcare professionals that were also used to inform the assessment and support provided.

Each person had a pathway and recovery plan addressing areas such as their mental and physical health, lifestyle and nutrition. Each plan included the support required for the person and the outcomes sought with them. Staff told us that they were working with people to better reflect their views within each plan. We saw that the care documentation was kept under review and updated regularly. Daily notes were completed for each person documenting their mental and physical health and daily activities.

A staff member told us that the aim of the service was for people to eventually move on to independent living. Weekly timetables were in place for people using the service along with cooking, cleaning and laundry rotas. People attended community and church groups along with local mental health support groups and services. The service continued to provide in-house activities such as discussion groups and records were kept of people's daily activities. Television, music and games were available to people in the main communal areas.

A person using the service told us that they were able to go out and be part of the wider community. They said they attended Church regularly and saw friends and family. The majority of people were able to go out independently and we saw people going out with friends or to attend local services.

A booklet was made available to people using the service about how to make a complaint. This was in a more accessible picture format and included details of how to contact social services and the Care Quality Commission. A noticeboard also displayed the complaints procedure along with information about advocacy services and local authority safeguarding contacts. An advocate is a person who is able to speak on the person's behalf and make sure that the person's wishes and preferences are respected.



## Is the service well-led?

### Our findings

The registered manager resigned their position at the time of this inspection. An acting manager was put in post and they were supported by a part-time deputy manager. The provider told us they would immediately commence the process to recruit and register a permanent manager.

Regular staff meetings were held that enabled staff to discuss issues and keep up to date with current practice. Minutes seen included discussion around areas such as safe administration of medicines, responding to behaviour and record keeping.

The provider sought feedback from people using the service about what they thought of the quality of care and support they received. People had recently completed satisfaction surveys about their experiences. Feedback was positive and included, "The food is good, laundry is provided and cleaning is done daily." Another person commented, "All is ok." People's views were sought through regular meetings however attendance at these forums had been variable. The deputy manager told us about breakfast meetings they were arranging to try to engage people with the daily running of the service.

The home also had systems to regularly check the quality of the service provided and make sure any necessary improvements were made. For example, regular checks of care files, staff supervisions and safety audits were carried out. The building was regularly checked to make sure that it was safe and well-maintained and equipment serviced as required.

Notifications were being sent to Care Quality Commission (CQC) for any notifiable events, so we were being kept informed of the information we required.