

Psycare Limited

Winnett Cottage

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

Winnett Cottage is registered to provide residential care for up to 10 people living with mental health support needs. At the time of our inspection 10 people were living at Winnett Cottage.

People's experience of the service and what we found:

People were safe and protected from harm and abuse. The registered manager had systems to learn and share lessons from incidents. Risks to people's safety had been identified and managed. People received the care they needed because there were enough staff to support them. Staff had received training to provide people's care safely. Staff were employed following robust processes. People received their medicines safely and as they needed. People were protected against the risk of infection.

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 provider and registered manager were committed to the continuous improvement of the service. People and staff spoke positively about the management of the service. Quality monitoring systems were in place which helped to check various areas of the home. Staff worked in partnership with other health and social care agencies to deliver good outcomes for people. The provider regularly sought the views of people and staff about the management of the service.

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

Rating at last inspection

The last rating for this service was Good (published 23 November 2017).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

We undertook a focused inspection to review the key questions of safe and well-led only. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

You can read the report from our last comprehensive inspection by selecting the 'all reports' link for Winnett Cottage on our website at 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.

Winnett Cottage

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.

Inspection team

The inspection team consisted of 1 inspector.

Service and service type

Winnett Cottage 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. Winnett Cottage is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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

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 (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 reviewed information we had received about the service. We sought

feedback from the local authority and professionals who work with the service. We used all of this information to plan our inspection.

During the inspection

We spoke with 2 people who used the service about their experience of the care provided. We spoke with 3 members of staff including the registered manager and received written feedback from 1 professional.

We reviewed a range of records. This included 3 people's care records and numerous medication administration records. We inspected 2 staff files in relation to their recruitment. A variety of other records relating to the management of the service, including audits, policies and procedures, were also reviewed.

We inspected the environment and spent time observing interactions between people and staff.

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. At this inspection, the rating has remained Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse and avoidable harm

- People were safeguarded from abuse and avoidable harm.
- Staff had received training to keep people safe from abuse. They were clear on their responsibility and knew when to raise concerns. The service worked with other agencies to support people and protect them from harm and took steps to protect people from abuse, neglect, harassment and discrimination.
- People said they felt safe living in the service. One person said, "It's good here, the staff are always around and that helps me feel safe. If anything happens, they are on it straight away."

Learning lessons when things go wrong

- The provider learned lessons when things had gone wrong.
- Systems were in place to learn from safety alerts and incidents. Incidents and accidents were recorded and reported as necessary, and staff took time to reflect on the incident and how they could learn to mitigate the chance of recurrence. Staff gave examples where this approach led to a reduction in incidents.
- One staff member said, "If there is an incident, we debrief, look at it to see what the triggers are, and reflect on how we resolved it. Then we look at how best we could have done it or avoided it happening."

Assessing risk, safety monitoring and management

- The provider assessed risks to ensure people were safe. Staff took action to mitigate any identified risks.
- There were robust risk assessments in place to guide staff on how they should support people safely. Individual risk assessments included physical and mental health assessments, crisis plans and mental health professional shared care plans and recommendations. Regular safety checks were completed for the environment, such as fire safety and evacuation drills.
- People felt their health needs were met. One person said, "They want to know what's happening and how we are feeling, if things are not going well then they will speak to the doctor."

- Is consent to care and treatment always sought in line with legislation 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 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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation

of Liberty Safeguarding (DoLS)

- The provider was working in line with the Mental Capacity Act.
- We found the provider and staff were working within the principles of the MCA when needed. At the time of the inspection all people could make their own decisions.
- Staff had received training, and were aware, if needed, when to ensure decisions made were appropriate and the least restrictive.

Staffing and recruitment

- The provider ensured there were sufficient numbers of suitable staff. The provider operated safe recruitment processes.
- Staff were recruited safely. Recruitment files showed all pre-employment checks had been made. We observed, and people and staff said, there were enough staff to support people.
- One person said, "Staffing is good, they are always around, and they are the same. Their shifts are the same, so we know who is coming on and most of them have been here for years."

Using medicines safely

- People were supported to receive their medicines safely. Staff monitored refusals and referred to health professionals for advice.
- People were supported by staff who followed systems and processes to prescribe, administer, record and store medicines safely. Staff had training and their competency checked on a regular basis. People could manage their medicines independently if appropriate. Regular reviews of medicines were carried out.
- One person said, "Medicines are given by the staff, at the right time, they do it well."

Preventing and controlling infection

- People were protected from the risk of infection as staff were following safe infection prevention and control practices.
- Some areas of the care home required maintenance to enable more effective cleaning. The provider had robust policies to manage infections and staff received training to support good infection control practice.
- We observed PPE was used effectively and safely.

Visiting in Care Homes

- People were able to receive visitors without restrictions in line with best practice guidance.
- People told us that they could receive visitors without restrictions and records showed relatives and friends visited regularly. One person said, "People can come and visit me all the time, in privacy if I want."

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. At this inspection, the rating 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

- There was a positive and open culture at the service.
- People, and the staff team all described the culture of the home as open and friendly. We observed interactions that reflected this.
- One person said, "It's a good place to live, they [staff] look after us and will always try to get us involved in things."
- The provider had systems to provide person-centred care that achieved good outcomes for people.
- People were happy with the support they received. They told us this was based on their choices and longer term preferences. The provider was in the process of developing the key worker role to further enhance positive outcomes for people.

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 provider understood their responsibilities under the duty of candour. Although there had been no incidents that met these criteria for the previous 12 months.
- People and staff told us the registered manager was open and honest, that they held people accountable and acted when necessary.
- One staff member said, "[Registered manager] I would say is easy to talk addresses anything honestly and with all of us involved. They are a good manager to me, from my previous experience, managers were distant, but [Registered manager] is open and easy to approach."

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

- The provider had a clear management structure that monitored the quality of care to drive improvements in service delivery.
- Quality assurance systems and processes were in place that included regular audits of key areas such as medicines, incidents, care records and health and safety.
- One staff member said, "Checks are done by [Registered manager] all the time. Anything we need to know we know."
- The provider had created a learning culture at the service which improved the care people received.
- The registered manager had identified improvements and was in the process of developing systems to

deliver these. For example, they were developing their approach to incident analysis to gain a greater understanding of trends and patterns.

- The registered manager had recently commissioned an independent assessment of the governance systems in the service. The recommendations from this formed part of their developing service improvement plan, demonstrating their commitment to continuous development.

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

- People and staff were involved in the running of the service and fully understood and took into account people's protected characteristics. We saw management and staff placed people at the centre of their work. They were passionate about tackling mental health inequality through staff and people working together in equal partnership to support people to develop and overcome their individual challenges.

- An external organisation surveyed staff through a culture check showing staff were positive about their role and committed to their role and the organisation. Meetings were regularly held with people and staff and the provider regularly met each group without the management team present for their feedback.

- A proactive approach to seeking feedback and the providing of support, encouraged an open and inclusive culture. One staff member said, "I've been here a long time, I have seen the good managers and the bad. [Registered manager] has transformed the place, not just the physical, but the mentality of us as staff and the way we work. I feel like I want to come to work every day."

- The provider worked in collaboration with others. Staff worked with psychiatrists, mental health teams, social services, GPs among others to ensure people's support was in line with best practice guidance. One health professional said, "Winnett Cottage are a proactive service that has good relationships with their community mental health team. They know the individuals they support, well; and have a robust staffing team."

- The Registered Manager collaborated closely with partner agencies to support and develop the staff team. They were awarded a gold award from the local Care Providers Association. This was because they were rated as a good service with CQC and the local authority. They completed independently assessed training and needs analysis of staff and then demonstrated a strong positive ethos and culture within the service. All this demonstrated the registered manager was committed to working in partnership to deliver good outcomes.