

Leicestershire County Care Limited

# Tillson House

## Inspection report

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## Ratings

Overall rating for this service

Inspected but not rated

Is the service safe?

**Inspected but not rated**

Is the service well-led?

**Inspected but not rated**

# Summary of findings

## Overall summary

### About the service

Tillson House is a care home registered for up to 40 older people with a range of support needs. At the time of our inspection there were 34 people using the service.

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

Relatives felt their family members were safe in the service. Staff knew what to do to keep people safe and were confident any concerns would be taken seriously. Risks to people's well-being and safety were assessed, recorded and kept up to date. Staff supported people to manage these risks effectively. Staffing levels were appropriately managed, and people received care from consistent, regular staff. Enough staff were employed each day to meet people's needs and keep them safe.

Staff followed infection control and prevention procedures to protect people from the risk of infections and COVID-19 as far as possible. Staff wore the recommended personal protective equipment when working in the service and providing care and support.

Effective systems were in place to check the quality and safety of the service. The environment was clean and safe and in a good state of repair and decoration. The registered manager had good oversight of the service and completed regular audits and walk arounds to monitor and improve the service. The leadership of the service promoted a positive culture that was person-centred and inclusive. The registered manager and the staff team showed a desire to improve on the service provided and in turn the quality of life experiences for the people at Tillson House.

### Why we inspected

We undertook this targeted inspection to follow up on specific concerns relating to safeguarding and staffing which we had received about the service. A decision was made for us to inspect and examine those risks and to check whether appropriate action had been taken since our last inspection in relation to the breach of Regulation 18 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

CQC have introduced targeted inspections to follow up on a Warning Notice or other specific concerns. They do not look at an entire key question, only the part of the key question we are specifically concerned about. Targeted inspections do not change the rating from the previous inspection. This is because they do not assess all areas of a key question.

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 coronavirus and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Tillson House on our 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 February 2020).

#### Follow up

We will 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?**

Inspected but not rated

**Inspected but not rated**

### **Is the service well-led?**

Inspected but not rated.

**Inspected but not rated**

# Tillson House

## Detailed findings

### Background to this inspection

We carried out this targeted inspection to check whether the provider is meeting the legal requirements and regulations associated with 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

The inspection was carried out by one inspector.

#### Service and service type

Tillson House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We focused our inspection planning on concerns we had received in relation to people's safety, in order to assess if the service was safe and well-led.

#### During the inspection

We did not speak with people during the inspection visit as care was being provided in people's rooms. We spoke with the registered manager and deputy manager. Following the inspection we spoke with two

relatives and five care staff by telephone.

We reviewed infection prevention and control procedures and practices in the premises. We observed staff using personal protective equipment. We also reviewed safeguarding incidents, staffing rotas and training records, risk assessments for three people, accidents and incidents and records relating to quality assurance.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

# Is the service safe?

## Our findings

At the last inspection this key question was rated as Requires Improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to check the provider had made sufficient improvements since the last inspection and to review concerns around safeguarding.

### Staffing

At our last inspection in December 2019 we found the service did not deploy sufficient numbers of staff to meet people's needs in a timely and person-centred manner. This was a breach of Regulation 18 (Staffing) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of Regulation 18.

- There were enough staff to keep people safe. We reviewed staffing rotas and this showed adequate staffing levels were maintained.
- We observed there were enough staff on duty throughout our visit to meet people's needs.
- The registered manager used the provider dependency tool together with people's individual needs assessment to ensure sufficient numbers of staff were deployed to meet people's needs. They were clear on safe minimum staffing levels as part of their contingency planning.
- Relatives and staff felt there were enough staff to meet people's needs. Staff confirmed the staffing levels were as recorded on rotas.
- People received care from a consistent team of staff who were safely recruited to ensure they were suitable to work in care services.

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Relatives and staff were confident they could report any concerns they had to staff, the registered manager or the local authority safeguarding team.
- Staff received training in safeguarding vulnerable people from abuse. Staff could describe what action to take if they suspected abuse was occurring and were aware of the whistling blowing policy to protect staff of any reprisals should they report suspected abuse.
- The registered manager maintained detailed records of safeguarding investigations, with clear outcomes to ensure any lessons were learnt. For example, as a result of a recent safeguarding incident, staff had been enrolled onto specialist training to enable them to support people with distressed behaviours more effectively.

Learning lessons when things go wrong

- Lessons were learned when things went wrong.

- Accidents and incidents were reviewed to look for themes or patterns. This information was used to make changes to reduce the risk of recurrence.
- Relatives told us they were informed of any incidents or accidents involving their family member in a timely manner.

#### Preventing and controlling infection

- The premises was clean and well maintained.
- Staff demonstrated a good knowledge of infection control and were observed to follow safe practices in donning and doffing personal protective equipment (PPE), such as gloves, masks, aprons and visors.
- Cleaning had been increased to include frequent sanitising of touch areas, such as hand rails, handles and switches. Housekeeping staff demonstrated good knowledge of the prevention of cross infection and used products in line with current guidance to manage the risk of COVID-19.
- Visitors were temperature checked on arrival and were able to access a PPE station immediately on arrival. PPE stations were readily available around the premises.
- At the time of our inspection, people were isolating in their rooms to manage the risk of COVID-19. We discussed additional measures that could strengthen management plans, such as staff changing into uniforms on site rather than arriving in uniforms. The registered manager implemented this immediately following our inspection visit.



# Is the service well-led?

## Our findings

At the last inspection this key question was rated as Requires Improvement. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about. We will assess all of the key question at the next comprehensive inspection of the service.

The purpose of this inspection was to review the leadership and governance of the service.

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

- Audits to monitor and improve the service were completed regularly. These included checks across a range of areas including medicines, observed staff competencies, care plans and infection prevention and control. Where any concerning information was raised, actions were taken to remedy the findings. For example, improvements had been made and were on-going to the environment. This showed quality assurance systems were used effectively to improve the service.
- Staff were receiving regular, planned supervision and felt morale was good because of effective leadership.
- The feedback we received about the management team was positive. Relatives and staff said they felt they were listened to and their views were considered. One staff member told us, "[Name of Registered Manager] is open and approachable. They listen to us and are always checking in to check we are alright."
- The registered manager understood their responsibility to comply with the duty of candour. Staff were aware of what action to take to report any concerning information or complaints.
- The registered manager was aware of their responsibilities under their registration and had notified the Care Quality Commission of any incidents affecting the service.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The service promoted an open, inclusive and person-centred approach.
- The management team were visible in the home, directing care and providing positive role models for staff.
- People who used the service, their relatives and representatives were involved in developing and reviewing care and support plans.