

Countrywide Healthcare Ltd

# Headingley Court Care Home

## Inspection report

Headingley Way  
Edlington  
Doncaster  
DN12 1SB

Tel: 01709866610

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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

Headingley Court is a care home providing nursing and personal care for up to 25 people. At the time of our inspection 24 people were using the service.

The provider had a system in place to safeguard people from the risk of abuse. Staff received training in protecting people from abuse. Risks associated with people's care had been identified and guidance was in place to ensure staff provided safe care. Medicines were managed in a safe way. The provider had procedures in place to ensure people were protected from the risk and spread of infection. The home was clean and tidy.

Accidents and incidents were recorded, and the registered manager completed an analysis to ensure trends and patterns were identified and action taken to mitigate future risks. Health and safety checks of the building and equipment were maintained.

The providers recruitment policy ensured staff were recruited safely and pre-employment checks were carried out. There were enough staff available to respond to people in a timely way.

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.

We observed staff interacting with people and found they provided person centred care and support. People were offered choices and given the opportunity to express their views. People and their relatives were given opportunity to attend a monthly meeting to express their opinions. The registered manager completed a 'you said, we did' information points to show how they had responded to people's suggestions and ideas.

Audits were in place to ensure the service operated to the standards expected by the provider. Where issues had been identified, action plans were devised and items actioned in a timely way.

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 25 November 2021).

### Why we inspected

We received concerns in relation to leadership, person centred care and staffing. As a result, 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. The overall rating for the service has remained good based on the findings of this inspection.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Headingley Court 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.

# Headingley Court Care Home

## **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

The inspection was carried out by 1 inspector 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

Headingley Court 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. Headingley Court is a care home with 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 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 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 7 people who used the service, 2 about their experience of the care provided and we obtained feedback from commissioners of the service. We spoke with 7 members of staff including the registered manager, care workers and ancillary staff. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included 3 people's care records, and medication records. We looked at 3 staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed. We also spoke with the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

# 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

- The provider had systems and processes in place to safeguard people from the risk of abuse.
- Staff told us they had received training in safeguarding and knew how to recognise and report abuse.
- People told us they felt safe living at the home. One person said, "Staff are brilliant here, it's like a big family and if you need help they [staff] are always there."
- Visiting professionals told us they had never had cause for concern. One visiting professional said, "I have never observed anything untoward."

Assessing risk, safety monitoring and management

- Risks associated with people's care and treatment were identified, and plans were in place to minimise risks.
- Risk assessments were detailed and gave clear guidance for staff to follow.
- Health and safety checks of the building were carried out and equipment was serviced in line with current 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 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

- Staff were recruited safely and there was evidence pre-employment checks had been carried out.
- Staff told us they received support and supervision sessions from the management team which gave them opportunity to talk about their role.
- We observed staff interacting with people and found there were sufficient staff available to respond to

people in a timely way.

#### Using medicines safely

- Medication procedures in place ensured people received their medicines as prescribed.
- Medicines were stored, administered and recorded appropriately.
- Staff responsible for medicine management, received appropriate training and had their competencies assessed regularly.

#### Preventing and controlling infection

- We were assured the provider was preventing visitors from catching and spreading infections.
- We were assured the provider was supporting people living at the service to minimise the spread of infection.
- We were assured the provider was admitting people safely to the service.
- We were assured the provider was using PPE effectively and safely.
- We were assured the provider was responding effectively to risks and signs of infection.
- We were assured the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured the provider's infection prevention and control policy was up to date.

#### Visiting in care homes

The registered manager and provider ensured people maintained contact with families and friends. Visitors were welcome at the home.

#### Learning lessons when things go wrong

- The provider had a system in place to monitor accidents and incidents. The registered manager analysed incidents and used them as learning opportunities to minimise future 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. 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

- People were supported by staff who promoted person centred care. One person said, "I have lived here for 5 years and chosen to live here. I have made good friends with staff and other residents. These people are my family now." Another person said, "We have a lot of laughs and that's what makes this so good here. The staff have fun as well so it's a happy place."
- Staff knew people well and promoted their independence by offering choices and respecting people's decisions.

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

- The management team understood their legal requirements and could evidence notifications had been made to CQC and to the local authority when required.
- The provider and registered manager were aware of their duty of candour and were open and honest when things went wrong.

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

- The provider had a system in place to engage with people, their relatives, and staff. Questionnaires were periodically sent out to people requesting feedback about the home.
- People's comments and suggestions were taken seriously and acted on. For example, people had requested a projector for the lounge area and this had been sourced.

Continuous learning and improving care; Working in partnership with others

- The registered manager used a quality audit system to identify issues and improve care.
- The provider and registered manager worked well with others ensuring people's needs were met and appropriate professionals involved when required.
- People, their relatives, staff, and other professionals, predominantly felt involved and listened to. They knew the registered manager well and had confidence to raise any concerns and felt they would be appropriately addressed.
- During the inspection process, some concerns were brought to our attention. We found the provider was taking appropriate actions and involving relevant professionals.

