

Valdigarth

# Valdigarth

## Inspection report

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Date of inspection visit:  
20 July 2021

Date of publication:  
13 August 2021

### 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

Valdigarth is a residential care home providing personal care for up to 10 people living with a learning disability. There were 10 people living at the service at the time of this inspection.

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

The registered manager was not always clear about which incidents should be reported to the Commission. Services that provide health and social care are required to inform CQC of important events by submitting a statutory notification. We have made a recommendation about statutory notifications.

People and relatives told us they thought the service was safe. Staff understood their safeguarding responsibilities. Risks to people were appropriately assessed and clear guidance was in place for staff to manage risks. There were enough staff on duty to support people, and staff were recruited appropriately. People received their medicines as prescribed. Infection control policies and procedures were in place to help keep people safe.

Audits were regularly carried out to monitor the quality of the service for people. Leaders were approachable and people had confidence in the management. The service involved people, relatives and staff in a meaningful way. Feedback was encouraged and action taken in response to people's views. Referrals were made to healthcare professionals in an appropriate and timely manner.

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right Support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

Based on our review of the safe and well-led key questions, the service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

People were offered choice and encouraged to pursue their interests. People were supported to be independent where possible. Staff were knowledgeable about people's individual characteristics and their preferred routines. People were treated with respect and spoke positively about the staff supporting them. The service had a person-centred culture, a positive atmosphere, and was open to suggestions, feedback and continuous improvement.

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 15 November 2019).

### Why we inspected

The inspection was prompted in part due to concerns received about allegations of financial abuse. A decision was made for us to inspect and examine those risks. These allegations are subject to a criminal investigation. As a result, this inspection did not examine the circumstances of the allegations.

The information CQC received about the allegations indicated concerns around the management of risk, safeguarding service users from abuse, submission of notifications, and oversight.

We found no evidence during this inspection that people were at risk of harm from these concerns. Please see the safe and well-led sections of this full report.

We reviewed the information we held about the service. No areas of concern were identified in the other key questions. We therefore did not inspect them. Ratings from previous comprehensive inspections for those key questions were used in calculating the overall rating at 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.

The overall rating for the service has remained the same. This is based on the findings at this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Valdigarth 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 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?

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.

# Valdigarth

## 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.

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

This inspection was carried out by two inspectors 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

Valdigarth 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.

The provider was not asked to complete a provider information return prior to this inspection. This is

information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

#### During the inspection

We spoke with three people who used the service and four relatives about their experience of the care provided. We spoke with eight members of staff including one of the partners, the finance director, the registered manager, the deputy manager, and four care workers.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service were reviewed.

#### After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data, policies, procedures, and quality assurance records. We spoke with one professional who had regular contact with the service.

# 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 this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- There was a safeguarding policy and procedure in place to help keep people safe. Staff were knowledgeable about the policy and knew where to access it. An easy read safeguarding policy had been produced which was readily accessible for people.
- People and relatives told us they thought the service was safe. One person told us, "I'm happy here and I like everybody." Comments from relatives included, "[Person] is very safe and staff would quickly tell us if anything is wrong" and "There is not a single member of staff that I have even the slightest concern about."
- Staff understood their safeguarding responsibilities and knew what to do if they had any concerns. One staff member told us, "I can always go to management if I need to raise anything. I know which routes to take if a safeguarding were to be against them [management]. I know where to go to and I have no issues."

Assessing risk, safety monitoring and management

- Risks to people were assessed and mitigated. Care plans included information from these assessments for staff to follow to safely support people.
- Risk assessments were in place for people who displayed behaviours which may challenge others. There was guidance for staff around the behaviour itself, the hazard it may pose, and what staff should do to control or minimise the risk. For example, staff were encouraged to use distraction and de-escalation techniques such as talking calmly and engaging people to focus on something positive.
- The environment was safe. Environmental audits were carried out monthly, including fire safety checks, lighting needs, window safety, and general maintenance.

Staffing and recruitment

- There were enough staff on duty and staff were recruited appropriately. Suitable pre-employment checks were carried out and an induction was in place for new staff.
- The service was flexible with staffing levels. Staff levels were reviewed weekly and were varied depending on the activities happening each week, and individuals' particular needs.

Using medicines safely

- Medicines were managed safely.
- People received their medicines as prescribed. Medicine records were clear and fully completed by staff. Protocols were in place to manage 'when required' medicines.
- Staff had received medication training. One staff member told us, "I feel very confident administering medicines. Our knowledge is checked every week."

### Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- We were assured the provider was facilitating visits for people living in the home in accordance with the current guidance.

### Learning lessons when things go wrong

- Lessons were learnt following incidents. An action plan was put in place following a recent safeguarding. One professional told us, "I have found [the registered manager] to be open and honest, and open to any offers of support, guidance and changes to the service in order to safeguard the individuals who live there."



# 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 this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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 registered manager was not always clear about their legal responsibilities. Notifications were not always submitted to the Commission. Services that provide health and social care are required to inform CQC of important events which happen in the service by submitting a 'notification'.

We recommend the provider reviews current guidance on submitting statutory notifications to CQC and take action to update their practices accordingly.

- Important incidents were appropriately recorded and investigated. Professionals told us they found the service worked well with them and the service kept relevant third parties well-informed and up to date. One professional told us, "They send emails and call me, they are very good at keeping me up to date."
- The registered manager carried out regular audits to monitor the quality of the service. The provider held monthly meetings with the registered manager and, before the pandemic, would carry out unannounced visits.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- There was a positive atmosphere in the service. One relative told us, "Staff feel like a close-knit family." Another relative told us, "I can't sing their praises enough. The service is friendly, happy, busy, and homely."
- Care plans were person-centred. People were encouraged to take part in activities they liked and to be as independent as possible. People's rooms were individual to their tastes, and people were given choice and appropriate support. Staff were knowledgeable about people's likes and dislikes.
- Leaders were approachable. Staff and relatives spoke positively about the management of the service. One staff member told us, "I could definitely go to the [registered manager] if needed. The [registered manager] is always there to help you." One relative told us, "The [registered manager] is good, compassionate and organised. If she says she is going to do something, she does, and then lets me know."

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; continuous learning and improving care

- The service involved people, relatives and staff in a meaningful way.
- People were supported to provide feedback using easy read surveys and through monthly resident

meetings. Suggestions were followed up by the service, and changes were made in response to feedback.

- Staff and relatives had opportunities to provide feedback through questionnaires. The results were analysed and led to further discussions with a view to making improvements for people.

#### Working in partnership with others

- Staff worked in partnership with other organisations and health care professionals.
- Referrals to healthcare professionals were made in an appropriate and timely manner. Records were kept confirming involvement with other professionals, for example, speech and language therapists, social workers, physiotherapists and occupational therapists.