

Heathcotes Care Limited

# Heathcotes Flanshaw

## Inspection report

141 Flanshaw Lane  
Wakefield  
WF2 9JF

Tel: 01924335733

Date of inspection visit:  
22 July 2021

Date of publication:  
03 September 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

Heathcotes Flanshaw is a care home providing accommodation for up to six people. The service specialises in supporting younger adults with a learning disability and autistic spectrum disorder. At the time of the inspection five people were living in the home.

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

We saw people were safeguarded from abuse and any risks associated with people's care were managed well, and without being overly restrictive. Those we spoke with told us they felt people were safe and we saw people were happy and relaxed with the staff. People's needs were met by staff who were recruited, trained and deployed effectively. People were protected from the risk and spread of infection and people's medicines were managed safely.

It was clear there was strong and thoughtful leadership, with an emphasis on treating people as adults and empowering them. There was also an emphasis on listening, reflecting and learning lessons to improve the service overall, and people's quality of life.

There were effective systems of governance, monitoring and review of the quality and safety of the service. People's feedback was sought and acted upon in positive ways, and there was an emphasis on ensuring the service was person centred. People were supported to have access to other health and social care services.

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.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

### Right support:

The setting is community based, and people were able to access their local community, nearby shops and services.

Care and support was person-centred and promoted people's dignity, privacy and human rights. People were supported in the least restrictive way and education and learning was promoted.

The ethos, values, attitudes and behaviours of leaders and care staff ensured people using the service were leading confident, inclusive and empowered lives. One person's relative said, "[Person] is empowered and given opportunities to do as many different things as possible."

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 August 2019).

### Why we inspected

We received information of concern in relation to the service. These included concerns about the management of risk, people's safety, staff culture and governance. A decision was made for us to inspect and examine those risks. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

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.

The overall rating for the service has not changed. This is based on the findings at this inspection.

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

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

# Heathcotes Flanshaw

## Detailed findings

### Background to this inspection

#### The 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 was planned 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 two inspectors.

#### Service and service type

Heathcotes Flanshaw 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

An unannounced inspection visit took place on 22 July 2021.

#### 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 other 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

The inspection visit took place on 22 July 2021.

During the inspection site visit we spent time talking with people who used the service. We also observed people's interaction with support staff. This helped us understand the experience of the people who could not talk with us. We looked around the building and spoke with the registered manager, two team leaders and four support staff. The head of service and the regional manager also attended to support the inspection. We saw the written records, risk assessments and care plans for three people and medicines records for three people. We looked at personnel and recruitment records for three staff. .

After the visit we requested and reviewed further records in relation to the management of the service, which were provided to us remotely. This included quality and safety systems processes, meeting minutes, and staff training and supervision records. We also spoke with two relatives, two independent advocates and two social workers by telephone to gain their views of the service. We undertook a video meeting with the registered manager on 26 August 2021 to discuss and complete the inspection and feedback our inspection findings.

After the inspection

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

# Is the service safe?

## 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 and wider leadership team had a very good understanding of their role in ensuring good governance.
- Systems and processes for audit, quality assurance, and for reviewing and questioning staff's practice were effective. The quality and safety checks and audits completed in the service were effective in identifying and addressing shortfalls and concerns.
- Organisational learning from audits and incidents were shared within the team and throughout the provider's services.
- The registered manager and their team was well thought of. It was clear the registered manager provided strong and thoughtful leadership. There was an emphasis on treating people as adults and empowering them. There was also an emphasis on listening, reflecting and learning lessons to improve the service overall, and people's quality of life.
- We received positive feedback about the registered manager's approach. One relative told us when there was an issue they were concerned about, they felt listened to, and the issue was addressed quickly.
- The registered manager was aware of their responsibilities in relation to the duty of candour. They were also clear of the requirement to notify CQC of all significant incidents and concerns.

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

- The registered manager promoted a person-centred culture. It was also clear they encouraged learning lessons to support improvements in the service.
- Staff we spoke with were positive in their feedback and in their approach.
- We saw people were encouraged to make decisions and speak for themselves.
- One person's relative said, "[Person] is calmer, and happy." An advocate told us, "People are treated as adults and empowered to make their own decisions. They are given opportunities to engage in meaningful activities of their choice. The service has done well in supporting people to get out in the community. If the way support is offered isn't successful, they're flexible and good at adapting to meet people's needs."

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

#### characteristics

- The atmosphere was welcoming and inclusive of people's diversity. During the COVID-19 pandemic communication with people's relatives had been organised to suit people's needs and preferences. This included by telephone, post, online chat, and by video calls. One relative said visits had been limited due to COVID-19. When they had been able to visit, they were made very welcome. They phoned regularly and chatted with their relative and with the staff. They added, "Of course, regular letters are sent to keep us up to date."
- People, and those close to them were asked about their satisfaction with the service, in conversation, meetings and via surveys.
- It was evident that all of the feedback from people, their relatives and advocates, professionals and staff was used to improve the service.

#### Working in partnership with others

- We received positive feedback from the independent advocates, social workers, and the local authority safeguarding team regarding the service. This included the way the registered manager and their team had been managing during the COVID-19 pandemic.



# Is the service well-led?

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