

HC-One No.1 Limited

# Woodlands View Care Home

## Inspection report

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## Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Woodlands View Care Home is a residential care home providing personal and nursing care to 59 people in three bungalows at the time of the inspection. The home can support up to 120 people when all four bungalows are open.

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

People felt they were safe and well supported by the service. Individual risks were assessed, and staff were aware of these. Reviews of events and accidents were carried out and any actions needed were taken. Medicines were managed well, and staff knew how to report any concerns about a person's safety or welfare. People told us staff were mostly available when they needed them. Infection prevention and control was managed safely.

Staff received the appropriate training for their role and people felt they had the right knowledge and skills. Staff felt supported by the management team. Some staff felt at times there needed to be more of them. The management team were actively recruiting, and agency staff were used when needed.

People and relatives told us care was delivered in a way they liked. Care plans included information needed to support people safely and in accordance with their wishes and preferences. These were reviewed regularly. There were activities and events available to help reduce social isolation and promote people's well-being.

People, relatives and staff were asked for their views about the service and felt listened to. There were effective monitoring processes in place to help ensure a good standard of service. Quality assurance systems identified any areas that needed further development. There was refurbishment in progress which people and their relatives were happy about.

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 the service was requires improvement,( published on 28 August 2021).

### Why we inspected

We carried out an unannounced focused inspection of this service on 27 July 2021. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when. This was to improve safe care and treatment.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions safe, responsive and well-led which contain those requirements.

The ratings from the previous comprehensive inspection for those key questions not looked at on this occasion were used in calculating the overall rating at this inspection. The overall rating for the service has changed from Requires Improvement to Good. This is based on the findings 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 coronavirus and other infection outbreaks effectively.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Woodlands View Care Home 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 responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# Woodlands View Care Home

## **Detailed findings**

### Background to this inspection

#### The inspection

This was a focused inspection to check whether the provider had made the required improvements following the last inspection. We will assess all of the key questions at the next comprehensive inspection of the service.

As part of this inspection we looked at the infection control and prevention measures in place. This included checking the provider was meeting COVID-19 vaccination requirements. 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 undertaken by three inspectors. Two of these inspectors carried out the site visit and one inspector inspected the home remotely.

#### Service and service type

Woodlands View Care Home 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 who was 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

The inspection was unannounced.

### What we did before 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 did not request a provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

### During the inspection

We spoke with 10 members of staff, the area director and the registered manager. We spoke with four people who used the service and received feedback from five relatives. We received feedback from the local authority and requested feedback from health care professionals. This was not received at the time of drafting the report.

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.

### After the inspection

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

# 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 Requires Improvement. At this inspection we found that the rating has improved to Good

### Assessing risk, safety monitoring and management

- At the last inspection, the provider failed to ensure people were protected from the risk of harm due to poor infection control. This was a breach of regulation 12 (Safe Care and Treatment) 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 12.

### 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.
- Family and friends were supported to visit people living at the service in line with current government guidance. However, we discussed with the management team the need to ensure staff were all clear about the recent changes to visiting. Visits in the visiting room were restricted to a time limit to enable others to have visitors too. However, bedroom visits were not restricted in length or time of visit.

From 11 November 2021 registered persons must make sure all care home workers and other professionals visiting the service are fully vaccinated against COVID-19, unless they have an exemption or there is an emergency.

- The service was meeting the requirement to ensure non-exempt staff and visiting professionals were vaccinated against COVID-19.

### Assessing risk, safety monitoring and management

- People and relatives told us staff worked safely. One relative said, "I feel my [family member's] safety is in very good hands."

- People's individual risks were assessed. These were reviewed and updated following an incident, for example a fall, or change in needs.
- Staff told us that the management team was regularly checking they were working safely.
- We spoke with staff who were able to confidently describe safe practice and knew what they would do in the event of an incident such as a fall or an emergency.

#### Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us they felt safe living at the home. One person said, "I feel safe." Another person said, "I wouldn't have it if we had anyone nasty. I would tell them." A relative told us, "I feel she couldn't be in better hands. I can enjoy my time with her and relax when I'm not there."
- Safeguarding incidents were reported to us when needed and to the local authority safeguarding team.
- Staff were aware what abuse might look like and knew how to report any concerns they had within the service or externally. Staff told us they could raise any concerns with the management team.

#### Staffing and recruitment

- People and their relatives told there were enough staff available to meet their needs. One person said, "They will come quickly to help me." However, on the unit where refurbishment had started, one person said, "They [staff] are doing their best but they are rushed." A relative said, "There always seem ample staff on duty when I visit. The staff take time to know their residents."
- Staff told us that at times they needed more staff. They told us it did not impact on care but would enable them to spend more time with people. Staff felt the refurbishment works made them busier and they would need more staff. One staff member said, "The staff have all pulled together and I couldn't ask for a better team. We all communicate well and work well together to share any problems or issues."
- On the day of the visit we saw that staff were supporting people when needed. People were clean, comfortable and not distressed. Care records reviewed showed that people's care needs had been met. Call bell audits showed that these were answered in an acceptable timeframe. There were a low number of accidents and incidents and no home acquired pressure ulcers. This also indicated that care needs were being met.
- The management team were working to recruit more staff. The area director told us, "HC-One have no problem with funding more hours where needed, particularly while the refurbishment is ongoing, our challenge is recruiting which we have a team working on." When needed the home was supported by agency staff and the registered manager ensured they were working with staff employed by the service.
- During the pandemic critical staffing levels were decided and critical care plans and record keeping was also implemented to reduce the burden on staff to help ensure needs were met.
- The service had a robust recruitment process which included appropriate checks to help ensure staff were suitable to work in a care setting. Criminal record checks and references were sought before staff started working with people.

#### Using medicines safely

- Staff were trained to support people with their medicines safely. The management team ensured staff completed competency assessments.
- We reviewed a sample of medicines and records held. We found that quantities of medicines aligned with records held. Medicines were stored safely. Where oxygen was in use, there was signage and staff knew how to manage it safely.
- The management team carried out audits to help ensure medicines were managed safely.

#### Learning lessons when things go wrong

- The provider had systems in place to help ensure learning from events, incidents or accidents.



- The learning from these events was shared with staff during training, meetings and supervisions.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Requires Improvement. At this inspection we found that the rating has improved to Good.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- At the last inspection, people had not felt involved in decisions about changing the units they resided on and felt socially isolated as a result. In addition, extra support for people who had lost friends in the home was not given. At this inspection feedback about support and care was positive. One relative said, "The staff all know my [family member] and know what may stress her or what relaxes her, and they do all they can to keep her happy." Another relative said, "Since [family member] moved in they have worked miracles she is really happy here."
- People were happy with the care they received and that it was given in their chosen way. One person said, "The carers are all nice." A relative told us, "My [family member] has actually improved since she has been at Woodlands and she is very complimentary of the immediate staff." Another relative said, "I am happy, my [family member] receives a high standard of care and support in the home, the staff are kind, caring and very supportive. Not just to [family member] but to me also."
- Care plans were detailed and gave information to staff so they could support people safely and appropriately.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- When the care plan was developed at the start of supporting a person, staff discussed any specific communication need or preference the person had. The service could give all relevant documentation in large print, easy-read format or in people's preferred language as needed.
- People and their relatives told us that staff communicated well and in a way that met their needs. For example, two people used a whiteboard to communicate.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- At the last inspection people did not feel they had opportunities to get involved with activities to limit social isolation. At this inspection we found people were more involved with activities and events.
- People and their relatives told us there was enough for them to do. Relatives told us that the care and attention given by staff had improved their family members lives and wellbeing. One relative said, "My [family member] mainly enjoys listening to music and also enjoys her own company but there are always activities for mum to join in with." One to one activities were being provided in people's rooms in two of the

units due to the ongoing refurbishment works of communal areas.

- The registered manager told us that people often used unused bedrooms as small lounges or visited each other's rooms to socialise. While we did not see this in action on the day of the site visit, following the visit we received photos and records which showed people were spending time with others in bedrooms in smaller groups and enjoying crafts, musical activities, reading and pamper session.
- On the unit with no refurbishment in progress, group activities were ongoing, and people were seen to be involved and enjoying it.

#### Improving care quality in response to complaints or concerns

- People and their relatives told us they had not have any complaints, but all said they would be confident to do so if the need arose. One relative said, "I know the manager and some staff, they always make time to stop and ask if I am ok or if anything is needed and just to ask should I have any questions. I am very confident to ask if I have any concerns, but I have none."
- The provider had a system in place to record and monitor complaints. This helped them identify any reoccurring issues so they could be resolved.

#### End of life care and support

- At the last inspection we found additional care, support and consideration was not always given to people nearing the end of their lives. At this inspection we found people's end of life care and support needs were met.
- Staff engaged with visiting healthcare professionals to ensure people were comfortable and pain free. Staff were trained and supported so they knew how to support people at the end of their life.
- We found care plans included the practical information needed to meet a person's needs at the end of their lives. The registered manager told us that often people and their relatives did not wish to discuss this as it was a difficult subject. We discussed how staff relationships with people could help enhance care plans with the holistic information such as favourite music, scents and personal items. The management team told us that there was further work planned on care plans and training to further develop end of life care provision in the home.

# 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 Requires Improvement. At this inspection we found that the rating has improved to Good.

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

- People and relatives said the whole management team was approachable, friendly and helpful. One person said, "I am very happy. Staff are kind."
- Feedback about the culture and approach of the service was very positive. A relative said, "I have overall been very impressed with Woodlands View, especially with the management and staff."
- The management team ensured people and their relative knew how to share their views to the CQC and on a care service website. We saw some reviews on this website and found that feedback was positive.

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

- The registered manager understood their responsibilities in relation to the duty of candour. Staff told us they were encouraged to speak up if there were any issues and the management team wanted to hear their views.
- The registered manager provided guidance and support for staff. Staff told us that they found the management team approachable and knowledgeable. The registered manager, deputy manager, and area director on their visits to the home, spent time on the units, speaking with staff and observing
- There were audits across all key areas of the service. For example, COVID-19, staff competency, care plans and medicines. This information was added onto an action plan to give an overview of performance and any areas that needed addressing.
- Refurbishment works had started in the home. People and their relatives were pleased that the work was in progress. However, one person commented that they did not like that the communal areas were out of use.
- We reviewed the management plan of the works and discussed how they would ensure people did not miss out on interaction and become socially isolated. We discussed with the management team the impact on people as the communal areas were not accessible. Also, how the staff would manage with the work ongoing with people in their rooms and noise from building works.
- Following the visit, the registered manager provided us with a further developed plan and this gave assurances that there would be limited impact on people. The area director also gave assurance that should it be needed; additional staffing hours would be available.

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

- People and their relatives were positive about how the service engaged with them and they felt their views were listened to. One relative said, "The service provided is very well run and I am asked on my views, I have received a letter regarding the refurbishment works taking place, the noise may upset my mother but I know the care home will be doing all they can to make my mother feel comfortable and will be reassuring her if this becomes an issue."
- Another relative said, "There are family meetings but again due to COVID-19 these were restricted and so the management team set up Zoom meetings. Which worked well. I recently attended the first face to face which was nice, the office staff have always been really helpful also. The home works as a team. Which is really encouraging for the families I think."
- People's feedback was sought through surveys and meetings. The feedback was collated so any actions could be developed. There had not been a survey since our last inspection as next survey was due to be sent.
- Staff feedback was sought through surveys, supervisions and meetings.

#### Continuous learning and improving care

- The management team reviewed events and shared any learning with the staff team.
- Following the last inspection, the management team made four staff members IPC champions. This included care and housekeeping staff. The outcome has been fewer issues found through checks and audits by the management team. Also, we did not have any IPC concerns at this inspection.
- The management team were looking for ways to further improve the service. They were providing opportunities for further training for staff to help build their knowledge and skills. The provider was also updating some of their systems to further improve the way they worked.

#### Working in partnership with others

- The management and staff team worked with health and social professionals to ensure support and the right care for people.
- The management team also worked with the local authority to help drive improvements in the home. The report from their most recent visit showed the home was making and maintaining the improvements.