

# Auckland Care Limited

# Cwello Lodge

## Inspection report

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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

Cwello Lodge is a residential care home providing accommodation for persons who require personal care. The service can accommodate up to eight people with learning disabilities and/or mental health needs. At the time of inspection there were eight people living in Cwello Lodge. The accommodation is spread over two floors. There were bedrooms on both levels of the home and all bedrooms had a private toilet.

Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

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

People were happy living at Cwello Lodge. They told us they felt safe, got on well with the staff, were given choice as to how they lived their lives, and were able to speak up if needed.

We found the provider ensured people were supported safely. There were sufficient numbers of suitable, motivated staff. Processes and procedures were in place to store and administer medicines safely. We were assured appropriate infection prevention and control measures were in place to protect people against the risk of COVID-19 and other infections.

The service was well led. The staff team told us they felt supported by the provider and manager. People who used the service and staff could contribute their views on how the service was managed. The manager had processes in place to monitor and improve the quality of service people received.

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.

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 10 May 2018).

### Why we inspected

This was a planned inspection based on concerns that the service had no registered manager. Managers are expected to register with CQC.

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.

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 remained good.

Please see the safe and well-led sections of the full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Cwello Lodge 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 safe findings below.

# Cwello Lodge

## 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

Three inspectors carried out this inspection.

#### Service and service type

Cwello Lodge 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 did not have a manager registered with the Care Quality Commission. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

We gave a short period notice of the inspection to check the COVID-19 status of the home, and to check we would be able to comply with social distancing and other pandemic requirements during the visit.

#### 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. This included notifications of events providers are required to tell us about, and information from members of the public about their experience of 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 five people who used the service about their experience of the care provided. We spoke with the manager and three members of staff.

We reviewed a range of records. This included three people's care records and multiple medication records. We looked at two 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.

#### After the inspection

We continued to seek clarification from the manager to validate evidence found. We looked at records sent to us by the manager. These included meeting minutes, surveys, and staff training records. We spoke with three staff and five relatives of people who use the service. We also received feedback from the local authority commissioners.

# 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

- People told us they felt safe in the home. One person said, "If I was unhappy, they would listen and they would try to fix it. They're protecting me. They're making sure I'm safe."
- Staff were aware of the risks of abuse and poor care, and what to do if they were to witness or suspect instances of abuse. Staff were confident if they were to raise a concern it would be dealt with appropriately.
- The provider had suitable policies and processes to keep people safe. This included procedures on safeguarding and whistleblowing.

Assessing risk, safety monitoring and management

- The provider had processes to identify, assess and manage risks to people's individual safety and wellbeing. These included risks associated with falls, infections, scalds, and epilepsy. People had individual evacuation plans for the event of an emergency in which they had to leave the home for a period.
- The provider assessed and managed risks associated with the environment in which people lived. These included infection control risks during the COVID-19 pandemic. The provider had a fire safety risk assessment in place with weekly tests and fire drills.
- The provider took into account the risk of legionella, a potentially fatal infection, in their internal risk assessments. However, we noted there had not been a legionella risk assessment by an independent competent person. We discussed this with the manager, and they arranged for an independent risk assessment to be carried out following our visit.

Staffing and recruitment

- There were sufficient numbers of staff to support people safely and in line with their needs.
- The provider had a robust recruitment process. The process included the necessary checks to make sure applicants were suitable people to work in the care sector, and a period of probation during which their suitability to work in the home was assessed.

Using medicines safely

- People received their medicines safely and in line with their prescription. Staff who administered medicines had appropriate training and their competency was checked. Medicines records were complete and up to date.
- Staff managed and stored people's medicines safely and securely. There were appropriate guidance and protocols, including for medicines to be taken "as required".

Preventing and controlling infection

- The provider managed the control and prevention of infection in line with government guidance, including regular audits and an infection control lead in the home. Processes and procedures were updated in line with new COVID-19 requirements.
- 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 personal protective equipment (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.

#### Learning lessons when things go wrong

- Staff understood the need to report accidents and incidents. The reports were followed up by the manager to identify any learning to improve people's care and support.



# 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.

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

- The manager worked closely with people and staff to create a friendly, open and comfortable atmosphere in the home. Staff felt supported to deliver high quality care that led to good outcomes for people. People told us they were very happy living at Cwello Lodge, which was shown in the service user meetings and weekly "chill and chat". One person said, "I am happy here it is my home." Another person told us, "I am very pleased here. I like my room. I've got a nice key worker. I'm happy."

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 manager was aware of the need to be honest and transparent in the event of certain notifiable events. The manager had good relationships with people's relatives. One person's relative said, "(the manager) is a good manager who is a good communicator, she gives me regular updates and I would feel comfortable raising issues with her."

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

- Staff were clear about their roles, the risks people had and how to report issues.
- There was a system of regular checks and audits to monitor the quality of service provided. The manager recorded the regular checks they carried out. This included monthly quality audits to check the home and people's care continued to meet their needs.
- The manager was aware of reporting requirements to CQC and other organisations, including new ones which had been introduced during the COVID-19 pandemic. These included regular updates on people's testing and vaccination status.
- The provider did not have a registered manager in place but there was a suitably qualified and experienced manager who did that role. We advised the manager to register with CQC to comply with the conditions of the provider's registration.

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

- The provider involved people who used the service and their families where they could. There were service user meetings every month, with the most recent at the end of February 2021. One person said, "We have meetings. Key worker meetings too."

- Staff felt engaged and involved. There were monthly staff meetings and supervisions which were opportunities for two-way conversations. The most recent staff meeting was in February 2021.

#### Continuous learning and improving care

- The manager kept up to date with current guidance and standards through local professional forums, online resources and the provider's line manager calls. They were open to suggestions from other agencies.

#### Working in partnership with others

- The provider was open and transparent when working with other agencies and healthcare professionals to deliver joined-up care for people. They had a good working relationship with the local authority and GP practice. A professional from the local authority said the manager had "Good communication, good partnership working with social services, very helpful." People had a yearly review of their health needs with a GP or community nurse to check their care plans continued to meet their needs.