

J C Care Limited

# Woodhouse Hall

## Inspection report

14 Woodhouse Lane  
East Ardsley  
Wakefield  
West Yorkshire  
WF3 2JS

Tel: 01924870601

Website: [www.prioryadultcare.co.uk](http://www.prioryadultcare.co.uk)

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13 December 2023

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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

Woodhouse Hall is a care home registered to provide accommodation and support for up to 19 people. The service provides support to people with a learning disability and autistic people who may have mental health needs. There were 18 people living at the home at the time of the inspection.

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

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

### Right Support

People were respected and valued as individuals. People were supported to engage in activities and to learn new skills. 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.

### Right Care

Most risks to people's care were assessed and actions put in place to manage them. We found some issues with the safety and maintenance of the premises. The manager took immediate action to address the issues and reduce risks for people. Overall, medicines were administered safely but some specific areas needed improvement. The management team were aware of their safeguarding responsibilities; appropriate referrals had been made when required. Incidents and accidents were managed in a way that ensured lessons were learnt to prevent reoccurrence.

### Right culture

Quality assurance systems were in place and happening regularly, however these had not always been effective in identifying or addressing in a timely way the issues found at this inspection. We have made a recommendation in relation to ensuring quality assurance processes are effective. People were treated with dignity and respect. The management team were knowledgeable and passionate about delivering quality care centred around people's needs and preferences.

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 on 25 October 2017).

### Why we inspected

We undertook this inspection to assess that the service is applying the principles of Right support right care right culture.

#### 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.

<p><b>Is the service safe?</b></p> <p>The service was safe.</p> <p>Details are in our safe findings below.</p>	<p><b>Good</b> ●</p>
<p><b>Is the service well-led?</b></p> <p>The service was well-led.</p> <p>Details are in our well-led findings below.</p>	<p><b>Good</b> ●</p>

# Woodhouse Hall

## 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

This 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

Woodhouse Hall 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.

#### 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 manager in post who had submitted their application to register as a manager.

#### Notice of inspection

This inspection was unannounced.

Inspection activity started on 13 December and ended on 20 December. We visited the location's service on 13 December 2023.

#### What we did before the inspection

Before the inspection, we reviewed all the information we held about the service including information about important events which the service is required to tell us about by law. We reviewed feedback from other stakeholders. These included the local authority safeguarding team, commissioning teams, infection and prevention control team and Healthwatch Leeds. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used the information the provider sent us in the 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 4 people using the service and 4 relatives and advocates about their experience of the care provided. We observed care in the communal areas to help us understand the experience of people. We gathered feedback from 3 healthcare professionals.

We spoke with several members of staff including the manager, deputy manager, senior carer workers and care workers.

We reviewed a range of records. This included 3 people's care plans, risk assessments and associated information. We also reviewed multiple medication records. We looked at 2 staff files in relation to recruitment, training, supervision and appraisals. A variety of records relating to the management of the service, including policies and procedures were also reviewed.

# 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. The rating for this key question has remained good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

- Overall, people's medication was well managed and we did not find any medication errors.
- People took their medication on time and there were regular medication reviews with relevant healthcare professionals, in particular for people who require medication to support their mental health. One healthcare professional told us, "I have a patient on [anti-psychotic medication] that we were reducing the dose of, and they [staff] have been responsive about changing timings when we needed, and monitoring mental health together with nursing around the reduction of doses."
- We found guidance for medication to be taken 'as and when' required was detailed but we also found examples where this had not been printed out and was not easily accessible to staff; this was put in place immediately after we raised it. Staff were able to describe when to support people with this type of medications and which signs to look out for.
- The service supported people to be as independent as possible to manage their medication. Staff were carrying out regular checks on the medication for one person who self-administered their medication, but these were not documented. The manager told us this would be implemented immediately.
- Staff had their competency to safely administer medication regularly assessed.

### Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Some areas of the home required maintenance and we found one window restrictor was not in place. These issues were addressed on the day of our inspection.
- Most risks to people's care were well managed, and people were supported appropriately with positive risk taking. One healthcare professional told us, "An element of positive risk taking is involved in supporting these residents, and this has a clear therapeutic benefit for them which I am supportive of."
- However, we found a few examples where some risk assessments required review; staff were able to describe the measures in place to manage those risks. The manager told us a new electronic system had been implemented to record people's risk assessments and care plans and they would ensure risk assessments reflected the care in place and input from other healthcare professionals involved. One relative told us, "I have no safety concerns. I think [person] loves the home where [they are]." One person told us, "I feel safe and happy here and know staff look after me".
- We reviewed evidence confirming the provider was aware of best practice guidance when supporting people with disabilities and autism who could, at times, feel very distressed and required staff to support them with positive behaviour support or physical interventions. The provider was reviewing accidents and incidents that had happened at the home, including behavioural incidents, and looking for patterns and trends to look for opportunities to make improvements to people's care and how the service was managed. One healthcare professional described us how one person who used the service who required frequent input from the mental health team and had previously had recurrent hospital admissions, but was now "very

stable and no longer needing [mental health] input. Woodhouse Hall seem to have a good core team that know [person's] needs and is managing [person] well."

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.
- Staff were aware of the principles of the MCA and how these were applied to practice.
- We found people did not have their liberty unnecessarily restricted and people's choices were promoted and encouraged. One relative told us, "[Person] has the freedom to do what [person] wants. There are no restrictions on going out, waking up, going to bed, etc".

Systems and processes to safeguard people from the risk of abuse

- Systems were in place to protect people from abuse and avoidable harm.
- The manager and staff understood what to look out for and who they should report any concerns to.

Staffing and recruitment

- Recruitment was managed safely.
- Staffing levels and staff deployment were safe.

Preventing and controlling infection

- Overall, the provider was managing the risks of cross infection well.
- We found the home's environment to be clean.
- Staff had completed training in infection control prevention.

Visiting in care homes

- Relatives and friends were able to visit people living at the home, in line with visiting guidance.



# 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. The rating for this key question 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.

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

- We found several aspects of the home were well managed, but we identified some improvement was required linked to quality assurance systems.
- We found examples of audits being effective in identifying issues and addressing them, however we also found examples where audits had not been fully effective. For example, the window restrictors had been audited every month in 2023 but the issue we identified had not been found. The medication audit completed before our visit indicated that there were no issues with protocols and guidance for 'as and when' medication but we found some were not in place.

We recommend the provider reviews their quality assurance processes to ensure these are effective in identifying and addressing areas for improvement.

- Feedback from people, relatives and staff was positive about the management team and told us the manager was "approachable".
- The manager was proactive during the inspection and responsive in acting on the issues identified.
- There were plans to continue developing the service, such as the embedding the new electronic care planning system and continue developing opportunities for people.
- The provider had fulfilled their duty to inform CQC and the relevant authorities of incidents happening at the service.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People received care which was personalised to their individual needs and focused on their outcomes. We reviewed evidence showing examples of how people had set personal goals and, with the planned support in place, achieved them. Feedback from an advocate described how staff had been committed in looking for different solutions to support a person to live as independently as possible.
- People told us they enjoyed living at the service and staff were kind. One relative commented on the positive relationship one staff member had with their loved one, they told us "[Person's] regular worker is [name of staff member] and she is absolutely amazing. She knows [person] inside out, knows [their] ways. She can read [person] like a book."
- People were involved in several activities in their home and out in the community which included

volunteering and learning opportunities. One person told us, "I go into Wakefield on the bus mostly, with a carer. I go out almost every day. I like buses and I eat when I am out."

- The service proactively involved people and sought their views. People were consulted and involved in making decisions about aspects of their home such as menus and activities.

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 understood their responsibilities under the duty of candour and were open about any lessons that needed to be learnt as a result of incidents.

- Staff told us the management team were supportive and any issues raised would be acted on appropriately.

Working in partnership with others

- Records showed us that health and social care professionals were regularly involved with people's care planning.

- A healthcare professional told us, "Staff and management are receptive to my professional advice and are keen to follow this."