

## Anchor Hanover Group

# Wynyard Woods

### Inspection report

Wynyard  
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Date of inspection visit:  
28 July 2022  
08 August 2022  
19 August 2022

Date of publication:  
04 November 2022

### Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

### About the service

Wynyard Woods is a care home that provides personal care for up to 50 people, some of whom are living with dementia. At the time of the inspection there were 47 people living in the home.

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

People felt very safe living in the home and with the support they received from staff. People and relatives spoke highly of the staff and said they were kind and caring. Comments included, "I'm very safe here and looked after extremely well. Everything about it, the whole environment and security is very good" and, "The atmosphere shows caring staff who interact with the residents which is good. There's nothing I can think of that needs improving. I have been in several homes and this is by far the best one."

Staff safeguarded people from abuse. Risks to individuals and the environment were well managed. There were enough staff to meet people's needs. The provider learned from accidents and incidents to mitigate future risks. Medicines were safely managed. Infection control processes were embedded into the service and staff followed government guidance in relation to infection control and prevention practices, in particular, relating to COVID-19. A relative said, "Everywhere is kept clean and tidy. There are always cleaners around."

People's needs were assessed before they moved into the home and on an ongoing basis. Staff were suitably trained and received regular supervisions. People were supported with their nutritional needs and to access a range of health care professionals. People were supported to have maximum choice and control of their lives, and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

People were well supported and cared for. Staff treated people with respect and supported them in a dignified manner and in line with their wishes. One person told us, "The good thing here is that I get my privacy when I want it or join others should I wish to. We are all treated equally. I would recommend it here."

People received person-centred care and care plans detailed how they wished to be supported. Staff knew how to effectively communicate with people and communication methods were detailed in care records. People and relatives knew how to raise concerns and any complaints received were fully investigated and actioned. People enjoyed a wide range of activities inside and outside the home.

The home was well managed. People and relatives were complimentary about the home and the care people received. The provider had an effective quality assurance process in place which included regular audits. People, relatives and staff were regularly consulted about the quality of the service through regular communication, surveys, meetings and reviews.

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 8 February 2020). In May 2021 the provider applied to CQC to make a minor change to their registration. Anchor remains the corporate provider for this service.

#### Why we inspected

This inspection was prompted by a review of the information we held about this service.

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.

#### Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

# Wynyard Woods

## 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

The inspection team was made up of one 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

Wynyard Woods is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement dependent on their registration with us. Wynyard Woods is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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 registered manager in post.

#### Notice of inspection

This inspection was unannounced.

### What we did before the inspection

We reviewed information we had received about the service since the provider registered the location with us. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

### During the inspection

We spoke with 11 people and 7 relatives about their experience of the care provided. We spoke with 8 members of staff including the district manager, registered manager, deputy manager, a team leader, an activities champion, the administrator and two care assistants. We also received feedback from 3 other staff members. 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.

We reviewed documentation, inspected the safety of the premises and carried out observations in communal areas. We reviewed a range of records including 4 people's care records, medicines records and quality audits. We looked at 2 staff files in relation to recruitment. 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. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Staff supported people to keep them safe. People told us, "I'm very safe here, everything in here is good, couldn't wish for anything better, staff do a marvellous job" and, "It's very safe here. I can't say anything else. We are being looked after very well, I always feel safe."
- Staff knew people very well and were aware of how to report any safeguarding issues or concerns. Staff had completed safeguarding training. One staff member said, "I'm very confident to report and uses the whistle blowing procedure. The residents come first, it's my job to make sure they are safe in their home. If I saw or heard something I thought wasn't right, however big or small, I would report it straight away."
- Safeguarding alerts were raised with the local authority in a timely way, when required.

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

- Staff assessed and managed risks to people's health, safety and wellbeing effectively.
- The premises were safe. There were environmental risk assessments in place including fire, and regular checks and testing of the premises and equipment were carried out.
- Staff recorded accidents and incidents appropriately and in a timely way.
- The registered manager monitored and analysed records to identify any trends or lessons learned.

Staffing and recruitment

- There were enough staff to safely meet people's needs. One person said, "Yes there are enough staff. They respond straight away if I have any problems."
- The registered manager and deputy manager determined staffing levels in line with people's individual support needs.
- Staff were recruited in a safe way. The provider had an effective recruitment and selection policy and procedure in place which included all appropriate checks.

Using medicines safely

- Staff safely administered and managed people's medicines. One person said, "I have a good understanding of my medicines and [they are] always on time."
- Staff had received medicines training and regularly had their competence assessed.
- Regular medicine checks and audits were carried out to identify any errors and take appropriate action.

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 supporting people living at the service to minimise the spread of infection.

- 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 responding effectively to risks and signs of infection.
- 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.

# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs were assessed before they received support. This meant the registered manager could make sure staff were able to effectively meet people's needs.
- People's choices and preferences were included in their assessments and associated care plans. These were regularly reviewed and updated in line with people's changing needs and wishes.

Staff support: induction, training, skills and experience

- Staff completed regular training to make sure they had the correct skills and knowledge to appropriately support people. One staff member told us, "There's a lot of training and refresher courses. Any concerns [registered manager] will support and if needed set more training up for you. Training is available within Anchor and is open to anyone who wishes to progress."
- Staff completed a comprehensive induction at the start of their employment. This included completion of the Care Certificate. The Care Certificate is an agreed set of standards that define the knowledge, skills and behaviours expected of specific job roles in the health and social care sectors. It is made up of the 15 minimum standards that should form part of a robust induction programme.
- Staff were supported in their roles through regular supervisions, observations and appraisals.

Supporting people to eat and drink enough to maintain a balanced diet

- Staff encouraged and supported people to maintain a balanced diet. Comments from people and relatives included, "The food is very good with choices and alternatives. The food is wonderful and there's plenty to drink" and, "Food is very good, exceptional. They accommodate choices, nothing is too much trouble and they will save the meal if [family member] is asleep."
- Care records detailed any specific dietary needs people had and what support they required from staff.
- Risks associated with eating and drinking, such as choking, were fully assessed and safety measures were detailed in care plans.

Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives, access healthcare services and support

- People were supported to maintain their health. Staff assisted people to access support from health care professionals such as GPs, speech and language therapists and dieticians, when required.
- Care records documented engagement people had with health care professionals and recommendations were incorporated into care plans and followed by staff.

Adapting service, design, decoration to meet people's needs

- The home was appropriately decorated, adapted and designed to meet people's needs.
- People personalised their rooms with things important to them such as ornaments, pictures and family photos.

#### Ensuring consent to care and treatment in line with law and guidance

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 MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff supported people in line with MCA and best practice guidance.
- Staff had received MCA training and sought consent from people prior to providing support.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- People felt respected, listened to and very well cared for. People and relatives described staff as "very kind," "caring" and "very good." One relative said, "Staff are wonderful and 100% friendly. They know [family member] well and spend time with her talking about her life and past experiences which is lovely."
- Equality, diversity and human rights policies were in place to make sure the person was treated fairly, regardless of their age, sex, race, disability or religious belief.
- Staff supported people to follow their faith. The activity champions worked with people to design a church service every Sunday, including which readings and hymns to include. Other people received regular holy communion.
- Staff spoke very fondly about people and interacted with them in a warm and friendly manner.

Supporting people to express their views and be involved in making decisions about their care

- People and their relatives were involved in making decisions about their care. Comments included, "My care plan was [reviewed] last week" and, "We recently reviewed [family member's] care plan with a social worker assessment."
- Some people had relatives who advocated on their behalf which was clearly documented in care records.
- Staff knew people's choices and preferences in relation to their care and these were detailed in their care plans. A relative told us, "Staff know her well and treat her nicely, always pleasant and kind"

Respecting and promoting people's privacy, dignity and independence

- Staff treated people in a dignified way and respected their wishes and choices. People and relatives told us, "Very kind and caring staff who always treat me with dignity and respect" and, "Staff understand [family member's] needs. They are all very nice to her, are friendly and always treat her with dignity and respect, very gentle and speak nicely when chatting to her."
- Staff promoted people's independence. One person told us, "I can be independent and completely confident with the ability of the staff to provide whatever I need." Care plans detailed people's capabilities and what daily tasks they required support with.
- People's personal information was stored securely. Care files were stored in lockable cabinets and could only be accessed by authorised staff.

# Is the service responsive?

## Our findings

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

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people's needs were met through good organisation and delivery.

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

- People received person-centred care which met their needs and preferences. Care plans instructed staff how to support people in line with their needs and wishes.
- Staff regularly reviewed care plans to ensure they reflected people's needs.
- Staff personalised support to suit individual people's preferences. For example, encouraging people to choose which songs to listen to when getting their hair done or taking part in activities such as dancing.

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.

- People had their communication needs assessed as part of their initial assessments and these were regularly reviewed. Alternative ways of communicating with people were detailed in care plans such as using picture cards and translation sheets.
- People could access information in different languages, easy read and in large print, if needed.

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

- People enjoyed and took part in a wide range of activities in the home. A relative said, "What impresses me about Wynyard is the atmosphere. There's always plenty going on and they make a real effort at Christmas and Halloween etc, really celebrate and make the residents part of it and fun."
- The home had dedicated activities champions who were very passionate about their roles and tailored activities to what people wanted to do. One activities champion said, "I absolutely love my job. We respect everyone's decisions. It's up to them what they want to do. But we do find, that often, we can find the right kind of activity to encourage them to get involved, or if we use a different approach, that sometimes works too."
- People were supported to maintain and develop relationships, and to follow their own interests and social activities.

Improving care quality in response to complaints or concerns

- Complaints were recorded, investigated and actioned.
- People and their relatives knew how to raise concerns and felt they were dealt with appropriately. Comments included, "I have no complaints, I would speak to the staff [if I did]" and, "I have had to complain in the past. I go to [registered manager], she is always apologetic and sorts out any problem."

- All complaints or concerns raised were appropriately actioned in accordance with the provider's complaints procedure.

#### End of life care and support

- People's end of life wishes were respected. Care records contained details of people's wishes, spiritual faith as well as if they had a Do Not Attempt Cardio Pulmonary Resuscitation in place.
- At the time of the inspection there was no one receiving end of life care.

# 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. At this inspection the rating 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.

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

- The registered manager and staff promoted a positive culture in the home. One relative told us, "Things they do well are the best atmosphere. I have visited many homes, it is nice here, welcoming when residents use the communal areas, very good. The ethos of the place encourages that."
- The home was very well-managed. A person told us, "I get all I need, everything is good here, nothing could be better."
- Staff told us they enjoyed working in the home and felt management were approachable. They told us, "I find [registered manager] very approachable, and [deputy manager]. I would go to either of them if I had any issues or needed support or advice" and, "[Registered manager] is approachable, her door is always open. [Deputy manager] is friendly, caring and will always help."

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 provider and registered manager acted on the duty of candour. They conducted themselves in an open and honest way. Statutory notifications were submitted in a timely way for significant events that occurred in the home, such as safeguarding concerns and serious injuries.
- The registered manager and staff understood their roles and responsibilities.
- The provider and registered manager monitored the quality of the service to make sure they delivered a high standard of care and to drive improvement.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- Feedback from key stakeholders was used to improve the service. People, staff and relatives were asked to share their views of the service via regular communication, meetings, surveys and reviews.
- The provider, registered manager and staff worked in partnership with other health professionals to achieve positive outcomes for people. People's care records showed involvement and guidance from other agencies such as GPs, district nurses, speech and language therapists, podiatrists, physiotherapists and dieticians.