

# Lifeways Community Care Limited Woodlands Cottage

### **Inspection report**

Fernlea Drive, Scotland Gate Choppington Northumberland NE62 5SR Date of inspection visit: 04 March 2021

Good

Date of publication: 23 March 2021

Tel: 01670828487

### Ratings

### Overall rating for this service

Is the service safe?	<b>Requires Improvement</b>	
Is the service well-led?	Good	

## Summary of findings

### Overall summary

#### About the service

Woodlands Cottage is a residential care home providing personal care to up to four people who have learning and physical disabilities. There were three people living at the service at the time of our inspection.

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

We reviewed the provider's infection and prevention control processes and found, whilst there were protocols and procedures in place, further action was required to ensure the risk of the spread of infection was being managed robustly.

We have recommended the provider ensures the systems for the management of infection prevention and control are embedded in the service to ensure correct practices are followed.

People received safe care. There were systems in place to safeguard people from harm or abuse. Risk assessments were in place to support people to be as independent as possible. Staff were aware of their responsibility to keep people safe and were confident that any concerns raised would be acted upon by the manager.

There were arrangements in place to ensure people received their medicines safely and when required. Staff undertook training in the safe management of medicines and regularly had their competencies assessed to ensure they were following the correct practices.

There were enough staff to meet people's care needs. The service followed safe recruitment practices.

Quality assurance systems were in place to monitor the quality of care and support people received. When people had accidents or incidents these were recorded, and actions taken to minimise the risk of reoccurrence.

The service worked in partnership with other health and social care professionals to meet people's needs.

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 guidance CQC follows to make assessments and judgements about services providing support to people with a learning disability and/or autistic people.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. Care provided was person centred, focusing on people's wants and wishes. People were supported, where they were able, to make choices about their daily living including activities they wished to take part in.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

### Rating at last inspection The last rating for this service was good (published 30 October 2018).

#### Why we inspected

We received concerns in relation to the safeguarding of people living in the home. As a result, we undertook a focused inspection to review the key questions of safe and well-led only.

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.

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. We have found evidence that the provider needs to make improvement. Please see the safe section of this full report.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?	Requires Improvement 😑
The service was not always safe.	
Details are in our safe findings below.	
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Is the service well-led?	Good 🛡
The service well-led.	Good •



# Woodlands Cottage 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.

Inspection team The inspection was carried out by one inspector.

### Service and service type

Woodlands Cottage 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. The registered manager was not present during our inspection. The provider had recently appointed a new manager who supported the inspection.

Notice of inspection This inspection was unannounced.

### What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included information about concerns and incidents the provider must notify us about. We sought feedback from the local authority 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-

People who used the service were not able to verbally communicate with us in detail, but we observed they looked happy and relaxed in the company of staff. We spoke with the manager, a team leader and two support workers.

We reviewed a range of records. This included two people's care records and 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 provider to validate evidence found. We looked at training data and quality assurance records. We tried to contact two relatives of people using the service. We managed to gain feedback from one relative.

### 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 is now rated as requires improvement. This meant some aspects of the service were not always safe. There was an increased risk that people could be harmed.

Preventing and controlling infection

- The provider had a system to assess and monitor infection control across its services. This had been updated and amended in response to the COVID-19 pandemic. However, this system was not always fully followed by staff.
- Staff had received training in infection prevention and control. Information was shared regarding the putting on and taking off of PPE. Staff told us they were required to wear PPE for all planned physical contact with people. We identified minor shortfalls with infection control relating to visiting procedures and the use of PPE.
- There were procedures in place to support visitors to access the home safely. However, this was not followed by staff on our arrival and infection control checks were not fully completed. The manager said they will follow this up with staff.

We recommend the provider ensures the systems for the management of infection prevention and control are embedded in the service to ensure correct practices are followed.

- •There were enough supplies of personal protective equipment (PPE) for staff to use.
- The provider was accessing testing for people using the service and staff.

Systems and processes to safeguard people from the risk of abuse

• Safeguarding policies and procedures were in place to guide staff on how to protect people from different forms of harm or abuse.

- Staff had received safeguarding training and were clear and confident about the actions they would take should they witness poor practice or abuse.
- Concerns were investigated to ensure people's rights were respected and people were protected from harm, abuse and discrimination.

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

- The provider had completed assessments of people's support needs and associated risks.
- Staff had a good understanding of how to keep people safe and their responsibilities for reporting accidents, incidents or concerns.
- Accidents and incidents were recorded and investigated by the management team to ensure appropriate action was taken to implement any changes to people's care, required to keep them safe.

Staffing and recruitment

- There were enough staff with the right mix of skills to meet people's needs.
- Safe recruitment practices were followed to ensure staff were of good character and suitable for their role.
- There were arrangements in place to cover staff absence from the service.

### Using medicines safely

• Systems were in place to manage medicines safely. Policies were in line with national guidance on the safe management of medicines.

- Medicines were stored and disposed of correctly. There were minor shortfalls with the recording of medicines. This had been identified by the manager and measures were in place to address this.
- People received their medicines as prescribed. Regular medicine reviews took place each year.

### 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

- Quality assurance systems and governance arrangements were in place to identify improvements and the actions needed to address them.
- Staff spoke positively about the culture and understood the vision of the service. One staff member told us "We have always been about promoting choice and independence with the people we support. Things are looking good with the direction the new manager is taking us. I am enjoying my role."

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

- Staff were aware of the vision of the service which they felt was to support people to live their life to the full and promote their independence.
- The manager was new in post. They had started to conduct internal audits and where shortfalls had been identified, an action plan was in place to address these.
- The manager was visible within the service and was responsive to the needs of people living in the home. Staff spoke positively about the new manager. Their comments included, "I feel with the new manager we are going in the right direction."

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

- The service worked in partnership with other health and social care professionals to meet people's needs. Records we viewed evidenced health care appointments.
- During the pandemic people had been supported to maintain contact with their loved ones. In the absence of face to face visits, telephone and skype calls had taken place.
- Prior to the pandemic the service had built links with the local community. The manager explained these links were on hold until they were able to safely engage with them again.

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 investigated incidents fully and was open and honest with exploring any lessons to be learned.

• The manager understood their responsibilities should they become registered and the need to submit the appropriate notifications to CQC.