

## **Woodstock House Limited**

# Woodstock House

### **Inspection report**

20 Woodstock Road Salisbury Wiltshire SP1 3TJ

Tel: 01722417171

Date of inspection visit: 30 April 2021

Date of publication: 28 May 2021

### 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

Woodstock House is a care home providing accommodation and support for people with mental health needs, including autistic people and people with a learning disability. At the time of the inspection nine people were living there. The maximum number of people the service is registered to accommodate is nine.

Woodstock House is one adapted building situated in the centre of Salisbury and provides easy access to local facilities. There is a communal living and dining area and a conservatory with access to the garden. People at the service were supported to develop independent living skills. The goal is for people to move onto more independent living.

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

People told us they felt safe. People were encouraged to be as independent as possible and staff spoke proudly of people's achievements. There were enough numbers of staff to meet people's needs. Staff had received safeguarding training and knew how to act on any concerns to protect people from abuse.

We were assured that people were protected by the prevention and control of infection.

The service was well-led. The management team provided clear leadership and was committed to providing high quality care. Staff felt valued and well supported. Health care professionals spoke highly of the model of care provided by the service. Effect systems were in place to monitor the quality and safety of the service.

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.

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.

This service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. People were supported to maximise their independence and their ability to manage aspects of their own lives. People had regular access to others who were important to them, two people said they were able to have their family pet visit and stay with them. People were treated as individuals and supported to reach their goals.

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 May 2018).

#### Why we inspected

This was a planned inspection based on the previous rating. This report only covers our findings in relation to the key questions of Safe and well-led.

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.

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 hasn't changed from good. This is based on the findings at this inspection.

You can read the report from our last inspection, by selecting the 'all reports' link for Woodstock House on our website at 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 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?	Good •
The service was safe.	
Details are in our safe findings below.	
Is the service well-led?	Good •
Is the service well-led? The service was well-led.	Good



# Woodstock House

## **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

This inspection was carried out by two inspectors.

#### Service and service type

Woodstock House 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.

#### Notice of inspection

This inspection was announced.

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out and we wanted to be sure there would be people at home to speak with us.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 this information to plan our inspection.

#### During the inspection

We observed staff supporting people and looked at all the communal areas in the premises. We spoke with eight people who used the service and one relative about their experience of the care provided. We spoke with five members of staff including the registered manager, deputy manager, two support workers and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

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 provider to validate evidence found. We looked at training data and quality assurance records. We spoke with eight professionals who regularly visit the service.



## 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 at the service. Their comments included "I like that if I have a problem I can speak to the staff" and "I trust staff; I feel safe here."
- The registered manager demonstrated an understanding of their responsibilities to report any safeguard concerns to the local authority and to notify CQC.
- People were safeguarded and protected from potential abuse. Staff knew how to recognise, and report safeguarding concerns and felt they would be listened to. They worked closely with relevant health and social care professionals to develop safety plans with people when needed.
- A member of staff told us "We all know people very well and can pick up early when things change because we have built up a good rapport."

Assessing risk, safety monitoring and management

- Risks to people were assessed and measures were taken to reduce these to maximise people's independence and ability to remain in control of their life. This included risks in relation to refusal of medication, behaviour that challenges and healthy lifestyle.
- One professional told us "They're quick to spot potential risks as they know their residents well and have positive relationships with them."
- People told us that staff understood their needs well. "Staff are nice, helpful. I feel safe here. I can speak to my key worker or any of the staff." This included people's health related risks.
- The service was not risk adverse. Staff encouraged people to make choices and take managed risks, enabling them to enhance their health and wellbeing. People were very much involved in developing their own risk management plans.

#### Staffing and recruitment

- People were supported by a consistent staff team. There were enough staff to support people safely.
- One relative told us their family member "Is well looked after and the staff help them achieve their targets."
- People were protected by safe recruitment processes. Staff had pre employment checks, these included checks with the Disclosure and Baring Service (DBS) and obtaining suitable references.

#### Using medicines safely

- Staff supported people to take their medicine in line with their assessed needs.
- Medicine administration records (MAR) were accurate and reviewed regularly.
- People were involved in decisions on how they took their medication and supported towards self-

medicating. Policies and procedures were reviewed and updated in response to changes in people's circumstances.

• Staff were trained and assessed as competent to administer medicines.

#### Learning lessons when things go wrong

- Systems were in place to record and review accidents and incidents in the service.
- Staff told us they were confident they could speak up if mistakes were made.
- The management team reviewed risk assessments and care plans following incidents to prevent it happening again this included reviewing staff training.

#### 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'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 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 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 management team and staff were motivated to provide the best possible person-centred care and supported people towards their individual goals.
- The service was provided in line with Right support, right care, right culture to ensure positive outcomes for people. One person described their care as "Brilliant, lots of support here. Everyone treats you with kindness and respect." A professional said "They [Woodstock House] provide a comprehensive, person centred approach to the people they support." A staff member told us "We will also support, challenge and advocate for people so that their treatment reflects what they wish to do."
- Staff said they felt comfortable to put forward any ideas they may have to improve the care, support or wellbeing for people and were confident these would be acted upon.

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

- The registered manager had oversight of the service on a day to day basis and knew people well. They delivered care and support to people alongside their staff and were knowledgeable and committed to providing high quality care.
- A range of audits and checks were completed routinely to monitor risk and quality in the service. This included infection and control, fire safety and incident management.
- Staff enjoyed working at the service and were clear on their roles and responsibilities. Without exception they told us they felt supported and valued by the management team.
- One staff member told us "I'm really privileged to work in such a brilliant place" and "The continuity in how it's been run is brilliant."

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

- People were involved in the running of the service. Satisfaction surveys and 'in house' meetings were completed to feedback their views .
- The registered manager told us; "The door is always open" for people to raise any concerns. One person told us they were "Happy to speak with the managers and they would sort it out."
- Effective communication processes were in place to ensure staff had up to date information on people's care and support needs. This included detailed handovers at the beginning of the day.

Continuous learning and improving care; 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 registered manager understood the duty of candour and their duty to be open and honest about any incident which caused or place people at risk of harm.
- We saw evidence of learning from incidents. Investigations took place and appropriate changes took place.
- There was a culture of continuous learning and improving care. For example, a professional told us "They are aware of their limitations and will always in my experience request assistance at the earliest opportunity to provide best support for their clients."

#### Working in partnership with others

- The service collaborated effectively with a variety of health and social care professionals, which achieved good outcomes for people.
- Professionals were positive about the interactions they had with the service; comments included, "Woodstock House are very easy to work with, they have excellent communication, very flexible and reactive in all aspects of their work" and "The staff team are extremely transparent both with us and the residents."
- The manager also worked closely with other local healthcare services and organisations (voluntary and independent sector) to ensure that there was an integrated local system that supported people to develop life skills and to move on to more independent living.