

Kodali Enterprise Limited

# Woodside Care Home

## Inspection report

Lincoln Road  
Skegness  
Lincolnshire  
PE25 2EA

Tel: 01754768109

Website: [www.woodside-carehome.co.uk](http://www.woodside-carehome.co.uk)

Date of inspection visit:  
04 July 2022

Date of publication:  
30 August 2022

## Ratings

Overall rating for this service

Inadequate ●

Is the service safe?

**Inspected but not rated**

Is the service well-led?

**Inspected but not rated**

# Summary of findings

## Overall summary

Woodside Care Home is a residential care home which can provide personal care for up to 42 people. The service is provided in a two storey building which is attached to a hotel also owned by the provider. When we inspected there were no people living in the service.

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

There were no people using this service when we inspected. However, we found the provider had not ensured the premises were safe and meeting legal requirements, or that any service provided would be safe and well-managed.

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

We did not rate the service at our last inspection because the service was not providing care and no people were living in the service (published 21 December 2021).

Why we inspected

We carried out this inspection because the provider informed us they had made improvements and were planning to provide care to people in the future. This inspection was carried out to assure ourselves sufficient improvement had been made so the service could meet the needs of people when admitted.

We found the provider had not taken sufficient action and remained in breach of Regulation 12 (Safe care and treatment) and Regulation 17 (Good governance) of the Health and Social Care Act (Regulated Activities) Regulations 2014. In addition, we found the provider was in breach of Regulation 15 (Premises and equipment)

Follow up

The overall rating for this service is 'Inadequate' and the service remains in 'special measures'. This means we will keep the service under review and, if we do not propose to cancel the provider's registration, we will re-inspect within 6 months to check for significant improvements.

If the provider has not made enough improvement within this timeframe. And there is still a rating of inadequate for any key question or overall rating, we will take action in line with our enforcement procedures. This will mean we will begin the process of preventing the provider from operating this service. This will usually lead to cancellation of their registration or to varying the conditions of the registration.

For adult social care services, the maximum time for being in special measures will usually be no more than 12 months. If the service has demonstrated improvements when we inspect it. And it is no longer rated as inadequate for any of the five key questions it will no longer be in special measures.

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

We always ask the following five questions of services.

### **Is the service safe?**

Our last inspection rating for this key question was inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

### **Is the service well-led?**

Our last inspection rating for this key question was inadequate. We have not reviewed the rating at this inspection. This is because we only looked at the parts of this key question we had specific concerns about.

**Inspected but not rated**

# Woodside Care Home

## Detailed findings

### Background to this inspection

#### The inspection

This was a targeted inspection to check the providers progress because they had informed us they had made improvements and were planning to provide care to people in the future. We needed to assure ourselves enough improvement had been made so the service could meet the needs of people when admitted.

#### Inspection team

This inspection was carried out by an inspection manager and an inspector.

#### Service and service type

Woodside Care Home 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.

A manager had been appointed however they had not yet registered with the Care Quality Commission. When a manager is registered with the Care Quality Commission it means 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

We gave a short period of notice for the inspection because we needed to be sure the provider would be available at the service to speak with us.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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 the manager and the nominated individual. We did not speak with people or look at care records as there were no people using the service when we inspected.

After the inspection

We continued to seek clarification from the provider to validate evidence found.

# Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

Our last rating for this key question in September 2020 was Inadequate. We have not changed the rating of this key question as we have only looked at the part of the key question we had specific concerns about.

The purpose of this inspection was to assure ourselves sufficient improvement had been made so the service could meet the needs of people when admitted.

At our last comprehensive inspection in September 2020 the provider had failed to ensure risks associated with infection control, environmental risks and known risks to people were managed. The service was in breach of Regulation 12 (Safe care and treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Not enough improvement had been made at this inspection and the provider remained in breach of Regulation 12.

### Assessing risk, safety monitoring and management

- At the time of the inspection the service was not sufficiently safe for people to live in.
- Safety trunking covering electrical wiring in one bedroom had come unstuck from the wall and this was trailing across the bed in that room.
- At the last inspection we found a large volume of combustible material on the first floor and in the attic space. At this inspection we found combustible materials had been removed from the first floor but remained in the attic which continued to increase the risk of fire spreading through the building. Although there were risk reduction measures in place the amount of combustible material in this area would increase the speed of fire spreading.
- At our last inspection we saw some bedroom wardrobes had been secured to walls. However, at this inspection there were still several wardrobes that had not been secured to walls. This increased the risk of them falling over and causing injury.
- The building was not secure. Many windows on the ground and first floors were still in a poor state of repair. For example, some broken handles remained in place and one had gaps between the window and the frame causing a draft in the room. In addition, where broken handles had been replaced the locking mechanism had been removed.
- Nine bedroom doors did not have locking mechanisms fitted. The doors were left with holes where locking mechanisms should have been fitted.
- One bed remained fitted with metal bed rails with gaps at the head and foot ends. This increased the risk of entrapment.
- Water temperature checks taken by the manager for one bath showed repeated high readings with no evidence of any action being taken to address this.

### Preventing and controlling infection

- Three bed bases remained stained from previous use.
- At the last inspection we found equipment used for the provision of personal care was not clean and showed evidence of surface damage and rust. At this inspection we found no evidence to indicate action had been taken to address these issues.
- Prior to the inspection visit the nominated individual confirmed in writing to us that health and safety and remedial works had been completed throughout the building. During this inspection we found many walls and doors remained stained and dusty. In addition, many floor coverings in bedrooms were stained, dusty and ill fitting.
- We found heavy limescale deposits on equipment in bedroom en-suites and communal bathrooms.
- Wooden fixtures and fittings in some bedroom en-suites and communal bathrooms were damaged which impacted on the ability to keep them clean.
- Tiles on walls in the laundry area were stained and some were broken which impacted on the ability to keep them clean.
- Slings, duvet covers, pillows and wheelchair seat cushions were covered in a layer of dust. In addition, wheelchair seat cushions were heavily stained.
- Some windows were heavily stained and large amounts of dead flies were found on window sills.
- Not all call bell cords had washable covers in place which impacted on the ability to keep them clean.
- Kitchen equipment remained in an unhygienic condition. For example, the cooker top had a layer of built up grease like substance and food debris and the hostess trolley had a layer of food debris within the lower compartments. In addition, the kitchen sink had heavy limescale deposits and the sealant around the sink was cracked and peeling.
- At a previous inspection the provider told us a deep clean of the building would be carried out. At this inspection we found no evidence to indicate action had been taken to address this.

Systems were either not in place or robust enough to demonstrate risks were effectively managed. This was a continued breach of Regulation 12 (Safe Care and Treatment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

# 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.

Our last rating for this key question in September 2020 was Inadequate. We have not changed the rating of this key question, as we have only looked at the part of the key question we have specific concerns about.

The purpose of this inspection was to assure ourselves sufficient improvement had been made so the service could meet the needs of people when admitted.

At our last comprehensive inspection in September 2020 the provider had failed to ensure leadership and governance within the service was effective. This was a breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Not enough improvement had been made at this inspection and the provider was still in breach of Regulation 17.

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

- Since the last inspection the provider had employed a nominated individual to oversee the operation of the service on their behalf. However, the nominated individual had not been able to visit the service for at least 10 weeks prior to this inspection and was not fully aware of the continuing issues we found. In addition, the provider had not released funds in a timely manner which impacted on the timeliness of required improvements being made.
- The nominated individual and manager had implemented a new quality monitoring system. However, this had not been effective in identifying issues we found at this inspection relating to environmental shortfalls which required improvement to ensure the building was fit for purpose.
- There was little evidence to indicate the nominated individual and the manager had addressed issues identified at the last inspection as noted in the safe section of this report. Those issues which were identified in audits undertaken by the manager, such as high water temperatures, had no clear action plan for improvement. This indicated a continued lack of oversight from the nominated individual and the manager.
- The nominated individual told us they were ready to reopen the service. However, they said they still did not have a clear action plan with time frames for completion of other the works outstanding.
- Although the provider had previously told us there were plans to relocate the main kitchen, plans had now been reviewed and the manager and nominated individual told us the existing kitchen area would remain in use. As mentioned in the safe section of this report, kitchen equipment remained in an unhygienic condition. In addition, the manager told us the kitchen was no longer used to provide catering for the adjoining hotel. However, we saw large amounts of food stored in the fridge and freezer despite no-one currently living at the service and the hatch to the adjoining hotel remained accessible from both sides.
- The nominated individual made the proposed staffing structure available to us as requested following the last inspection. Staffing structure plans available at this site visit indicated interviews were underway.



- An application to register with CQC had been submitted by the manager.

The continued failure to ensure adequate leadership and governance was an ongoing breach of Regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

- The premises and equipment were not sufficiently safe for people to live in or use, as noted in the safe section of this report.
- In addition, we found examples such as loose debris on a flat roof directly above the communal courtyard had not been identified or cleared. This increased the risk that debris could fall on people using the courtyard and cause injury.
- We found new floor covering had been laid over uneven flooring which may present a trip hazard.
- Pipe work in the downstairs communal bathroom remained exposed which may present a risk of injury if anyone were to fall onto them.
- Although there was evidence of attempts to repair and decorate some areas of the building, holes remained in walls and walls remained stained. Paintwork and general repair work were of a poor quality and introduced further risks. For example, missing wardrobe door handles had been replaced with a general-purpose screw.
- Call bells would not be accessible for most people as the cords were set at a height which most people could not reach.
- The manager stated they had ordered new beds. However, there was no evidence that mattresses, curtains and remaining furniture required for the service had been ordered.
- There was no evidence to indicate action had been taken to increase privacy screening to the windows of ground floor bedrooms that look directly onto the street. In addition, there was no privacy screening available for use in a small twin bedroom which was intended for two people to use.

The failure to ensure premises and equipment were safe and fit for purpose was a breach of Regulation 15 (Premises and equipment) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

This section is primarily information for the provider

## Action we have told the provider to take

The table below shows where regulations were not being met and we have asked the provider to send us a report that says what action they are going to take. We will check that this action is taken by the provider.

Regulated activity	Regulation
Accommodation for persons who require nursing or personal care	Regulation 15 HSCA RA Regulations 2014 Premises and equipment  The provider had failed to ensure premises and equipment were safe and fit for purpose.