

Hexon Limited

Woodlands Nursing Home

Inspection report

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Filey
North Yorkshire
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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

Woodlands Nursing Home is a residential care home for up to 34 people who require nursing or personal care. Some people who used the service were living with a dementia type illness. There were 32 people using the service at the time of our inspection.

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

People and their relatives were positive about the quality of care people received. The feedback about the service leadership was extremely positive. There was an extensive range of quality monitoring and governance systems embedded in the service.

The service was clean, hygienic and homely. People told us staff were kind and they had a good relationship with them. People received medicines safely. People's care plans were up to date and accurately reflected their needs. People were able to receive visits from their relatives and there was a variety of activities to support their well-being.

People were supported by staff who had received the necessary training for their roles. There were sufficient staff available to support people and staff were recruited safely.

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.

The registered manager and staff had a strong ethos of person-centred care and placed people's wellbeing at the heart of their work. Quality assurance systems were embedded and monitored the service effectively to drive improvements when they were needed. Lessons learnt were used as learning opportunities to continuously develop the service.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 19 January 2022).

The provider completed an action plan after the last inspection to show what they would do and by when to improve. At this inspection we found improvements had been made and the provider was no longer in breach of regulations.

At our last inspection we recommended that the provider reviews all aspects of training for staff at the service. At this inspection we found the provider had acted on the recommendations and implemented

appropriate systems to review and monitor staff training requirements.

Why we inspected

We carried out an unannounced comprehensive inspection of this service on 01 December 2021. A breach of legal requirements was found. The provider completed an action plan after the last inspection to show what they would do and by when to improve the governance of the service.

We undertook this focused inspection to check they had followed their action plan and to confirm they now met legal requirements. This report only covers our findings in relation to the Key Questions safe and well-led which contain those requirements. For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating. The overall rating for the service has changed from requires improvement to good. This is based on the findings at this inspection.

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.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Woodlands Nursing Home on our website at www.cqc.org.uk.

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?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Woodlands Nursing Home

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.

Inspection team

The inspection was completed 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

Woodlands Nursing Home 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. Woodlands Nursing Home is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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 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 last inspection. 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 7 members of staff, this included the registered manager, nurses, care workers and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We spoke with 7 people who used the service about their experience of the care provided and 4 relatives. We reviewed a range of records. This included 3 people's care records and multiple medication records. We looked at 3 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.

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 requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Staffing and recruitment

At the last inspection we recommended that the provider reviews staff training, the training policy and training audits. The provider had made improvements.

- Staff received appropriate training and support. Regular supervision meeting and training checks were completed by the registered manager. Staff told us "The training has improved and we are well supported."
- There were enough staff to meet people's needs. Staff were seen spending quality time with people and engaging in meaningful conversations.
- Staff were recruited safely. Appropriate checks were completed to ensure they were a suitable character to work with vulnerable people.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives felt the service was safe. Comments included, "I am super safe here, the staff are excellent and I feel grateful for everything they [staff] do for me" and "Definitely safe at Woodlands. Any issues, I would go to the manager first, I have every confidence in the registered manager."
- The registered manager followed internal and external procedures to keep people safe.
- Staff received safeguarding training and showed a good understanding of their responsibilities and action to take if they suspected or witnessed abuse.

Assessing risk, safety monitoring and management

- Risks to people were assessed, monitored and reviewed. Where the registered manager identified potential risks to people, they took prompt action to address, managed, mitigated and where possible removed.
- People's health conditions were clearly recorded within their care plans alongside any associated risks. Staff knew people and their needs well and were clear about how they would manage and mitigate any risks.
- The environment was safe and well maintained, some refurbishment work was ongoing during the inspection to update communal areas.

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.
- Capacity assessments were completed, and people were supported in line with their best interests.

Using medicines safely

- Medicines were managed safely.
- People received their medicines in line with prescribers' instructions, appropriate documentation was in place and completed to demonstrate this.
- Regular audits were completed to ensure best practice guidance and policies and procedures were followed.
- Staff followed effective processes to assess and provide support to people when taking their medicines. This included where people displayed behavior that challenged, when offered their medicines. Staff were seen using a variety of approaches to support people to take their medicines.

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.

Visiting in care homes

- People received unrestricted visiting from friends, relatives, and health professionals in line with government guidance.

Learning lessons when things go wrong

- Accidents and incidents were monitored. The registered manager reviewed these to look for themes and trends and ensure appropriate follow up action was taken.
- Lessons learnt were identified and share with the staff team at one to one supervision and team meetings.

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 requires improvement. At this inspection the rating has changed to 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

At our last inspection the provider had failed to ensure systems were in place or robust enough to demonstrate risks to people's physical health were effectively monitored. This was a breach of regulation 17(1) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

Enough improvement had been made at this inspection and the provider was no longer in breach of regulation 17.

- Systems and processes in place to ensure staff received appropriate training had been followed and the registered manager addressed any staff training needs during their supervision meetings.
- Systems to manage quality within the service were followed and fully embedded. This enabled the service to collate information to show how the service was performing. Action plans were completed to address any shortfalls identified from audits.
- The registered manager had a clear understanding of their role and responsibilities, they worked collectively with all staff to demonstrate a positive culture and promote the visions and values of the service.
- Opportunities to reflect on practice and lessons learned was embedded in the service.

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

- People received a high standard of person-centred care and support to meet their diverse needs.
- There was a welcoming atmosphere and people and their relatives spoke positively about the whole staff team and the improvements made at the service. Comments included, "The registered manager put me at ease straight away. It is homely the staff are so kind, everyone is friendly" and "The registered manager definitely manages the place well, they have an 'open door' policy and is always available to talk with."
- Staff were happy in their work and felt supported by the registered manager.

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 their role in terms of regulatory requirements. They were aware of their obligations for submitting notifications to the CQC in line with duty of candour.

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

- People were provided opportunities to feedback to the registered manager and staff about the care they received and the running of the service.
- The registered manager was working collaboratively with external agencies and health professionals to ensure positive outcomes for people.
- A visiting health professionals provided positive feedback about the registered manager and staff.