

Tulip Care Limited

Woolston Mead

Inspection report

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20 July 2023

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Ratings

Overall rating for this service

Requires Improvement 

Is the service safe?

Requires Improvement 

Is the service well-led?

Requires Improvement 

Summary of findings

Overall summary

About the service

Woolston Mead is a residential care home providing personal care to up to 28 people. The service provides support to older people, a number of whom live with dementia. At the time of our inspection there were 24 people using the service.

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

Ongoing improvements were needed to ensure people who used the service had appropriate risk assessments and care plans which reflected their current care needs. A particular focus was needed on new admissions to Woolston Mead or following people's return from hospital.

Governance systems were in place to monitor the safety of the environment as well as the quality of the care being delivered. Further work was needed to ensure all bedroom areas were maintained to a high standard of cleanliness and decoration.

The registered manager and provider was responsive to any improvements we identified and took immediate action to address any issues raised. There was a commitment to delivering high quality care.

People spoke positively about the care they received and were supported by staff who knew them well. Support was delivered in a caring and patient manner. People were comfortable in the presence of staff and positive relationships had developed. There were enough staff on duty to meet people's needs and staff told us they felt well supported.

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.

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

Rating at last inspection and update

The last rating for this service was requires improvement (published 15 August 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. However, the service remains rated requires improvement.

Why we inspected

We carried out an unannounced focused inspection of this service on 14 July 2022. Breaches of legal requirements were found. The provider completed an action plan after the last inspection to show what they would do and by when to improve safe care and treatment and good governance. 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.

The inspection was also prompted in part by notification of an incident. This incident is subject to further investigation by CQC as to whether any regulatory action should be taken. As a result, this inspection did not examine the circumstances of the incident. However, the information shared with CQC about the incident indicated potential concerns about the management of risk of falls and providing a safe environment. This inspection examined those risks. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the Safe section of this full report.

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.

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 remained requires improvement. This is based on the findings at this inspection.

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

Follow up

We will meet with the provider following this report being published to discuss how they will make changes to ensure they improve their rating to at least good. We will work with the local authority to monitor progress. 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 not always safe.

Details are in our safe findings below.

Requires Improvement ●

Is the service well-led?

The service was not always well-led.

Details are in our well-led findings below.

Requires Improvement ●

Woolston Mead

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

This inspection was carried out by 1 inspector.

Service and service type

Woolston Mead 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. Woolston Mead is a care home without 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 4 people who used the service and 5 family members about their experience of the care provided. We observed interactions and spoke with 2 friends of a person who used the service.

We spoke with 7 members of staff including the registered manager, deputy manager, care staff, domestic staff, the cook and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider. We also spoke with a visiting professional from the local authority.

We reviewed a range of records. This included 7 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 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. The rating for this key question has remained requires improvement. This meant some aspects of the service were not always safe and there was limited assurance about safety. There was an increased risk that people could be harmed.

Using medicines safely

At our last inspection the provider had failed to ensure medicines were managed safely. This was a breach of regulation 12 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 12.

- Since our last inspection the provider had changed the medicines system. Medicines were now safely managed. Records of administration were maintained and in line with best practice.
- Medicines were stored securely and only administered by staff who were suitably trained.

Assessing risk, safety monitoring and management

- Systems to assess and manage risk were not always sufficient and required further consideration.
- Care plans had been developed to mitigate risk to people's health and wellbeing, however, risk assessment and care plans were not always completed in a timely manner for people who were newly admitted to the service; or who had returned to Woolston Mead from a period in hospital. Any shortfalls we identified were addressed by the management team.
- Some aspects of the environment required further attention to mitigate the risks to people. For example, lighting near some bedrooms was very dim; external areas of the home needed clearing of excess furniture to enable people to safely use the space. The registered manager took immediate steps to address these issues and a visiting professional confirmed action had previously been taken following our last inspection.
- Routine checks on the environment and equipment were up to date and certificates were in place to demonstrate this.

Preventing and controlling infection

- Systems were in place to prevent and control the risks of infection, however, some aspects of the living environment required further improvements.
- Some seating was tired and worn in lounge areas; a small number of bedrooms needed immediate attention due to damaged furniture and a need for further cleaning. We raised these issues with the provider. New seating had already been ordered and arrived during our visit. Immediate action was taken to make the necessary repairs and decoration of the identified bedrooms.
- The registered manager had received some support and guidance from the recent health protection team. They were due to revisit the home to provide further training to staff.

- The provider was enabling visiting in line with government guidelines. We observed lots of visitors and a visitor confirmed, "I visit every day."

Systems and processes to safeguard people from the risk of abuse; Learning lessons when things go wrong

- Systems were in place to protect people from the risk of abuse and there was a system in place to record and review accidents and incidents.
- Referrals had been made to the local authority safeguarding team when abuse had been suspected and appropriate investigations had been completed.
- Staff received training and understood the actions they must take if they felt someone was being harmed or abused.
- People told us they felt safe and secure living at Woolston Mead. A family member commented, "We chose here because we read [reviews which said] they are nice to the people. [Name] has said he is very happy here."

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. Any conditions related to DoLS authorisations were being met.

Staffing and recruitment

- Staff were safely recruited. Appropriate checks had been made before being offered employment.
- Staffing levels were safe. We observed staff were attentive and available to respond to people's needs on each day of our inspection. Most people told us there were enough staff.

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. The rating for this key question has remained requires improvement. This meant the service management and leadership was inconsistent. Leaders and the culture they created did not always support the delivery of 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 governance and quality assurance systems were effective. This was a breach of regulation 17 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.

- Since our last inspection, the provider had made improvements to monitor the quality of the service. A new medicines management system had been introduced; the provider was making regular detailed checks on the quality of the service. Records were maintained of all provider visits. These evidenced a commitment to continuous learning and improving care.
- Some focus was still needed to continuously monitor the quality of the environment and the care plans of people newly admitted to the service. We discussed our findings with the provider and the registered manager. We received assurance systems would be improved and saw there was an ongoing refurbishment plan in place.
- The rating from the last inspection was displayed in the main reception area.

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

- We observed a positive culture and caring practices throughout our inspection. People were not rushed when being assisted and staff took time to sit and talk with people.
- People told us they were happy living at the service. Comments included, "It's alright here. They look after you" and "It's a nice place to live. Staff are nice."
- Most visiting family members and friends also told us they were happy with the quality of the care people received and felt staff knew people well. We were told, "[Name] has lived here a couple of months. Staff are dead helpful. Dead kind" and "Staff are very pleasant. Couldn't be nicer. [Name] loves it here."
- Some family members were less complimentary about the service. Particularly in relation to the standard of decoration of areas of the home. We followed up on all the issues raised with us with the registered manager and received assurance all the issues raised either had been resolved, or plans were in place to

address these issues.

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

- Relatives were consulted about issues relating to people's care and kept updated with any changes. A relative told us, "[The deputy manager] is very good."
- Relatives also told us they knew how to raise any concerns or provide feedback to the management team. We were told, "I would go to [the registered manager] if there is a problem."
- Staff received regular supervision with their line manager and felt engaged and involved. Staff told us they enjoyed working at Woolston Mead.
- The registered manager demonstrated an understanding of their responsibilities under duty of candour.

Working in partnership with others

- Information contained within care plans and through other records demonstrated the staff at Woolston Mead worked in partnership with other agencies.