

Methodist Homes

# Swallow Wood

## Inspection report

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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

Swallow Wood is a purpose built home providing personal and nursing care to 23 people aged 65 and over at the time of the inspection. Some people using the service were living with dementia. The service can support up to 38 people.

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

People were safeguarded from the risks of abuse. Staff were confident appropriate action would be taken to keep people safe.

Risks associated with people's care were identified and assessments were in place to minimise hazards. Staff were knowledgeable about risks associated with people's care and could explain how they kept people safe.

Accidents and incidents were monitored, and trends and patterns identified. Lessons were learned when things went wrong. People received their medicines as prescribed. There were some minor issues raised during inspection, but we saw that prompt actions were taken to resolve them.

The provider had a robust recruitment procedure which ensured new starters were recruited safely.

We observed staff interacting with people and socially engaging with them. Staff we spoke with told us how staffing levels had improved and they were able to meet people's needs and attend to people in a timely way.

The home was clean and there were Personal Protective Equipment (PPE) stations situated at several points throughout the home. The provider had managed the current pandemic well and implemented effective procedures.

We noted some minor issues on inspection but were assured these were previously known to the provider and were in the process of being resolved.

A range of audits took place to ensure the service was monitored and the quality maintained.

The service had experienced some changes in the management team and the home were currently being supported by the providers quality team. Staff told us this team had supported them well and they felt at ease to ask for their guidance and direction.

The provider engaged with people in the service and acted on their feedback. Staff felt valued and were kept informed.

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

The last rating for this service was good (published 29 March 2018).

## Why we inspected

The inspection was prompted in part due to concerns received about nutrition, hydration and record keeping. As a result, we undertook a focused inspection to review the key questions of safe and well-led only. 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 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.

The overall rating for the service has remained good. This is based on the findings at this inspection. We found the provider had taken action to mitigate the risks and this had been effective. No evidence during this inspection that people were at risk of harm from this concern. Please see the safe and well led sections of this full report.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for 'Swallow Wood' on our website at [www.cqc.org.uk](http://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 re-inspection 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** ●

The service was well-led.

Details are in our well-led findings below.

# Swallow Wood

## 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

The inspection was carried out by two inspectors.

#### Service and service type

Swallow Wood 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 did not have a manager registered with the Care Quality Commission. This means that the provider is legally responsible for how the service is run and for the quality and safety of the care provided. The provider had begun the recruitment process to appoint a manager. However, an interim management team were in place and supporting the home.

#### Notice of inspection

This inspection was announced at short notice due to the current pressures of the COVID-19 pandemic.

#### 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. 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 of this information to plan our inspection.

#### During the inspection

We spoke with four people who used the service and four relatives about their experience of the care provided. We spoke with nine staff members including the area manager, quality improvement manager, nurses and care workers. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment. 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.

# 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 were safeguarded from the risk of abuse. Systems and processes in place showed appropriate actions were taken when safeguarding concerns were raised.
- Staff we spoke with were knowledgeable about the safeguarding process and knew what action to take if abuse was suspected.

Assessing risk, safety monitoring and management

- Risks associated with people's care had been identified and risk assessments were in place to help minimise reoccurrence of risk.
- Staff knew people well and were knowledgeable about risks involved in their care.
- Relatives were confident their family member was safe living at the home. One relative said, "[Relative] has lived at the home a few years now. We are very happy, and it is constantly good, and I can't fault the staff. [Relative] is definitely safe living there."

Staffing and recruitment

- The provider had a recruitment system in place to ensure staff were recruited safely. Staff we spoke with confirmed that pre-employment checks were carried out prior to them commencing their role.
- The provider ensured sufficient staff were available to meet people's needs in a timely way.

Using medicines safely

- Systems were in place to ensure people received their medicines as prescribed.
- Protocols were in place to support people who were prescribed medicines on an 'as and when' required basis. However, one medicine prescribed for one person did not have a protocol. We raised this with the management team who addressed it straight away.
- Staff administering medicines had appropriate training and were competent in this area.

Preventing and controlling infection

- Following discussion with the provider and considering actions taken following our inspection, 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 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 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.

#### Learning lessons when things go wrong

- The interim management team kept a record of accidents and incidents which occurred in the home. This was analysed to ensure future incidents were kept to a minimum.
- We also saw that lessons were learned and practices amended, when things went wrong.

# 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 requires improvement. At this inspection this key question has now improved to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

### Continuous learning and improving care

- At our last inspection this key question was rated requires improvement due to auditing systems not being used effectively and therefore failing to identify concerns. At this inspection we saw improvement had been made.
- The provider had a comprehensive auditing system which was used to carry out quality assurance checks on the service. Issues raised as part of these audits were entered on to an action plan and addressed.

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

- At the time of our inspection, the provider was actively looking to recruit a new manager. The home had been without a registered manager a short time and in the interim, the home was being supported by members of the provider's regional quality team. This consisted of the area manager, the quality improvement manager and a clinical lead, who had dedicated time on site to ensure consistency.
- We received positive comments from people who used the service, their relatives and staff, about this team. One person said, "They [provider] have been very informative, I know I can talk to them at any time, they want us to feel involved." One staff member said, "We have support from head office, but we do need stability of a manager."
- Staff understood their roles and responsibilities and knew who to ask if they needed support and guidance.

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

- The provider had developed a culture where people were at the centre of the home and their individual preferences were maintained. One person said, "Can't ask for anything any better, the staff are all kind." One relative said, "The staff are wonderful people, kindness itself. [Relative] loves them and they love her back."
- The provider engaged with staff and led them in a way that promoted person-centred care. One staff member said, "The Methodist Homes Association are a really good organisation to work for. They have people at the heart of what they do."

### 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

- The provider understood the requirements of the regulations to make notifications and to comply with

duty of candour responsibilities.

- The provider was open and transparent and acted when required to resolve concerns.

Working in partnership with others

- The provider worked with health and social care professionals to support people to receive appropriate and consistent care.