

# Oakview Estates Limited

# Willow House

## Inspection report

229 Portland Road  
Edgbaston  
West Midlands  
B17 8LS

Tel: 01214200210

Date of inspection visit:  
26 March 2019

Date of publication:  
12 April 2019

## Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

About the service:

- Willow House is a residential care home that was providing personal and nursing care to eight people with a range of needs including learning disabilities and behaviours that challenged at the time of the inspection.
- The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

People's experience of using this service:

- People were safe and staff knew how to keep them safe from harm. The provider had a recruitment process to ensure they had enough staff to support people safely. People received their medicines as prescribed. Staff followed infection control guidance and had access to personal protective equipment. Accidents and incidents were recorded and appropriate action taken.
- Staff had the skills and knowledge to meet people's needs. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. People's nutritional needs were met and they received enough to eat and drink to ensure they had a healthy diet. People accessed health care when needed.
- People were supported by staff who were kind and caring and knew them well. Staff were patient, compassionate and empathetic and had built good relationships with people. People's privacy, dignity and independence were respected by staff.
- People's support needs were assessed regularly and planned to ensure they received the support they needed. People's support was individualised. People were supported to take part in activities of interest and their preferences, likes and dislikes were known to staff. The provider had a complaint process which people were aware of to share any concerns.
- The service was well managed. The environment was friendly, warm, and clean. The registered manager was known to people and made themselves available. Feedback questionnaires were used to gather information about people's views. Spot checks and audits were carried out to ensure the quality of the service was maintained.

More information is in the Detailed Findings below.

Rating at last inspection:

- Rated Requires Improvement overall (report published 23/11/2017).

Why we inspected:

- This was a planned inspection based on the rating at the last inspection.

Follow up:

- We will continue to monitor the service through the information we receive until we return to visit as per our re-inspection programme. If any concerning information is received we may inspect sooner.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

## 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 effective?

Good ●

The service was effective

Details are in our Effective findings below.

### Is the service caring?

Good ●

The service was caring

Details are in our Caring findings below.

### Is the service responsive?

Good ●

The service was responsive

Details are in our Responsive findings below.

### Is the service well-led?

Good ●

The service was well-led

Details are in our Well-Led findings below.

# Willow 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 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

#### Inspection team:

The inspection was carried out by one inspector and a specialist adviser in managing behaviours that challenge.

#### Service and service type:

Willow House is a care home. People in care homes receive accommodation and nursing or personal care. 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 was an unannounced inspection.

#### What we did:

Prior to the inspection we reviewed information we held about the service since their last inspection. This included notifications received from the provider about deaths, accidents/incidents and safeguarding alerts which they are required to send us by law. We also contacted the local authority who commissioned services from this provider.

During the inspection we spoke with five people and three relatives to share their views about the support they received. We spoke to three staff members and the registered manager who was available throughout the inspection. We spoke with three health care professionals.

We looked at the care records for three people who used the service and two staff files. We looked at

recruitment and training. We looked at records for how people were administered medicines as well as a range of records relating to the running of the service. This included incident and accident monitoring, auditing systems and complaints.

# Is the service safe?

## Our findings

Safe – this means people were protected from abuse and avoidable harm

Good: ☐ People were safe and protected from avoidable harm. Legal requirements were met.

### Systems and processes

- People told us they felt safe at Willow House. One relative confirmed this by saying, "[Person] is safe there. They [staff] are a great team."
- Staff knew how to recognise abuse and protect people from it. Staff had received training in how to keep people safe and described the actions they would take where people were at risk of harm.
- Accidents and incidents were recorded and investigated to reduce the risk of occurrence in the future.
- The registered manager had systems in place to monitor the safety of the service. For example, they had a system which analysed data on behaviours that challenged and this was able to identify any patterns, trends and triggers to behaviours. This enabled the registered manager to implement action plans to control and manage behaviours that challenge in the future.

### Assessing risk, safety monitoring and management

- Risk assessments had been carried out since our last inspection to make the service safer.
- Risk assessment documentation was in place which showed the actions taken to manage and reduce risks to people.
- The service was managing some behaviours that were particularly challenging whilst we inspected and behaviour management plans were in place to give guidance to staff on how to manage these behaviours safely. One health professional told us how they had worked closely with the service to support an individual who was experiencing behaviours that were challenging and they said, "The staff have managed very well. They do a really good job."

### Staffing levels

- There were enough staff to support people.
- There were thorough recruitment processes in place.
- We saw evidence of recruitment checks taking place before staff were appointed. This ensured suitable staff were appointed to support people.

### Using medicines safely

- Medicines systems were organised and people were receiving their medicines when they should. The provider was following safe protocols for the receipt, storage, administration and disposal of medicines

### Preventing and controlling infection

- We found the home to be clean and tidy.
- We saw staff using personal protective equipment and observed that this equipment was readily available to them.

- We saw staff supporting people following good standards to ensure they could protect against the spread of infection.

#### Learning lessons when things go wrong

- Staff attended reflective practice sessions with the consultant nurse to look at specific incidents and look at what could be done differently to support people in the future.



# Is the service effective?

## Our findings

Effective – this means that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence

Good: ☐ People's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The provider carried out an initial assessment and regular care reviews so they could be sure they could support people how they wanted. We observed that people were involved in care planning as much as possible and care planning documentation was produced in easy read format to help people understand.
- We found people's equality and diversity needs were identified within the care plan and staff received training in equality and diversity to be able to meet people's needs. Staff told us how people were supported to maintain their religious beliefs. For example, one person attended church each Sunday.

Staff skills, knowledge and experience

- People were supported by staff who had the skills and knowledge to do so. A relative told us, "The care is very good, a lot of collaborative working."
- Staff were given opportunities to review their individual work and development needs.
- Where new staff were appointed we saw an induction process was in place.
- Staff received regular on-going training in specific areas such as epilepsy and personality disorder training in order for staff to be able to support people well.

Supporting people to eat and drink enough with choice in a balanced diet

- We saw that people's nutritional needs were catered for and they ate a healthy balanced diet.
- Where people had specific dietary requirements, staff knew these and could support people accordingly.
- There was a training kitchen where people could prepare their own meals if they so wished and store their own food.

Staff providing consistent, effective, timely care within and across organisations

- Staff worked well with family members and liaised regularly with them. One relative told us, "The staff keep me well informed. I am always listened to. If I have any concerns they are actioned."
- Health professionals we spoke with told us how staff at the home worked collaboratively with them. One health professional told us, "Staff are very engaging and willing to go above and beyond."

Adapting service, design, decoration to meet people's needs

- People were involved in decisions about the premises and environment and individuals' preferences, culture and support needs were reflected in adaptations and the environment. Risks in relation to premises and equipment were identified, assessed and well managed.

Supporting people to live healthier lives, access healthcare services and support

- People were supported to access healthcare in the community and live healthy lives. This was evidenced in people's healthcare plans and corroborated by health professionals we spoke with.

#### Ensuring consent to care and treatment in line with law and guidance

- 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 Act 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 who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the Mental Capacity Act (MCA). The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).
- We found where people lacked capacity and were being deprived of their liberty that the appropriate authorisations were in place and being reviewed by the local authority. People were cared for in the least restrictive way.
- Staff received training in the Mental Capacity Act. One staff member said, "Assume everyone has capacity. The MCA is to protect people and act in their best interests."
- We observed people being asked for their consent before support was given.

# Is the service caring?

## Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect

Good: ☐ People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- We saw that people were supported by kind, patient and caring staff. One staff member said, "Everyone's goal is to ensure people have a good quality of life. It's really positive here." A health professional we spoke with said, "I visit people in the home and the passion is there, especially the manager." One compliment from a health professional read, "The passion of your team oozes out of you all and you should be incredibly proud of the support you have given [person]."
- People were cared for by staff that went above and beyond to make them happy. For example, one person had family they had lost touch with and staff facilitated a meeting for them. A compliment received by one family member stated, "Thank you for the tears, laughter and most of all memories."

Supporting people to express their views and be involved in making decisions about their care

- People and their families were involved in care planning and their views and wishes respected. There was evidence of best interest decisions in care plans where people needed help to make their choices.
- People had their own individual activity plans to enable them to participate in activities they enjoyed.
- Staff held monthly meetings with people in order for their views to be shared about how the home is run and what activities they would like to do.
- The registered manager had an employee of the month scheme and people were able to vote on who they thought should receive the award.
- The registered manager produced newsletters for people to share their views, stories and experiences and update them on important events within the home.

Respecting and promoting people's privacy, dignity and independence

- We saw that people's privacy and dignity was respected. We observed that staff knocked and asked permission before entering a person's bedroom. A health professional said, "They [staff] are always respectful."
- People were encouraged to maintain their independence and do as much as they could for themselves. For example, one person went out daily to collect their own newspaper.
- People were encouraged to integrate into the community as much as possible and went out regularly to the local shops and readily accessed other local amenities.

# Is the service responsive?

## Our findings

Responsive – this means that services met people's needs

Good: □ People's needs were met through good organisation and delivery.

### Personalised care

- People's needs were met and staff showed they understood how to support people. Some people at the home exhibited very complex behaviour and staff were well trained and told us they felt confident to support people.
- Staff understood and knew people's hobbies, interests and preferences to support them to take part in social activities. People were encouraged to be active in their choice of hobbies and interests.
- A care plan and assessment was in place to show the support people needed and these were reviewed regularly. People and their relatives were involved in their care reviews.

### Improving care quality in response to complaints or concerns

- The provider had a complaints process in place. There had only been one complaint in the last twelve months which had been fully investigated in line with company policy. The registered manager knew the importance of monitoring for trends. One relative said, "I have no complaints at all."
- Staff knew who to talk to if they had any concerns. Staff told us they were supported by the management. One staff member said, "The registered manager is brilliant. I can't fault them."

### End of life care and support

- There were no end of life care plans in place, however, people at the service were not receiving end of life care.

# Is the service well-led?

## Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture

Good: ☐ The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

### Leadership and management

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- Relatives and health professionals spoke highly of the service and explained how the service was always welcoming and responsive. A health professional told us how the registered manager had looked at creative ways to support a person who needed tests carrying out for their health and arranged these tests at times which would cause the least amount of stress for the person.
- Relatives and staff spoke positively about the registered manager. A health professional said, "The registered manager is really proactive, has a can do, find the way forward attitude."
- The registered manager had worked hard to implement changes into the service to improve safety and quality following their last inspection. For example, they had introduced root cause analysis training. They were open and honest about some of the challenges they faced within the service and how they were going to manage these.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The registered manager carried out spot checks on staff and regular supervisions and appraisals. Staff confirmed this and we saw evidence of this in records we checked.
- We saw that regular checks and reviews on the service took place to ensure the service people received was of the highest quality.
- The registered manager understood their legal requirements within the law to notify us of all incidents of concern, death and safeguarding alerts.
- It is a legal requirement that the overall rating from our last inspection is displayed within the service and on the provider's website. We saw that the rating was displayed. This meant people, relatives and visitors were kept informed of the rating we had given.

Engaging and involving people using the service, the public and staff

- People were offered the chance to sit in on interviews for any new staff member and had written their own questions. All people were introduced to potential new members of staff before interview to enable them to have a say on who supported them.
- Feedback questionnaires were used to gather information about people's views.
- Staff were aware of the accessible information standard and we saw that information for people was produced in an easy read format.

- The registered manager completed regular audits as a way of improving the service by the monitoring of trends and using the information gathered to benefit how people were supported.

#### Continuous learning and improving care

- The registered manager had a development plan in place to further improve the quality of the service for people who lived there.
- The registered manager organised ongoing training for both management and staff to continuously develop their knowledge in order to support people appropriately.

#### Working in partnership with others

- The provider worked in partnership with hospital consultants, social workers, health professionals and relatives to ensure the service people received was person centred. This was corroborated by relatives and health professionals we spoke with.