

The White House (Curdridge) Limited The White House (Curdridge) Limited

Inspection report

Vicarage Lane Curdridge Southampton Hampshire SO32 2DP

Tel: 01489786633 Website: www.whitehouseresidentialhome.co.uk

Ratings

Overall rating for this service

Date of inspection visit: 25 February 2020 26 February 2020

Date of publication: 04 May 2020

Outstanding 🕁

Is the service safe?	Good •
Is the service effective?	Outstanding 🖒
Is the service caring?	Outstanding 🖒
Is the service responsive?	Good •
Is the service well-led?	Good •

Summary of findings

Overall summary

About the service

The White House is a family owned, specialist dementia care home and provides accommodation with personal care for up to 46 people. The service supports both younger and older people living with dementia and other mental health conditions. There were 45 people using the service when we inspected.

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

The White House provided outstanding care for people living with dementia and other mental health disorders. We received consistently positive feedback from people, their relatives and health professionals who felt staff went the extra mile and delivered excellent care that was responsive and based around people's individual needs. Staff working at The White House understood the needs of people using the service and supported people in an exceptionally personalised way. The impact this had on people was outstanding and had resulted in people continuing to live an active life with choice evident throughout.

Staff had developed positive and caring relationships with people and their families. Staff were highly motivated and demonstrated a commitment to providing the best quality care to people in a compassionate way. People's privacy and dignity was always maintained.

The home provided a well-designed environment for people living with dementia, which enhanced their wellbeing, quality of life and independence. We received outstanding feedback about the gardens and building which people were able to move freely and without any restrictions.

People were happy with the activities on offer and many opportunities were available for people to participate in. This ensured people had a meaningful life and created a relaxing and calm atmosphere around the home.

People were supported to stay safe, protected from abuse and risks were assessed and well managed. There were sufficient numbers of qualified, skilled and experienced staff deployed to meet people's needs. Staff were not hurried or rushed and when people requested care or support, this was delivered quickly. The provider operated safe and effective recruitment procedures. Medicines were stored and administered safely. Clear and accurate medicines records were maintained.

People, relatives and professionals consistently told us about the excellent care they received from well trained staff who demonstrated the knowledge and skills required to deliver outstanding care. Staff informed us they completed a wide range of training and felt it supported them in their job role. New staff completed an induction programme before being permitted to work unsupervised.

There was a strong emphasis on the importance of eating and drinking well. Mealtimes were encouraged to be a positive and sociable experience for people. People were supported with their nutritional needs in a flexible manner. People received varied meals including a choice of fresh food and drinks. Staff were aware

of people's likes and dislikes in relation to food and this helped to ensure people received outstanding care.

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 culture of the service was open, transparent and progressive. All the staff were committed to continuous improvement of the service and individual care. People using the service, their relatives and the staff felt valued.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk Rating at last inspection The last rating for this service was outstanding (published 29 July 2017).

Why we inspected This was a planned inspection based on the previous rating.

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 effective? The service was exceptionally effective.	Outstanding 🛱
Details are in our effective findings below.	
Is the service caring?	Outstanding 🟠
The service was exceptionally 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.	



The White House (Curdridge) Limited

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.

Inspection team The inspection was undertaken by one inspector.

Service and service type

The White House (Curdridge) Limited 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 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 inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. 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, five relatives and two friends about their experience of the care provided. We spoke with ten members of staff including the provider, registered manager, care plan manager, unit manager, chef, day centre manager, senior care staff and care staff. We also spoke with two visiting professionals.

We reviewed a range of records. This included four people's care records and multiple medicines records. We looked at four 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.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We received feedback from 12 relatives and five professionals who regularly visit the service.

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

- All the people we spoke with, told us the service provided safe care. One relative told us, "Feel safe here absolutely." Another relative said, "Feel she is safe here and well cared for."
- People were kept safe as staff had been trained and had the knowledge and confidence to identify safeguarding concerns and acted on these to keep people safe.
- The home had suitable policies in place to protect people; they followed local safeguarding processes and responded appropriately to any allegation of abuse.
- Staff understood and were confident about using whistleblowing procedures. Whistleblowing is where a member of staff can report concerns to a senior manager in the organisation, or directly to external organisations.

Assessing risk, safety monitoring and management

- Individual risk assessments identified potential risks and provided information for staff to help them avoid or reduce the risk of harm to people. These included assessments on the risks of poor nutrition, mobility, personal care and the maintenance of skin integrity. Work was underway to further improve the quality and robustness of some of the risk assessments that were less detailed.
- Risk assessments had been completed for the environment and safety checks were conducted regularly on electrical equipment. Water and fire risk assessments were in place and weekly checks of the fire alarm, fire doors and emergency lighting were carried out. Records showed staff had received fire safety training. Staff were aware of the action to take in the event of a fire and fire safety equipment was maintained appropriately.

Staffing and recruitment

- There were sufficient staff to meet people's care needs. We observed that staff were not rushed and responded promptly and compassionately to people's requests for support. One relative told us, "I do feel enough staff here, in the five years I have visited, only once have I come here and had a problem when I couldn't find staff."
- Staffing levels were determined by the number of people using the service and their needs.
- Staff rotas were planned in advance and reflected the target staffing ratio which we observed during the inspection.

• Recruitment processes were followed that meant staff were checked for suitability before being employed by the service. Staff records included an application form, written references and a check with the Disclosure and Barring Service (DBS). The DBS helps employers make safer recruitment decisions and helps prevent unsuitable people from working with people who use care and support services.

Using medicines safely

- There were appropriate arrangements in place for the recording and administering of prescribed medicines and medicine administration records (MARs) confirmed people had received their medicines as prescribed.
- There were effective processes for ordering stock and checking stock into the home to ensure that medicines provided for people were correct.
- •The home administered medicines that required stricter controls called controlled drugs. In line with current legislation, two staff had signed when these medicines had been given.
- There were up to date policies and procedures in place to support staff and to ensure that medicines were managed in accordance with current regulations and guidance.
- There were effective arrangements and checks in place for the management of topical creams.

Preventing and controlling infection

- Staff followed a daily cleaning schedule and areas of the home was visibly clean. There were no malodours around the home. One relative told us, "The White House never smells as some care homes do. It is always spotlessly clean."
- There was an infection control lead in place who monitored staff and areas of the home by observations and regular checks. There had been no outbreaks of infection in the home.
- Staff had access to personal protective equipment (PPE), such as disposable gloves and aprons.

Learning lessons when things go wrong

• There were processes in place to enable the registered manager to monitor accidents, adverse incidents or near misses. This helped ensure that any themes or trends could be identified and investigated further. It also meant that any potential learning from such incidents could be identified and cascaded to the staff team, resulting in continual improvements in safety.

Is the service effective?

Our findings

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

At the last inspection this key question was rated as outstanding. At this inspection this key question has remained the same. This meant people's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

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

- All the people, relatives and professionals we spoke with, commented on the outstanding environment and how this helped to enhance people's wellbeing, quality of life and independence.
- In line with the National Institute for Health and Care Excellence (NICE) 'quality standard for supporting people to live well with dementia', the environment had been designed and adapted to help people living with dementia manage their surroundings, retain their independence, and reduce feelings of confusion and anxiety.
- From walking around the building and gardens this was clearly evident at all times and even though some people were living with very advanced dementia, due to the layout of the home and the freedom of movement this provided, there was a calm and relaxing atmosphere throughout the home.
- One relative told us, "Like the freedom here that they can move all around the home." Another relative said, "The inside spaces are creatively designed, and we just love the freedom of movement that all residents can enjoy." One relative told us how staff went the extra mile to "Maintain the environment as normal as is practicable and no one can fail to be impressed by the mini zoo in the garden."
- The service had won awards in the past for being a pet friendly home and the positive impact this had on people's wellbeing. The main rear garden provided a secure and tranquil area with a walkway encircling an enclosure with an ornamental duck pond with swans, a large aviary with exotic birds, goats and wallabies. One relative told us, "We (that is the immediate family plus extended family and friends) have all been terribly impressed by the environment my father now calls home. His grandchildren enjoy their visits: the outside space with the 'mini- zoo' is a great sharing experience for all, whatever the weather." Another relative said, "She loves the animals can just walk around. She would worry about the animals being fed so staff took her out to help feed the animals. Loves nature and animals she was asked when she came here if she wanted a cat lovely that you are asked if you want animals. She didn't want a cat, but she often asks the lady who looks after the cats [person's name] if the cats are okay and enjoys seeing them around the home and loves seeing them just a lovely environment."
- Relatives spoke about how the welcome given to people's pets had been an important part of their family member settling in the home. One relative told us, "To begin with Mum was slightly unsettled, apparently this is quite normal, but thankfully The White House also welcomed her precious cat Nelson! This definitely helped her to settle in and he is also happy and remains a comfort to her!" Another relative said, "My Mum an outdoor lover throughout her life was always trying to get outside climb walls and open fire doors in the care home near us (previously before moving to the White House). The White House who were prepared to take my Mum with her constant companion, her dog, and access of the extensive gardens. Change is never easy at this age and Dementia and my Mums behaviour wasn't the easiest. But with great individual

patience and reassurance the carers helped my Mum adjust to her new surroundings."

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

• Relatives and professionals described the healthcare support provided as exceptional and distinctive.

• Staff worked in a collaborative way with a range of other professionals to help ensure that people received effective care and experienced the best possible health outcomes. One professional told us, "I have been visiting the White House for around five years now and I know that [GP name] would echo my thoughts that I have also found the level of care to be outstanding. The staff know the residents incredibly well which is very helpful when something changes, and we are trying to establish what the cause is. They can have very challenging behaviours to manage and their first approach is always behavioural and adaptation of their approach rather than relying on medication."

• Relatives were also full of praise regarding people's healthcare needs and support. One relative told us, "As my father's needs have gradually changed, staff at a more senior level have done a sterling job in seeking medical advice from the GP and his medication is both effective and low-dosage as appropriate." Another relative said, "She was aggressive in the other home, they kept calling me to calm her down. Doesn't happen here and look after me as well and I come every day. When I come here have a cup of tea waiting for me."

• Where people had complex needs, staff had worked hard to implement effective links with health and social care services to promote people's wellbeing. On the first day of our inspection a clinical meeting was taking place between various health care professionals to ensure people were receiving the best treatment and support for their care needs. A professional told us, "This is extremely helpful to discuss any residents on stronger medications or with more challenging behaviours." Another professional attending the meeting told us, "We have started regular reviews which has been really positive and have not had to admit people into hospital. Have to review medicines better and keep an eye on people. We have learnt a lot from the GP, and we all work together."

Staff support: induction, training, skills and experience

• Staff had access to a range of training to develop their skills and knowledge which was delivered and tailored to the individual needs of people using the service. This had positive outcomes for people. A relative confirmed this saying, "In the past, other care homes have failed to have the skills to support my mother. The White House however continues to make my mother's life enjoyable and rewarding. She has dignity, stimulation and her needs are met. It strikes me that there must be more staff per patient at The White House because mum is always receiving personal contact and assistance. It could however be that the staff are better trained or managed or better motivated. In any event, mum needs this personal contact because it serves to make her more content, stimulated, and happy. As a result of the care she receives at The White House, mum is more easily managed despite her, at times, challenging behaviour."

• A staff member told us, "Moving and handling training is personalised to our residents. I have completed this at different homes, but I have really learnt here. For example, we have some people that will find it difficult to stand and shown different ways to help them which has been great and good for us but also safer for the people we look after."

Another relative told us, "Staff are professionally trained, and staff stay so that continuity gives stability."
Staff were positive about the training provided. One staff member told us about how training had made an impact on how they had changed their working practices to improve people's outcomes for the better. The staff member had undertaken a virtual dementia experience, which had provided them with the opportunity to experience the world as people living with dementia might. The aim of this is that staff can then change their approach to people's care. They staff member described the experience as "Incredible and eye opening". They told us how all the different noises had affected them and now as some people like to listen to the radio and some the TV will ensure the radio is placed away for the TV so don't have different noises at

the same time. They also told us about the sensory touch and remembering how scary it was not knowing what things they were touching. As a result, they said, "I always tell people now if they go to touch something what it us, so they don't have that feeling of not knowing what it is."

• The mobile virtual dementia tour bus had such an impact on staff and how they improved their practices and gave them greater understanding it was offered to staff annually.

• Arrangements were in place for staff who were new to care to complete the Care Certificate. The Care Certificate is awarded to staff that complete a learning programme designed to enable them to provide safe and compassionate support to people.

• Staff told us they received effective supervision and annual appraisals. Supervisions provide an opportunity for managers to meet with staff, provide feedback on their performance, identify any concerns, offer support, assurances and learning opportunities to help them develop.

• Staff told us they felt extremely supported and didn't have to wait for arranged supervisions but could arrange a one to one meeting at any time. For example, one staff member told us how due to personal circumstances they had to take some time off work and told us their line manager and registered manager were so supportive. They told us, "They have been incredible really amazing."

• The management team understood the importance of constructive engagement with staff. For example, staff had suggested that training be made available at weekends and evenings. This had been actioned and as a result attendance at training had improved.

Supporting people to eat and drink enough to maintain a balanced diet

• There was a strong emphasis on the importance of eating and drinking well. People and their relatives were very positive about the quality and choice of meals. A relative told us, "We have only ever smelt a delicious cooked lunch!!" Another relative said, "The staff on the Bishop Walton unit are fantastic. I meet the same staff when I visit and am confident, they have my mums' best interest at heart. Recently she wasn't eating or drinking well, and they worked very hard to ensure she was fed and hydrated. They provided a super 90th party for the family."

• People were involved in making cakes and pastries for others to enjoy eating at supper time. We spoke with one person who regularly attended the day centre attached to the service and makes cakes and pastries for the whole of the house to enjoy.

• We spoke with the chef who was passionate about their role. They told us about special dinning evenings that had been started. These involved monthly themed nights in the on-site pub where people could invite their families to share a meal with them creating a restaurant atmosphere. The next planned event was a French evening.

• We spoke with a relative who had been invited to the Italian evening and how they enjoyed the experience and said, "It was like dad was entertaining."

• Staff made mealtimes a positive and sociable experience for people. There was a relaxed atmosphere in the dining room, the meal was unhurried. The lunchtime menu contained two choices for mains followed by a dessert selection. Drinks were served throughout lunch including wine or beer and staff were always on hand. If people did not like what was on the menu an alternative was made available to them and staff were aware of peoples likes and dislikes.

• Care plans detailed the support people required from staff at mealtimes and we observed staff assisting people to eat appropriately.

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

• When people moved to the home, they and their families, where appropriate, were involved in assessing, planning and agreeing the care and support they received.

• The care plans seen were holistic, detailed in most areas and described people's needs in a range of areas

including personal care, and daily living activities.

• Support plans were in place for people's oral care in line with best practice guidance.

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 can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- A professional told us, "Staff always act in residents best interests and this is demonstrated in frequent discussions of ceilings of care as you might imagine this discussion is a fairly frequent one."
- We observed staff seeking consent from people before providing care and support. Staff showed an understanding of the MCA. They were aware people were able to change their minds about care and had the right to refuse care at any point.

• Some DoLS authorisations had been made and others were awaiting assessment by the local authority. The registered manager had a system to ensure that DoLS were reapplied for when required and that any conditions were complied with.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as outstanding. At this inspection this key question has remained the same. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity

- All the people and relatives, we spoke with, told us staff were extremely caring and treated people with compassion and respect. A relative told us, "There is a very strong sense of my father being amongst friends and 'new family': most residents know him by name, and he is very comfortable in their company". A professional said, "I get the sense that all staff are genuinely invested and loving toward the residents, there is excellent team morale and staff retention is very high. There are many practical reasons why the home is Outstanding, from the food, cleanliness, staff and grounds but what really stands out for me is the genuine love and friendship I see and feel within the home between staff, residents and management."
- Another relative said, "Everyone is caring no two ways about it and [person's name] gets on with them all, laughs with them and they encourage it that is nice to see."
- There was a strong, person-centred culture within the home. One relative told us, "I am very grateful my Mum is at the Whitehouse they know how to look after my Mum, and I think she is achieving her best potential and as settled as could be. I think the care would fall into the outstanding category."
- All the staff spoke passionately about how The White House was people's home and not just their workplace. One staff member told us, "I have worked in other care homes but what is different here, is it is completely the resident's home. It's changed my perspective about care homes, completely different to working in other care homes can't praise it enough and how it really is their home."
- Staff worked hard to get to know each person as an individual and the things that mattered to them most. For example, staff told us about how one person loved to feed the animals with staff every day and how they ensured that another person who used to enjoy seeing the outdoor animals, but could no longer do this, was supported to have a cat sat on their lap. One staff member told us, "I very much enjoy my job. I have always felt it is a family (residents, their families and staff). We have seen tears and happiness. We have shared in each other's successes and supported each other when life is not so great. Seeing a resident contented and happy and seeing them achieve a "task" be that dressing themselves, or getting an answer right on a quiz, gives me a job satisfaction that I could not put into words."
- We visited one person in their room which was very personalised and inviting. They told us how staff had supported them to choose a kitten in their first week in the home. When we met the person, they had the cat with them, and it was clear that this gave them great enjoyment.
- Special days were held on each unit where a person living at the home had an outing, activity, or meal arranged just for them every eight weeks, where they could choose what they wanted to do. One relative told us, "Special days ask what they would like to do and [key worker's name] asked what he would like, and he just wanted to go walking and out and about which they did walking. Staff make it easy and have the right balance to leave on his own when needs to which shows dignity Really good recommend it."

• We spoke with one staff member who told us how it was important to know about peoples likes so they could plan special days when they could no longer communicate. They said, "For one person they are now completely immobile and can no longer talk to us. Because I know that they love chocolate and what smells and touch they like. I will visit them and bring chocolate and the smells they like and involve sensory with soft toys." They also told us, for another person they use to enjoy going to the pub. So, when their special days are planned, they take them to the pub so they can continue to enjoy their preferred activity.

- We observed that there was frequent laughter between staff and people. It was clear that all staff made a huge effort to make sure people had a fulfilling day. This was no matter what the staff member's role was. They all understood how their role contributed to people's care and wellbeing.
- All the interactions we observed between people and staff were positive and friendly. Staff communication with people was warm and friendly, showing a caring attitude.
- Staff demonstrated a good understanding of equality and diversity and respected people's differences. Staff valued people's beliefs, life choices and cultural needs.

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

- People and their relatives, where appropriate, were involved in developing all parts of their care plan. These records included information about their personal circumstances and how they wished to be supported. This information helped to ensure that people received care in the way in which they wanted. Relatives told us staff were aware of their family member's likes and dislikes and knew people well. One relative said, "I can see the things she likes are there for example, the DVD she likes which is good. In dad's care home didn't happen the level of care in not the same this is well above. Mum likes the animals someone will bring in a hamster for example and they will pet her and will get comfort from it and stroke it."
- Daily records of care were up to date and showed care was being provided in accordance with their wishes and choices. Reviews had focused on their individual needs.
- The involvement of advocates was welcomed within the service. A professional told us, "In my case the home has always wanted the aid of advocacy and will ask appropriate questions to ensure that a client is either signposted or receives the relevant advocacy input."
- People told us there were no restrictions to visiting and relatives said that they were made to feel very welcome. One relative said, "Look after me as well and I come every day. When I come here have a cup of tea waiting for me." Another relative said, "As a relative I am made to feel welcome and if I ring, I always get someone who knows my Mum and can tell me how she is."
- Staff had built up positive relationships with people. Staff spoke about their work with passion and spoke about people warmly. One staff member told us, "I very much enjoy my job. I have always felt it is a family (residents, their families and staff). We have seen tears and happiness. We have shared in each other's successes and supported each other when life is not so great. Seeing a resident contented and happy and seeing them achieve a "task" be that dressing themselves, or getting an answer right on a quiz, gives me a job satisfaction that I could not put into words."

Respecting and promoting people's privacy, dignity and independence

• Staff understood the importance of respecting people's privacy and dignity, particularly when supporting them with personal care. A professional told us, "The ethos is one of care, respect and professionalism and resident's dignity is always upheld despite the very advanced dementia that they may be experiencing. This ethos, I believe, is generated from the top by [providers name] and her managerial staff and cascaded down most effectively. There is also no limit to what the staff will try to do to make a resident comfortable, whether that be going somewhere with them or purchasing something that they need, they always go above and beyond the necessities of care in my opinion. If I myself or a relative was unfortunate enough to have

dementia or a severe mental health condition necessitating care, I would absolutely choose the White House for a placement."

• Staff were observed to knock on people's doors and identify themselves before entering. Staff ensured doors were closed and people were covered when they were delivering personal care. One staff member told us, "Our residents' choice is always at the forefront of our minds when delivering care and the white house states that we should treat our residents as we would like to be treated. We also encourage to allow the resident to do what they can for themselves in order they remain as independent as possible, which then leads to good self-esteem."

• People were encouraged to be independent as possible. Care staff knew the level of support each person needed and what aspects of their care they could complete themselves. One relative told us, "Really manage it well as everyone has different types of dementia. The routines are going well and got him back to being independent with personal care, he just needs a nudge now."

• Another relative told us, "Definitely treated with dignity and respect 100%." Another relative said, "The staff are good none of the staff I don't like. Been to three or four places and this is certainty the best and they respect them here and treat as people."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as outstanding. At this inspection this key question has deteriorated to good.

This meant people's needs were met through good organisation and delivery.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; Supporting people to develop and maintain relationships to avoid social isolation; • Staff were focussed on providing excellent person-centred care. Feedback clearly showed that staff understood the needs of each person and worked hard to deliver care and support in a way that met these. One relative told us, "The sense of being at my Dad's new home is further solidified by the wonderful family events that we have attended: notably the most delicious summer barbecue and a wonderful Xmas fayre. This, ultimately, is the result of the most excellent staff that The White House have recruited. I have the utmost respect for any care worker but the staff in this setting are just superb. They immediately know who we are visiting and are always welcoming (even if Dad is still in bed and not keen to get up!). My mother has found all staff extremely approachable and honest, considering many as personal friends. My father has had episodes of aggressive behaviour towards staff when administering personal care, yet the staff are so professional they are able to distinguish such outbursts as symptoms of the disease. I have never failed to be impressed as to how kind, humorous and forgiving the staff are. In conclusion, we are all delighted by the care The White House provides. I would be most surprised if they did not achieve an 'outstanding' grading once again - a family-run caring environment that all who enter the doors feel immediately."

Support to follow interests and to take part in activities that are socially and culturally relevant to them

• Arrangements for activities met people's needs and helped them to live as full a life as possible. The service recognised and responded to people's needs for social interaction and mental stimulation and many person-centred activities took place daily.

• Professionals we spoke with felt the service provided high quality care. One professional told us, "When I visit, there is always 'stuff' going on with the residents be it a jigsaw, crafts or just looking at a magazine together."

• The service recognised and responded to people's needs for social interaction and mental stimulation and many person-centred activities took place daily. There was a well-equipped day centre attached to the service that people could visit at any time as well as activities taking place around the home.

• The service arranged a wealth of activities for people to choose from. These ranged from the attached day centre people could attend, activities planned in the home, outside entertainers visiting outside trips in the community and staff providing individual actives. This made the service extremely person centred to people needs.

• A comprehensive activities plan was displayed around the home showing up to five activities planned for each day including weekends. A relative told us, "Been encouraged to do quite a bit singing and activities

and eat together which is nice really cheerful".

• A range of external entertainers visited the service in the morning as staff had found this was when they were best attended. We spoke with an external professional who took exercises classes. They told us, "Each week the residents seem happy and supported by staff. There is usually excellent communication and teamwork between support staff to ensure residents are safe and have the opportunity to take part in my activities each week, including those who are not physically able, but can watch and listen to the music. Staff usually join in and encourage residents to participate in my classes, often singing and dancing to the music as well as joining in with the exercises creating a nice relaxed and fun environment for all!"

• We spoke with the day centre manager who was passionate about their role. They told us, "Residents can access the day centre. They can come to us from 10.00 when the doors open. Can wander in and out. We get more visitors when baking as they can smell the baking."

• Activities also took place in the community. One relative told us, "Gone out a couple of times on the mini bus as go twice a week, been to an expedition and gone to the pub for lunch." Another relative said, "This is certainly is the place here. Staff go above and beyond here and can take them out. Treated as people and not just someone that sits in the chair." On the first day of our inspection people had gone to the local cinema which held monthly accessible cinema showings with better lighting for example, which people had enjoyed. Another relative said, "Enough to do, [person's name] loves to do dancing and they have a machine that lights the floor up. Loves music. Every day something going on, today they were playing skittles. Likes singing always plenty of that going on."

• As well as the activities on offer the service had introduced 'down time'. This happened twice a day and staff where staff spent time talking to people for a period of time. This means that for people that didn't want to get involved in activities they all had access to some special time together to chat and socialise with staff to avoid isolation.

• During the inspection we observed an art class taking place. The staff member told us they had been running the class for nine years and really enjoyed sitting with the residents each week and described it as, "their and mine time". People were enjoying different art activities during the class and were able to complete to their own abilities which made it really person centred.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

• We spoke to the registered manager about how they ensured information was accessible for all people using the service. They told us, about different communication styles in place to support people. People had communication care plans in place which detailed people's communication needs and how staff supported them with their needs.

End of life care and support

- At the time of our inspection the service was not supporting anyone on palliative care or end of life care. The service worked alongside health professionals when they needed to provide palliative care and followed their advice.
- The Service had supported staff members to undertake the 'Six Steps to Success End of Life Care Programme' at a local hospice. The programme was in line with current good practice. This had enabled not only excellent end of life care for people but supported people and their relatives in preparing for end of life by considering their needs and wishes in advance.
- The provider had converted a building in the grounds into a place to stay for relatives so that they were able to be with their family member in their final moments.

Improving care quality in response to complaints or concerns

- The home had a complaints procedure which was on display in the reception area. People told us they had no concerns and we saw lots of written compliments about the service.
- People told us they would speak with the registered manager or staff if they had any complaints. The home had not received any formal complaints. Any minor issues raised were discussed and addressed at the time which meant they had not escalated to a formal complaint.

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 good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; 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 leadership team were passionate about providing a service where people received person centred care, and this was achieving good outcomes for people. People and their relatives all felt the service was well led. One relative told us, "I have been in many care homes the White House is quite simply the best I have experienced, in infrastructure, staff, values and processes. I believe I have seen little turnover in their carers and frequently see their carers go the extra mile in getting a resident to eat drink or understand their individual risks and mitigate these. Management clearly have a grip as the estate is always being maintained and improved and I see proper processes re management of medicines, the house is always clean and presentable, and there are activities to stimulate different tastes and mental capacities."
- Another relative expressed, "My mother has found the care offered by the home to be exceptional and a great comfort when making the very difficult decision to commit him to permanent residential care. Please tell The White House staff to keep up their outstanding work."
- A professional told us, "Always someone here from management team to ensure things aren't missed. We really think it's definitely worth a look and always say this to people."
- There was an open and transparent culture in the service. The provider notified the Care Quality Commission of all significant events and was aware of their responsibilities in line with the requirements of the provider's registration. The previous inspection report was clearly displayed. Staff were supported and encouraged to raise incidents.
- The provider had appropriate polices in place as well as a policy on Duty of Candour to ensure staff acted in an open and transparent way in relation to care and treatment should people came to harm.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- There was a stable and consistent staff team who were skilled and motivated. They were clear about their own specific roles and how they contributed to the overall success of the service.
- The registered manager and her management team used a series of audits to monitor the service. These included audits of medicines, care plans, infection control, health and safety, falls and daily walks around the home.
- Governance meetings were held with senior staff to ensure the service was meeting the regulations and any improvements required were incorporated into an action plan and reviewed regularly.

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

People and their relatives told us that the leadership team were accessible and responsive in their communication. One person told us, "Management say they will always see anyone with a problem I can vouch for that and they will listen." One relative told us, "Management approachable if I see in the corridor and smiles and if I email and comes back to me. Always very good." Another relative said, "Management really friendly and easy to deal with. Made really slick to get him here as out of hospital, really open. Very fond of the residents you see that all the time as well as the management quite visible. [unit managers name] did assessment in hospital so know him and collected home from hospital."

• Meetings were held with people and their relatives to ensure everyone was kept informed about what was happening in the service and to ask for their views and suggestions. One person told us, "I help to run one of the resident's association meeting. [person's name] is the chair and I read the minutes and join in the discussion. I feel listened to thing is to get as many residents involved as possible. Something we brought up 2-3 weeks ago the road outside where it joins Botley a black spot and have taken it up with the council and they are thinking about putting a roundabout in just waiting to hear."

• A relative told us, "We are invited to join in regularly with events or meetings at the home and as her children helps us to still feel involved with Mum as much as possible." Another relative said, "I've just had my second newsletter which I share with family really important for keeping in touch. Family and friends all pop in regularly, always welcoming."

• Staff were positive about the support they received from the registered manager and management within the service. One staff member told us, "Feel completely supported in my role." Another staff member said, "I feel extremely supported in my role although having worked in care for a while, I had no previous manager experience when I was offered this role. The support was there from the beginning."

• Staff meetings were carried out regularly and minutes showed these had been used to reinforce the values, vision and purpose of the service. Concerns from staff were followed up quickly. Staff were involved in the running of the service and were asked for ideas.

• People were part of the local community. People were supported to go out into the community as much as possible. For example, walks to the local pub and village. One person told us how they visited a local school to go swimming.

• The service worked in close partnership with health and support services.