

Woodcrofts Residential Homes Limited

Woodcrofts Residential Home

Inspection report

164 Warrington Road
Widnes
Cheshire
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Tel: 01514245347

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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

Woodcrofts is a residential care home providing personal and nursing care to 15 people at the time of the inspection. The service can support up to 19 people. The home accommodates 19 people in one adapted building which was originally four separate houses and specialises in providing accommodation and support for people with mental health needs. There are 19 single bedrooms, with shared bathrooms and three communal lounges. The home is situated close to local amenities such as bus routes and shops.

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

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.

People received support from staff who had received appropriate training and support to enable them to carry out their role safely, including the management of medicines. There were enough staff to support people when they needed it. Staff knew people's identified risks well and were able to support people.

Staff were committed to delivering care in a person-centred way based on people's preferences and wishes. There was a stable staff team who were knowledgeable about the people living at the service and had built trusting and meaningful relationships with them.

People were protected from abuse and the risk of abuse and staff understood their role in relation to this. People and their family members told us that the service was safe. Risks to people and others were identified and measures put in place to minimise harm.

People's care was individualised and focused on promoting their independence as well as their physical and mental well-being. Staff encouraged people to eat a well-balanced diet and make healthy eating choices.

People were supported to access healthcare services, staff recognised changes in people's health, and sought professional advice appropriately.

There was a clearly defined management structure and regular oversight and input from the registered manager who was also the provider. Staff were positive about the management of the service and told us the registered manager was very supportive and approachable. Any concerns or worries were listened to, addressed and used as opportunities to make continuous improvements to the service.

Systems for assessing and monitoring the quality and safety of the service were effective in identifying areas of improvement within the service. Systems were in place to gather people's views on the service.

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 Good (published 27 March 2018).

Why we inspected

The inspection was prompted due to concerns received about infection control. A decision was made for us to inspect and examine those risks.

We found 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 Woodcrofts on our website at 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 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.

Woodcrofts Residential Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection team consisted of an Inspector, an Assistant Inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Woodcrofts 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 sought feedback from the local authority and professionals who work with the service. We reviewed reports written following visits to the home by Healthwatch, Environmental Health and the Food Hygiene Agency. Healthwatch is an

independent consumer champion that gathers and represents the views of the public about health and social care services in England. We used all of this information to plan our inspection.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make.

During the inspection

We spoke with nine people who used the service and two visitors about their experience of the care provided. We spoke with three members of staff including the provider who was also the registered manager and a senior care worker.

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

Preventing and controlling infection

- Arrangements were in place for making sure that premises were kept clean and hygienic so that people were protected from infections.
- Staff used personal protective equipment (PPE) such as disposable aprons and gloves.
- A cleaning schedule was used to help ensure the home was cleaned regularly. This included thorough "deep cleans" of bedrooms and communal areas.
- We found the home to be clean and tidy throughout.

Systems and processes to safeguard people from the risk of abuse

- Systems and processes were in place to safeguard people from the risk of abuse.
- Staff received safeguarding training and had access to relevant information and guidance about how to protect people from harm.
- Staff were confident about how to report safeguarding concerns.

Assessing risk, safety monitoring and management

- Individual risks to people were assessed; risk assessments provided detailed information around people's individual risks and included guidance for staff to keep them safe.
- The environment was well maintained. Equipment and utilities were regularly checked to ensure they were safe to use. People had individual emergency evacuation plans in place.

Staffing and recruitment

- There were sufficient numbers of staff employed and on duty to meet people's assessed needs.
- Additional hours were covered by existing staff that people knew and trusted. This was to support appointments or staff absences.
- Staff had been recruited safely. No new staff had been employed since the last inspection.

Using medicines safely

- People received their medicines safely and on time. Staff received training in medicines management and had regular competency checks to ensure ongoing safe practice.
- There were suitable arrangements for ordering, receiving, storing and disposal of medicines.
- The registered manager completed monthly audits of medicines to ensure policies and procedures were followed and any errors or concerns were identified.

Learning lessons when things go wrong

- Staff knew how to report accidents and incidents.
- Accidents and incidents were recorded and analysed so any trends or patterns could be highlighted.
- When accidents and incidents occurred, these were discussed at staff meetings or handover meetings.

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 Good. At this inspection this key question has remained the same. This meant 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

- People's individual needs were assessed before they moved into Woodcrofts, this helped to ensure their needs were understood and could be met.
- Assessments of people's care and support needs were completed in detail and provided guidance for staff to support people based on their needs and choices.
- Staff knew people well and how to best meet their needs.

Staff support: induction, training, skills and experience

- Staff received a good range of support including regular training. Staff told us training was appropriate and gave them the skills to meet people's needs.
- Training records showed staff training was kept up-to-date.
- Staff received regular supervision and appraisal to support their developmental needs.

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

- People were supported to eat a varied and nutritious diet based on their individual preferences.
- When someone said they didn't want the offered meal, they were asked what they would like and it was provided.
- Staff assessed people's nutritional needs and any risks related to their eating and drinking. People's weight was monitored.
- People told us they enjoyed the food and could have drinks and snacks throughout the day.

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

- Staff had good relationships with health and social care professionals who had contact with the service. The registered manager emphasised to us the importance of developing positive relationships to maximise the benefits for people using the service.
- Staff promoted good oral health care; toothbrushes were provided regularly, and people were encouraged to use them. Some staff had attended training provided by the local authority.
- Staff supported people to see their GP, district nurses, and attend other health appointments regularly.
- If people found attending healthcare appointments difficult, because it might cause them to become anxious the registered manager told us he attended the appointments with the person to ensure the best outcome was achieved.

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

- The premises were suitable for people's needs and provided people with choices about where they could spend their time.
- People had access to a large outdoor enclosed paved area at the rear of the building.
- There were several communal areas for people who wished to have some space and quiet time.
- People's bedrooms were personalised with items they had bought and pictures.
- A person told us, "My bedroom very nice, very spacious, I am happy with it."

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.

- No-one living at the service needed or was subject to a DoLS authorisation.
- Staff obtained consent for people's support.

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 Good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- Staff treated people with kindness and compassion. There was a stable staff team who knew people well and what mattered to them. Positive and caring relationships had been developed between people and staff.
- There was a very caring and friendly atmosphere in the home between staff and people using the service. Staff clearly knew people very well and were able to tell us about individuals and their lives and families. This enabled them to engage well with people, and we observed them chatting, which increased people's sense of well-being.
- People told us they had felt they were treated fairly and were free from discrimination.
- A person said they were happy with the support they received. They told us, "The only thing I ask for is the newspaper, it is hard to say what they don't do well; staff respect me and give their maximum assistance".
- We observed the home had scored consistently highly in feedback surveys completed by people and their relatives, including feedback left on independent websites.

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

- People told us they were able to choose how and where they spent their day.
- People's comments included, "I go to bed whenever I want" and "I go out whenever I want to".

Respecting and promoting people's privacy, dignity and independence

- People were encouraged to be as independent as possible.
- Information related to people who used the service was stored securely and treated in line with data protection laws.

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 Good. At this inspection this key question has remained the same. 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

- Care plans were personalised for each person and recorded details about their specific needs and wishes. These were reviewed regularly or if people's needs changed to help ensure they remained up to date and accurate.
- 'This is Me' documents within people's care records provided information about their life history, cultural and spiritual needs and activities they enjoyed.
- A person told us, "Staff know what I like and what I don't like."
- Daily notes were kept and these detailed what people had done during the day and information about their physical and emotional well-being. This information was used to handover to staff when shifts changed.
- People told us they planned their own day. A person said, "I go to bed whenever I want"; another said, "I wake up 7am every morning, I am happy with it; we are well looked after."

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.

- Care plans contained information about the support people might need to access and understand information. This included how staff should communicate with people to enable people to achieve effective communication.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People accessed a wide selection of activities in the local community and had access to work opportunities.
- People were encouraged and supported to maintain relationships with people that mattered to them.

Improving care quality in response to complaints or concerns

- There was a complaints policy in place which outlined how complaints would be responded to and the time scales. The complaints process was available in an easy read version for people to access.
- People told us they knew how to make a complaint. Their comments included, "I will complain to staff if there is an issue, but I have never made any complaint. I am happy", "If staff can't sort it out, they get it to the manager, if the manager can't then they go to doctor" and "I am happy with the care and do not want

anything to be changed".

- A visitor told us, "My friend has never complained to me about their care, that is good enough. I feel like coming to live here myself."
- Residents' meetings were held to enable people to raise issues and contribute to the running of the service.

End of life care and support

- No-one was being supported at the end of their life, at the time of inspection.
- Staff would assess people who were nearing the end of the life to ensure they would be able to meet their needs at Woodcrofts.
- Some information had been recorded regarding people's preferences for funeral arrangements. This work was ongoing.

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.

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

- The registered manager and all the staff we spoke with, demonstrated a commitment to provide person-centred, high-quality care. They placed people using the service at the centre of everything they did.
- People gave very positive feedback about the staff and registered manager.
- Staff were positive about the management of the service. Staff told us the registered manager and deputy manager were very approachable and supportive.

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 service was well led by a registered manager and team of support staff. They understood their role and what was required to ensure the service provided good support to people.

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

- The service was well led by an experienced registered manager and a supporting management team. Staff were clear about their responsibilities and the leadership structure.
- The registered manager was clear about his responsibilities for reporting to the CQC and the regulatory requirements. Risks were clearly identified and escalated where necessary.
- Staff received supervision and support from senior staff to develop their practice.
- The management team completed a number of quality audits on a monthly basis and we saw that actions were identified and addressed to bring about improvements.

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

- The registered manager engaged and involved people using the service.
- People were integrated into their community. Staff encouraged them to access local services including local church activities, local shops, cafes, pubs and leisure centres.
- Staff were engaged and involved through regular team meetings.
- People and relatives were asked for their views of the service through questionnaires. All feedback received was positive.
- Meetings for people using the service were held monthly. A person told us, "We are all invited to resident's

meetings; it is up to you if you want to be involved, that is what the meeting is for, about your view."

Continuous learning and improving care

- The registered manager worked with the staff team to make and sustain improvements. This included ensuring people who use the service lived as full a life as possible and achieve the best possible outcomes that included control, choice and independence.
 - The registered manager kept up to date with developments in practice through working with local health and social care professionals.
 - Woodcrofts' policies and procedures were designed to support staff in their practice.
- The registered manager and staff received regular training and support for their role to ensure their practice was up to date and safe.
- Staff meetings and daily handover meetings were opportunities to discuss any incidents or ways to improve the support people received.

Working in partnership with others

- The service involved people in discussions about the support provided.
- The service worked closely with other agencies to achieve good outcomes for people. This included consulting health care professionals.