

Vivre Care Ltd

# Stockwood House

## Inspection report

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### Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Outstanding 

Is the service caring?

Good 

Is the service responsive?

Outstanding 

Is the service well-led?

Good 

# Summary of findings

## Overall summary

About the service:

Stockwood House is a care home which provides care and support for up to six people with eating disorders. The service is one of a few specialist care homes of its kind across the country. At the time of the inspection, the service was supporting five people. Three people were present on the day of the inspection and two were away on planned leave.

People's experience of using this service:

We received extremely positive feedback about the service and the care people received. People and professionals commented positively about the effectiveness and responsiveness of the support people received. There was evidence people achieved good care outcomes and their comments about the service supported this. People and professionals' comments about the service were beautifully summarised in an email to the provider by a professional. They said, "I just wanted to let you know that I just had the most joyful telephone conversation with [person]. I want to thank you for the work that you are doing with [person] and I wanted to let you know that [person] clearly appreciates the opportunity to work towards recovery with you."

The service met the characteristics of Outstanding rating in effective and responsive. Safe, caring and well-led were rated good.

People were protected from harm by staff who were trained to identify and report concerns. People were safe because potential risks to their health and wellbeing had been managed well. There were enough staff to support people safely. People were supported to take their medicines. Lessons were learnt from incidents to prevent recurrence. Staff followed effective processes to prevent the spread of infections.

The provider worked extremely hard to ensure people received effective care to meet their needs. People were supported by very skilled and knowledgeable staff who had completed the provider's mandatory training and additional training in relevant areas. The provider invested in having a highly skilled team, who supported people to meet their holistic needs. Staff practice was supported by good practice guidance and research. People achieved good care outcomes as a result of the support provided by the service.

Staff had respectful, caring and friendly relationships with people they supported. Staff upheld people's dignity and privacy, and they promoted their independence.

People received exceptionally personalised care and support which met their needs, reflected their preferences and promoted their wellbeing. People felt they mattered and the service helped them to overcome their illnesses, as well as, to develop in other areas of their lives too.

There was a positive, open and empowering culture. Staff roles and responsibilities were clear, and staff were supported and encouraged to use creative and individualised methods to support people to achieve

their personal goals. People were very proud of their achievements and were looking forward to a better future. The provider's quality monitoring processes had greatly improved and they now evidenced more what they did to continually improve the service.

Rating at last inspection:

The last rating for this service was good (published 28 February 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.

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?

Outstanding ☆

The service was exceptionally 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?

Outstanding ☆

The service was exceptionally 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.

# Stockwood 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 (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

This inspection was carried out by two inspectors.

#### Service and service type

Stockwood House is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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, who is also the provider. This means that they 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 professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all of this information to plan our inspection.

#### During the inspection

We spoke with two people who used the service about their experience of the care and support provided by

staff. We spoke with four staff including the registered manager, who is also the provider, two senior staff and one care staff.

We reviewed a range of records. This included three people's care records and three medicine records. We looked at a variety of records relating to the management of the service, including policies and procedures, audits and surveys.

After the inspection

We continued to seek clarification from the provider to validate evidence we found. We looked at further training data and quality assurance records. We received written feedback from five professionals who worked closely with the service. The provider also sent us feedback they received from a person who had been previously supported by the service and they were very complimentary about how that support helped them to improve their life.

# 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 the question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe living at the service. One person who was new to the area told us, "As soon as I walk through the doors, I feel safe." Another person said, "I always feel safe here."
- Staff had training and a good understanding of how to support people to stay safe. One staff member said, "I have never had any concerns about abuse here."
- Staff had access to a safeguarding policy which detailed actions to take if there were any concerns.

Assessing risk, safety monitoring and management

- People had detailed risk assessments in place which identified risks they could be exposed to and what they and staff needed to do to minimise risks.
- Staff spoke with people about their risk assessments to help them understand them. One person told us, "They will always bend over backwards to help us understand if we cannot do something. Our safety is priority."
- Staff carried out regular health and safety checks to ensure the premises were always safe and there were no hazards to people's health and wellbeing.

Staffing and recruitment

- The staffing levels were based on people's assessed needs and were safe.
- The registered manager had a detailed staff rota in place to ensure enough staff were working each day to meet people's needs.
- People felt there was always enough staff to support them and they benefitted from being supported by a consistent group of staff. One person told us, "Staff always have time for us, which is really nice. The staff are mostly regular as well, which is much better."

Using medicines safely

- The provider had detailed systems in place for monitoring and promoting the safe management of medicines.
- We checked some of the medicines and records, and everything was correct and in order.
- Some people took their own medicines without staff support, while others needed prompting to consistently take their medicines. There were no concerns with how people took their medicines.

Preventing and controlling infection

- The provider had systems to ensure the service was clean and well maintained. People told us they were happy with their living environment and they found it pleasant and comfortable.

- There were systems to prevent the spread of infection including guidance on how to keep different areas of the home clean. Staff had been trained in infection control and where required, they used personal protective equipment such as disposable aprons and gloves to minimise the risk of cross contamination.

#### Learning lessons when things go wrong

- The provider had a system for recording incidents and accidents, and these were reviewed in order to improve practice.
- There was evidence learning from incidents was shared with staff through regular team meetings and during individual staff supervision.
- There was evidence the provider acted quickly to make the required improvements. For example, they had changed how new people to the service got their medicine prescriptions from the local GPs to reduce errors and minimise overstocking of medicines.

# 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 now improved to outstanding. This meant people's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

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

- The service provided specialist support to people with eating disorders to enable them to gain skills necessary for them to overcome their illnesses. The provider had specialist professional skills and knowledge to plan suitable and personalised programmes to help people achieve their goals. The provider described their model of care as 'specialist supportive clinical management', and people received expert support from professionals such as nurses, occupational therapists, dietitians and an art therapist.
- There was a very holistic approach to assessing and planning the support people needed so that they could thrive in their aims to get better and eventually, live independently.
- People were extremely complimentary about the positive outcomes they had already achieved in their short time at the service. They told us their main aim was to never return to hospital care, and that the support at the service had already given them that hope. One person said, "Unfortunately, I've been in and out of hospitals for a number of years. But, I think this is the best in how they tailor the care to the individual."
- Another person said, "This is so different from where I've ever been, in a good way. Staff look at your needs rather than your illness. They look at what you like and what you want to do, and focus more on you and how to move on in the real world. It is shocking how few places there are like here!"
- Written feedback from a person who had been previously supported by the service showed they were extremely appreciative of the support they received. They said, "It feels more apt now than ever for me to truly thank you and all the staff there for giving me the opportunity of a different life. I know I wasn't always the most compliant, and there were a few shaky moments, but without your determination and faith I can't even begin to imagine how my life could have ended up."
- The person was also happy they had achieved their ultimate goal as a result of the support they received. They said, "I was also discharged from [hospital] after a year. It was a mutual agreement and they always said the door was open should I ever want things to be different. I thanked them kindly, knowing full well at that time, there was not a chance in hell I was going to do things differently! Without Stockwood House, without that small start, I don't think I would be here today. That sounds dramatic, but I truly believe it."
- Feedback from professionals was extremely positive about the effectiveness of the care provided by the service. One professional said, "Thanks to [Stockwood House], [people] have a significantly improved quality of life. Outcomes have been measured and show a reduction in the likelihood of subsequent readmissions and, where readmissions have occurred, there had been a reduced length of hospital stay." Another professional said, "The team at Stockwood House have been able to adopt a very positive approach to encourage [person] to consider the rationale for treatment and future benefits. They were very active in encouraging [person] to develop confidence to work towards recovery."

- As part of their research for a poster presentation at an eating disorder conference in 2018, the provider surveyed people they had previously supported. They found six of the eight people surveyed had been successful at living independently and had never been readmitted to hospital. The provider said they had been encouraged by these results and they aimed to continue providing effective care and achieving good care outcomes for everyone they supported.

#### Staff support: induction, training, skills and experience

- Staff had the right skills, experience and knowledge for their roles and received a thorough induction into the service. One staff member told us, "From day one, they gave me induction and trained me. I worked a lot with the senior staff who has given me responsibility for managing medicines. The team have all been so supportive and made me comfortable. They never left me on my own until I felt comfortable and ready to be on my own."
- As well as mandatory training, the provider ensured staff gained additional skills and knowledge to support people to manage their health conditions. They attended relevant conferences and completed additional training. For example, one staff member was doing an accredited counselling course, and five staff members attended a national eating disorders conference in March 2019. Further training was planned for some staff members in September and October 2019.
- Professionals praised the staff's skills and knowledge. One professional said, "Staff at [Stockwood House] are exceptional in how they offer support to [people] who otherwise would have prolonged hospital admission. Although it is not a hospital, the quality of support is of a standard to be expected in a specialist hospital unit."
- Staff felt well supported by the registered manager and other senior staff. They had regular individual supervision, as well as, group supervisions in the form of 'clinical supervision'. This helped them to deal with challenges resulting from people's complex needs, by giving them specific guidance. One staff member said, "My supervisor is very good and has good advice about how to support [people]."

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

- Supporting people to eat well was an important part of their recovery plans, and people were happy with the quality of their meals.
- The provider used their expertise to work with people to devise personalised and nutritionally balanced meal plans. Staff were skilled at supporting people to cook and eat their meals.
- People told us they were involved in planning their meals and had control in deciding what they wanted to eat. One person said, "I'm still able to be quite independent here and I can cook my food."
- People consented to their weight being monitored regularly and they knew their meal plans could be adjusted accordingly if they needed to have more food. They also had psychological support to help them deal with some of the challenges they had around food. People were proud of the progress they had made towards achieving healthy weight ranges.

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

- One professional told us the service worked extremely well with others to ensure people received the support and treatment they required. They said, "It is very unusual and innovative for a residential unit to have regular specialist medical or psychiatric input. This ensures that [people]'s physical state is properly monitored, and medication is appropriate."
- People told us they received timely care and treatment. People were regularly monitored by health professionals including GPs and specialist doctors.
- There was collaborative working with professionals who referred people to the service to ensure people continued to receive appropriate care. People moving to other services or being discharged to live

independently was thoroughly planned and coordinated to give them the best possible chance of succeeding.

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

- People were happy with the quality of the premises. One person said, "The environment is so much friendlier and homely. I do not dread coming back here, which I do feel with the hospitals."
- The environment was planned to maximise people's privacy and independence. People had their own private spaces and the three communal spaces allowed them to choose if they wanted to spend some quiet time on their own.
- All areas of the home were maintained and decorated to a high standard. Equipment and appliances were in good working order, and any required repairs were carried out quickly.

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 we found these were met.

- People had mental capacity to make decisions about their care and support. The service imposed restrictions on people to keep them safe, however this was fully explained to people and the reasons why explored. People gave their consent, and this arrangement was kept under constant review with them. For example, at certain times, people were allowed limited physical activities in order for them not to over exercise, which could lead to them losing weight.
- People said they sometimes found the restrictions challenging, but they appreciated this was done in their best interest. One person said, "It is not that you are not challenged here, but it feels like when you are, it is done with your best interests at heart." One staff member told us, "[People] can struggle with restrictions, but they do understand once you explain it is to make sure they are safe and until they are better. We try to balance allowing them to take control of their lives and helping them to get better."

# 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

- People told us staff were kind and caring. They also said they were treated well and with respect. One person said, "Staff are amazing. They've always got time for you, which is nice."
- People told us staff were friendly and would chat with them all the time. They said they lived well with other people using the service and they had developed good relationships with staff. One person said, "They (staff) are so supportive and I can have a nice conversation with them too."
- One person told us that unlike their experience in hospitals, at the service they felt their individuality and diverse needs were recognised and respected. They said, "I am a lot more settled here than in other places I've been. I 100% feel this is the right place to meet my needs."

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

- People told us they made decisions and choices about their care. Everyone was able to make informed decisions about how they wanted to be supported.
- People understood that some restrictions were a necessary part of their treatment and recovery plans. Unlike their previous experience, they told us they appreciated that staff explained to them when they could not do some things. One person said, "I would like to go horse-riding, but instead of just being told 'no', they explained that it wasn't the right time at the moment. They also took me to see the horses, it's good that they keep your motivation up."
- There was information about an independent advocacy service should people choose to contact them.
- People told us staff always had time to listen to them. One person told us their keyworker spent quite a lot of time with them. They said, "Keyworkers make time for us, mine will take me to the café tomorrow." Staff told us they had regular keyworker meetings with people and they always tried to do these where people would be most relaxed.

Respecting and promoting people's privacy, dignity and independence

- People told us staff were always respectful in the way they supported them. Staff said they promoted people's privacy and dignity at all times by talking to them and providing support in private. Protecting people's confidentiality was an important part of the service and there were policies to guide staff on this.
- People could carry out most activities of daily living without support. They told us they at times, needed prompting from staff when they lacked motivation to look after themselves.
- There were facilities to enable people to cook their meals, clean their bedrooms and the communal areas, and wash their clothes. Staff supported people when necessary.
- The service encouraged people to maintain close links and relationships with their family members and

friends. One person said, "They encourage friends and family to visit if you can't go to them."

## 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 now improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- People were very complimentary about how the service provided exceptionally individualised and responsive care. People felt their diverse needs mattered and the service did not only focus on helping them to overcome their illnesses, but to develop in other areas of their lives too. One person said, "It's definitely individualised care. They make an effort to take the time to help you with things you want to do."
- People described the support provided by the service as giving them help to focus on having a different kind of life. One person who was previously supported by the service beautifully described this in their feedback to the provider. They said, "My world finally feels like it has opened up and I honestly don't know why it took me so long to realise that life is not as scary as I thought it was, and even when it is, I now know that I am strong enough to cope. And that it is okay to ask for help. Thank you for everything [provider], the service you provide is invaluable and I will be forever grateful for all that you and everyone at Stockwood House did for me."
- People said they were fully involved in planning and reviewing their care, and the support provided focused on them taking more responsibility for their own recovery. We saw people had signed their care plans to show that they agreed with what was written. One person told us they could get copies of their care plans if they wanted them. Another person said, "They always keep me in the loop with any developments and updates."
- Another person told us they enjoyed good therapeutic relationships with staff because there were a 'mixed bunch' who brought different skills and personal attributes to the service. They also said, "They mainly have a good balance of being attached and unattached, and knowing when to be involved and speak about our personal lives."

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 were admitted to the service from different areas across the country and they did not always have links in the local community. They relied on staff to support them to find activities they were interested in, and they appreciated this support.
- People told us about the various opportunities they had to pursue their hobbies and interests, learn new skills, and further develop any learning they had postponed while in hospital.
- One person told us they had been able to continue with their small online craft business while at the service. They made the products during their spare time and posted these weekly to their customers. They found this fulfilling, as well as being able to bring and play their piano at the service. Staff had also supported the person to find a piano teacher who provided lessons so that they further improved their skills.

The person also enjoyed weekly yoga and photography sessions. They said their most achievement so far, was that they had enrolled to start studies at a local university soon and they thanked staff for helping them with that. They said, "I wouldn't have gone for that if the occupational therapists (OTs) hadn't been encouraging and supportive. The art therapist, [name] has been helpful too, she's great."

- Another person was also quite optimistic about their achievements so far and how staff helped them to have more positive plans for the future. They said, "I have limited opportunities to go out at the moment because of my health, but I have been working with an OT to look at alternative activities, like doing online courses. I recently finished my degree and I would like to get into working soon."
- People had both short-term and long-term goals, and it was great to see that being at the service had given them hope that they might achieve most of those goals. People also completed a 'quality of life scale' survey to assess what help they needed to make their lives worthwhile. Staff and the provider spoke proudly about some of the things people had achieved since leaving the service. One staff member said, "This is a good service because we have success stories of [people] who have done well since being here."

#### 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.

- People using the service could communicate verbally in English and they understood information given to them.
- The provider had a form to assess people's communication needs when they first moved to the service. They used this information to arrange appropriate support where communication barriers had been identified.

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

- There was a system to manage complaints and concerns raised by people. There had been no recorded complaints since the previous inspection. People said they were happy with the service and had no reason to complain.
- People had many opportunities to talk about any concerns they had about their care and support. These included talking daily with staff and the provider, weekly keyworker meetings, and weekly care reviews. People were also encouraged to complete weekly feedback sheets and regular reflective journals. Staff reviewed these and dealt quickly with any issues raised.

#### End of life care and support

- There is a high mortality rate amongst people with eating disorders. The provider is aware of this and they have systems to support people if they required end of life care while at the service.

# 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.

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

- The provider had a more improved governance system to assess and monitor all aspects of the service. They now kept more robust records to show what action they took to deal with any shortfalls they identified during their checks.
- The registered manager and other senior staff carried out various audits to ensure the service was safe and effective, and risks to people's health, safety and wellbeing were effectively managed. They also regularly assessed staff's competence to provide safe and effective care.
- Staff understood their roles and responsibilities, and what they needed to do to ensure they provided a consistently good service. One staff member explained to us the importance of consistent care in ensuring people made progress in their recovery pathways. This meant they met regularly to ensure everyone fully understood people's care plans in order to support them effectively.

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

- The registered manager and staff were committed to providing high-quality and person-centred care to people using the service. One staff member told us about how fulfilling it had been to work at the service because they saw people getting better and changing their lives. They said their work was sometimes challenging, but they were all driven to work there by the contribution they made in making people's lives better.
- People were extremely pleased with the positive changes they had experienced in their short time at the service. They told us they felt more in control of their lives and recovery and attributed this to a highly caring and skilled care provider and staff.
- The provider was driven by the positive outcomes experienced by people who were previously supported by the service to continue to strive to be the best service providing this specialist support.

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; Continuous learning and improving care

- The provider understood their responsibility to be open and honest when things go wrong. We saw evidence of learning from the findings of our previous inspection and improvements had been made.
- They also appropriately reported relevant issues to CQC and commissioners of the services.
- The provider was committed to continuous learning and improvement. They regularly engaged with professionals with expert knowledge in the support and treatment of people with eating disorders. This was

so that the support they provided to people was based on good practice guidance and research. They subscribed to a professional journal and attended national conferences to support their knowledge and practice.

- We received extremely positive feedback from professionals who worked closely with the service. Without exception, they all said people received good care. This included one professional who said, "My experience is that they offer very helpful and timely assessments, they offer very targeted and appropriate packages of care and they are very good at knowing their limits and what they can and cannot do to help [people]."

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

- People could speak to staff about their care whenever they wanted. They had other opportunities to give weekly feedback through residents' meetings, keyworker meetings, care reviews, completing feedback sheets and reflective journals.
- The provider also asked people to complete surveys to assess whether the service provided met people's needs and expectations. The results of the most recent survey showed people were happy with the quality of their accommodation. The provider told us they planned to send another questionnaire to people in September 2019.
- Staff told us they could speak with the registered manager whenever they needed to and they were always supported by experienced senior staff. Staff said they also benefitted from regular team meetings, where information and learning was appropriately shared.

Working in partnership with others

- The service worked well with health and social care professionals who were involved in people's care.
- Professionals who commissioned the service commended the provider for their proactiveness and collaborative working to ensure people consistently received the support they needed. One professional told us, "The communication with them (provider) is always very responsive and clear, and they are very involved in every step of communication with referrers."