

Wall Hill Care Home Limited

# Wall Hill Care Home Limited

## Inspection report

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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

Wall Hill Care Home Limited is a residential care home providing personal and nursing care to 29 people aged 65 and over at the time of the inspection. The service can support up to 35 people in one adapted building.

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

People were supported by safely recruited staff, who had the skills and knowledge to provide effective support. Staffing levels were reviewed to ensure there were enough staff available to meet people's needs. People's medicines were managed safely, and staff followed infection control procedures.

Effective care planning and risk management was in place, which guided staff to provide support that met people's needs and in line with their preferences. 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 had access to healthcare professionals and were supported with their nutritional needs. There were systems in place to ensure people received consistent care and support.

People were supported by caring staff who promoted choices in a way that people understood, this meant people had control and choice over their lives. Staff provided dignified care and respected people's privacy. People's independence was promoted by staff.

People were involved in the planning and review of their care and received support in line with their preferences. Information was provided in a way that promoted people's understanding. There was a complaints system in place which people understood. People's advance wishes were sought.

Systems were in place to monitor the service, which ensured people's risks were mitigated and lessons were learnt when things went wrong. People and staff could approach the management team who promoted an open culture. Staff and management were committed to providing a good standard of care with people's needs being at the heart of the service.

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

### Rating at last inspection

The last rating for this service was Requires Improvement (published 25 January 2019).

### 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?

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.

# Wall Hill Care Home 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 carried out by an inspector and assistant inspector.

#### Service and service type

Wall Hill Care Home 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.

The registered manager shared the management of the service with a care manager, they will be referred to as 'the care manager' throughout the report.

#### 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 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 six people who used the service and four relatives/visitors about their experience of the care provided. We spoke with seven members of staff including the registered manager, care manager, assistant deputy manager, senior care workers, care workers and kitchen staff. We also spoke with a visiting professional and the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included five people's care records and multiple medication records. We looked at two 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.

# 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 Requires Improvement. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

### Staffing and recruitment

- Since the last inspection the provider had improved the staffing levels at the service to ensure people's needs were met in a timely manner.
- People and relatives told us there were enough staff to support them. One person said, "Staff come quickly when I need them, within minutes day and night."
- Staff told us, and we observed support being provided in an unrushed way. Staff had time to chat with people and no one had to wait for their needs to be met. One staff member said, "Staffing has improved, we now have an extra staff member until 2p.m which has really helped."
- A system had been implemented to regularly monitor and change staffing levels. This ensured there were enough staff available to meet people's changing needs.
- The provider had safe recruitment practices in place, which ensured people were supported by suitable staff.

### Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- People and relatives told us they felt safe with the support they received from staff. One person said, "I feel safe living here, the staff help me to get around in the wheelchair and I feel safe when they help me." A relative said, "I feel my relative is safe and looked after, which puts my mind at rest."
- Staff had a good knowledge of people's risks and explained how they needed to support them to remain safe.
- There were detailed risk management plans and care plans in place, which ensured staff had up to date guidance available to support people safely.
- The registered manager had a system in place to learn when things went wrong. For example; incidents were analysed by the registered manager to ensure appropriate action had been taken.
- Staff were informed of any changes to the support people needed, which ensured people were protected from the risk of a reoccurrence and lessons were learnt.

### Using medicines safely

- People told us they received their medicines when they needed them. One person said, "The staff help me with my medicine. I don't have too much but they [staff] know what I need."
- People were given time to take their medicines and staff completed Medicine Administration Records (MARs) to show when medicines had been administered. Senior staff were trained to ensure they administered medicines safely.
- Staff had a good understanding of when people needed their 'as required' medicines because guidance was available for them to follow and the records showed people received their medicines as prescribed.

#### Preventing and controlling infection

- People and relatives told us the service was always clean. One person said, "It is always nice and clean. It is kept spotless."
- Staff explained how they followed infection control guidance and ensured personal protective equipment (PPE) was used when they supported people such as; gloves and aprons. We saw this in practice during the inspection. This helped to ensure people were protected from the spread of infection.
- Audits were in place to check the service was meeting the required infection prevention and control legislation.

#### Systems and processes to safeguard people from the risk of abuse

- People were safeguarded from the risk of abuse because staff understood how to recognise the signs of abuse. Staff explained how they would report suspected abuse in line with the provider's policies.
- The registered manager and care manager understood their responsibilities to safeguard people where suspected abuse had been identified.
- Referrals had been made to the local safeguarding authorities to ensure people were protected from the risk of harm.



# 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 Requires Improvement. At this inspection this key question has now improved to Good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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.

- Since the last inspection the provider had made improvements to ensure they were meeting the requirements of the MCA.
- People told us they consented to their care. One person said, "The staff ask me what I need help with. I am quite independent, but I need a bit of help."
- Mental capacity assessments and best interest decisions were in place where people lacked the capacity to make certain decisions for themselves. This ensured support was provided in their best interests.
- Conditions placed on people's DoLS were adhered to. For example, one person's DoLS stated the provider needed to ensure they had access to activities. This person's records showed this was part of their daily life.
- Staff understood people's ability to make decisions and explained how they supported people in line with their authorised DoLS. This ensured people were supported in the least restrictive way possible.

Staff support: induction, training, skills and experience

- Since the last inspection the provider had improved the training and support staff received.
- People and relatives told us they felt staff had the knowledge and skills to support them.
- Staff received an induction before they started to provide care and received training to carry out their role. One staff member said, "I have completed lots of training, different methods are used we do online, in house and some external training. It has been very useful."
- Competency checks had been carried out to ensure staff understood the training received and people were supported effectively. Staff explained their understanding in different areas of care and legislation, which showed their training had been effective.
- Staff felt supported in their role and received supervisions to ensure any issues or areas of development

were discussed.

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

- Since the last inspection the provider had made improvements to people's mealtime experience.
- People told us they enjoyed the food on offer and they had plenty of drinks available to them. One person said, "The food is 'Champion', if I ask for anything different the staff get it for me." Another person said, "I can have a drink whenever I want, and the food is perfect."
- The dining tables were well presented with tablecloths, place settings, condiments and flower arrangements. The atmosphere during mealtimes was calm and relaxed, with people chatting with each other and staff. People were provided with a choice of two meals, and where people did not want either choice an alternative was provided in line with the person's wishes.
- People who needed assistance to eat their meals were supported in an unrushed way and staff chatted to people whilst they were eating.
- Staff supported people to manage their nutritional risks and there were detailed plans in place for staff to follow. People's weight was monitored weekly to ensure any concerns were monitored and advice had been sought from health professionals.

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

- People were supported to access healthcare professionals to ensure their health and wellbeing was maintained. One person said, "The carers call the doctor for me if I am unwell."
- The records we viewed confirmed staff worked with other agencies to ensure people's health and wellbeing was monitored and maintained.
- People were supported to maintain their oral health, plans were in place to ensure staff understood how people needed to be supported, which were followed by staff.
- There was a handover system in place, which contained details of any updates in people's health and care needs. This ensured staff provided consistent support that met people's changing needs.

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

- People and relatives told us they had been involved in the assessment of their needs prior to using the service. One relative said, "I have been involved from the start and communication is good, so I know if there are any concerns or changes in my relatives care."
- Care plans had been developed from discussions with people and their relatives. These contained details of people's diverse needs and preferences in line with the Equality Act 2010.

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

- The service was designed and decorated to meet people's needs. People's bedrooms were personalised, and communal areas were homely and well maintained.
- There was signage in a pictorial format and people's rooms were designed as front doors in different colours. The care manager told us the provider had designed the environment in line with dementia guidance to help people recognise the different areas of the service.
- The service had been adapted to ensure people remained safe. Equipment such as a bath seats and toilet seats with grabrails were in place to ensure people were safe whilst promoting their independence within the service.

# 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 Requires Improvement. At this inspection this key question has now improved to Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Respecting and promoting people's privacy, dignity and independence

- Since the last inspection the provider had ensured staff understood the importance of protecting people's dignity.
- People felt respected by staff who promoted their privacy and dignity. One person said, "I feel respected by staff, I am free to go to my room if I want time to myself."
- People were supported to be as independent as possible. One person said, "The staff always praise me when I am independent and manage to do things for myself."
- Staff explained the importance of supporting people in a way that met their needs and encouraged their independence.
- People had access to equipment to aid their independence such as walking frames, which meant they were able to move around the service when they wished.
- We spoke with the provider about considering the use of aids to promote independence at mealtimes. The provider responded to this feedback immediately and purchased plate guards to help people eat their meals independently.

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

- People and relatives told us staff were kind and caring. Comments included, "They are wonderful, I have no complaints. They work very hard" and, "The staff are lovely" and, "The staff are lovely with my relative, they [staff] give my relative a hug if they are feeling down."
- A visiting professional told us the staff were caring and attentive towards people. They said, "The staff are caring and show a real interest in the welfare of the people they support."
- We observed caring interactions between people and staff. Staff showed patience when they supported people and ensured people were comfortable throughout the day.
- People were supported to maintain relationships with their families and friends. Relatives told us they were able to visit at any time and the staff always made them feel welcome.
- The registered manager and care manager promoted equality and diversity within the service. Staff followed this in practice and explained how they ensured people's diverse needs were respected and support was provided in line with their wishes.

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

- People told us they made choices, which were respected by staff. One person said, "I choose what I want every day, the staff are very good because they listen to me."
- Staff encouraged people to make choices in the way they received their care and gave people time to

answer questions about the support they wanted.

- Staff understood people's individual methods of communicating. Support plans were in place to give staff guidance on the most effective way to help people express their views.

# 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 Requires Improvement. At this inspection this key question has now improved 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

- Since the last inspection the provider had improved to ensure people felt fully involved in the planning and review of their care.
- People's preferences were gained, and staff respected these. For example, one person told us they preferred a female member of staff to support them with personal care. This person's preference had been respected and they always received support from female staff.
- People and their relatives were involved in the planning and review of their support. This ensured people were supported in line with their changing needs and wishes.
- Records contained information about people's likes and dislikes, which reflected the knowledge staff had about people's preferences in care.

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.

- Since the last inspection the provider had improved to ensure they were meeting the requirement of the AIS.
- Staff understood people's individual methods of communicating. Staff gave people time to answer questions and used short sentences to help people understand what was being asked.
- Support plans gave staff guidance on the most effective way of communicating to help people express their views.
- Information was available to people in various formats to aid their understanding and promote choices. The registered manager had implemented pictorial care plans to be used if needed, which would enable people to be involved in their care.

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 told us they enjoyed taking part in the activities provided. One person said, "I always get offered the activities, we do things like exercises, board games, singers and outings. I've been out today, it's been wonderful. I had fish and chips it's good to get out and about."
- Daily activities were planned and displayed on the noticeboard in the dining area. Staff and the activities co-ordinator were involved in the delivery of activities.

- On the day of the inspection people played table games and joined in singing and clapping with an external entertainer.
- People had opportunities to access the community. The service had a minibus which was used to take people for trips to local areas and cafés on a weekly basis.

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

- People and relatives understood how to make a complaint if they needed to. One person said, "I would talk to staff or [care manager's name] if I had any concerns, but I have never had a problem."
- The care manager explained that any small issues were dealt with immediately at the time, which reduced the number of formal complaints received at the service. A relative said, "If I have had any small issues I talk to the staff or manager and it is dealt with straight away."
- There had been no complaints at the service since our last inspection. However, there was a complaints policy in place, which ensured any complaints received were investigated and responded to.

#### End of life care and support

- At the time of the inspection there was no one who was receiving end of life care.
- Where people chose to discuss their advance wishes for their end of life support these had been recorded to ensure people were supported in line with their preferences.

# 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.

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

- Since the last inspection the provider had worked hard to ensure the required improvements had been implemented and sustained. Systems to monitor the service had ensured improvements were effective, which had impacted on all areas of people's care.
- The registered manager understood their legal responsibilities in relation to duty of candour. They were open and responsive to feedback received at the last inspection and acted on the feedback to improve the service people received.
- Systems were in place to monitor the service and mitigate risks to people. Audits had been carried out, which showed the actions taken to ensure improvements were made to the way people received their care.
- The registered manager understood their responsibilities of their registration with us. They had notified us of events that had occurred at the service and their rating was on display.
- The provider had systems in place to ensure the service was working in line with regulations. The provider visited the service and meetings were held with the registered manager to feedback their findings.

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

- People and relatives were positive about the registered manager and care manager. One person said, "The management are really good, and I know them all. I have a chat with them most days." A relative said, "[Care manager's name] is very approachable. They are always open and honest with me, which I appreciate."
- Staff felt supported by the management team. One staff member said, "I find all of the management approachable, I feel supported in my role."
- The management team promoted the values of the service, which staff followed in practice. The registered manager said, "Our philosophy is to ensure the residents needs are paramount and always come first. It is important people are supported to be a part of the local community including schools and churches."

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

- People and relatives felt involved in the service. Feedback was gained through the completion of surveys. The registered manager had analysed the results and action had been taken to make improvements where needed. The results were on display for people and relatives to access.
- Staff were encouraged to make suggestions about the provision of care. There was an open and honest

culture where staff were supported to reflect and learn when things went wrong.

#### Continuous learning and improving care

- Staff were encouraged to develop their skills and knowledge to assist them to support people effectively. One staff member said, "The management have been very supportive in helping me develop and progress within the service."
- Staff meetings and supervisions took place and staff told us these were useful to discuss any updates in procedures and development opportunities.
- The registered manager was involved in meetings and forums with other registered managers and providers to share good practice and ensure they continuously improved the service.

#### Working in partnership with others

- The registered manager and care manager had developed good working relationships with a range of external organisations and professionals. This ensured people received their support in a consistent way and their health and wellbeing was maintained.