

The Willows Learning Disability Care Home Ltd

The Willows Residential Care Home

Inspection report

30 Slinger Road
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Lancashire
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Tel: 01253863059

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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

The Willows is a care home registered for six people who have a learning disability. The home is situated close to Cleveleys town centre. There are two floors of the home available for people and it comprises of four single and one double room. En-suite facilities are provided and in addition, bathrooms are available on both floors. At the time of the inspection there were six people who lived at the home.

At the last inspection carried out in March 2016 the service was rated Good. At this inspection we found evidence continued to support the rating of 'Good'. There was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

This inspection visit took place on 30th August 2018 and was announced.

We observed many examples of staff being sensitive, respectful and caring to people they supported. They were also attentive and kind. This was confirmed by our observations and relatives and people who lived at the home we spoke with. A relative said, "A great home with super caring staff."

Procedures were in place to record safeguarding concerns, accidents and incidents and take necessary action as required. Staff had received safeguarding training and understood their responsibilities to report unsafe care or abusive practices.

People who lived at The Willows received their medicines as required. Care records we looked at contained a medicines care plan and risk assessment to inform staff about medication details for each individual. Training was provided for staff to ensure they had the competency to administer medicines.

The registered manager ensured there was sufficient staffing levels in place to provide support people required. People had one to one support to enable them to pursue activities of their choice. One person who lived at the home said, "I like going out with [staff member] on our own."

Risk assessments had been developed to minimise the potential risk of harm to people during the delivery of their care and when people were out in the community. These had been kept under review and were relevant to the care provided.

Staff had been recruited safely, appropriately trained and supported. They had skills, knowledge and

experience required to support people to follow their interests and provide care they needed.

The service had safe infection control procedures in place and staff had received infection control training to support them in their role.

Meal times were relaxed and organised around people's individual daily routines. We saw people had access to the kitchen to make snacks and drinks as they wished. People were able to choose what they wanted to eat and prepare their own meals with staff support.

The layout of the premises was appropriate for the care they provided. We found facilities and equipment had been serviced and maintained as required to ensure the home was a safe place for people to live.

There was an emphasis on promoting dignity, respect and compassion for people who lived at the home. People told us staff treated them as individuals and were respectful of their privacy.

People had been supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

The registered manager used a variety of methods to assess and monitor the quality of the service. These included, staff and 'resident' meetings. In addition, surveys were collected to seek relative/resident's views about The Willows.

Further information is in the detailed findings below

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 remains Good.

Is the service effective?

Good ●

The service remains Good.

Is the service caring?

Good ●

The service remains Good.

Is the service responsive?

Good ●

The service remains Good.

Is the service well-led?

Good ●

The service remains Good.

The Willows Residential Care Home

Detailed findings

Background to this inspection

We carried out this comprehensive inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The Willows is a 'care home.' People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

This inspection visit took place on 30 August 2018 and was announced. We gave the service 48 hours' notice of the inspection visit because the service was a small care home for adults who are often out during the day, we needed to be sure someone would be in.

The inspection team consisted of an adult social care inspector.

Before our inspection on 30 August 2018 we completed our planning tool and reviewed the information we held on the service. This included notifications we had received from the provider, about incidents that affect the health, safety and welfare of people who lived at the home and previous inspection reports. We also checked to see if any information concerning the care and welfare of people who lived at the home had been received. We contacted the commissioning department at Lancashire County Council. This helped us to gain a balanced overview of what people experienced accessing the service.

As part of the inspection we used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make.

We did not use the Short Observational Framework for Inspection (SOFI) during our visit. SOFI is a way of observing care to help us understand the experience of people who could not talk with us. This was because staff and people who lived there were together in small surroundings.

During the visit we spoke with a range of people about the service. They included four people who lived at the home, one relative and two support workers. In addition we spoke with the registered manager. We also observed care practices and how the staff interacted with people in their care.

We looked at care records of two people, staff training and supervision records of staff and arrangements for meal provision. We also looked at records relating to the management of the home and the medication records of people who lived there. We reviewed the services staffing levels and checked the building to ensure it was clean, hygienic and a safe place for people to live.

Is the service safe?

Our findings

We spoke with people who lived at The Willows and relatives to see if they felt safe in the care of staff. Feedback was positive for example a relative said, "We feel [person who lived at the home] is at the right place and is safe there." Also, "Yes the staff are lovely, yes I feel safe."

There were procedures and systems in place to protect people from abuse and unsafe care. Staff had received training and knew what action to take if they became aware of or suspected a safeguarding issue. They understood what types of abuse and examples of poor care people might experience. They were able to describe safeguarding procedures which needed to be followed if they reported concerns to the registered provider. They told us they were confident if they reported concerns to the registered provider these would be dealt with appropriately.

Care plans seen had risk assessments completed to identify potential risk of accidents and harm to staff and people in their care. Risk assessments we saw provided instructions for staff members when they delivered support for people. These included, health and safety, mobility, fire and environmental safety. The assessments had been kept under review with the involvement of each person to ensure support provided was appropriate to keep the person safe.

We walked around the home and found it to be clean and tidy. We observed a staff member used personal protective equipment such as disposable gloves. This was to attend to a person who required support with personal care. The staff member said, "Always thinking of personal hygiene and protecting the person." Staff received relevant training and the registered manager competency-tested hand hygiene to ensure their skills were efficient. In addition, the electrical, gas, equipment and fire safety certification was up-to-date. This demonstrated the registered manager had good oversight of systems intended to maintain everyone's safety.

We looked at how accidents and incidents were managed by the service. There had been few accidents. However, where they occurred any accident or 'near miss' was reviewed to see if lessons could be learnt and to reduce the risk of similar incidents.

On the day of the inspection visit there was a sufficient workforce, fully trained and able to deliver care in a caring and patient manner. A staff member said, "We have staff sufficient for looking after the residents and enjoying the day with them." We observed a calm and unhurried atmosphere throughout our inspection.

Staff recruitment records we looked at held required documents, such as references and criminal record checks, before they commenced employment. The registered manager had the same good recruitment systems in place as the previous inspection.

Staff supported people who lived at The Willows with medicines as prescribed and at the correct time. We saw medicines were ordered appropriately, administered as prescribed and stored and disposed of correctly. We found the registered manager had audits in place to monitor medicines procedures. This

meant systems were in place to check people had received their medicines as prescribed. The audits confirmed medicines had been ordered when required and records reflected the support people had received with the administration of their medication. Medicines were managed in line with The National Institute for Health and Care Excellence (NICE) national guidance. This showed the service had systems to protect people from unsafe storage and administration of medicines.

Is the service effective?

Our findings

The registered manager had a range of training to assist staff development, skills and understanding. This covered, for example, safeguarding, infection control and fire safety. The registered manager had completed a training programme for staff to follow to make sure they are well trained and equipped to support the people who lived at the home. Staff also completed recognised qualifications in health and social care. Comments from staff confirmed access to training and development was good and included, "Great training I have done my National Vocational Qualification (NVQ) level 2 supported by [registered manager]." Also, "No issue whatsoever with access to training opportunities."

The service provided equality and diversity training to all staff and this was refreshed annually. The training taught staff to respect people's individual beliefs including religion, culture and sexuality. This confirmed the service was able to accommodate diversity in the workplace and create a positive and inclusive environment.

We looked at evidence the registered manager was referencing current legislation, standards and evidence based on guidance to achieve effective outcomes. People who lived at The Willows received effective care because staff had a good understanding of their personal and social care needs.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We observed during our visit people were not deprived of their liberty or restricted. During the inspection visit people went out into the local community that was their choice. One person said, "I like to go to the café with [staff member] and I go when I want to."

We arrived at breakfast time and people were freely walking into the kitchen and making themselves cereals and toast, staff were supporting them. One person we spoke with said, "I love curry and guess what, we are having that tonight." Meal times were relaxed and organised around people's individual daily routines. Staff and people who lived at The Willows told us they were fully involved in assisting with shopping and food preparation. We observed at lunchtime people sat in the lounge together and had takeaway fish and chips which everyone enjoyed and commented on. It was a relaxed enjoyable experience for the staff and people at the home. One person who lived at The Willows said, "I love takeaways with us all together."

The kitchen was clean, organised and stocked with a variety of provisions. Staff told us and training records confirmed they had received training in food safety and were aware of safe food handling practices. The Food Standards Agency, a regulatory body responsible for inspecting services which provide food had awarded the home their top rating of five in relation to meeting food safety standards about cleanliness, food preparation and associated record keeping. Information was made more accessible to people who had difficulty to communicate their needs. This included easy read documents, such as meal selections.

We had a walk around the building. It was appropriate for the care and support provided. Each room was

individually furnished and decorated as people wished it to be. Lighting in communal rooms was domestic in character, sufficiently bright and positioned to facilitate reading and other activities. Aids and hoists were in place which were capable of meeting the assessed needs of people with mobility problems.

Care plans of two people we looked at contained an assessment of people's needs which had been completed before they moved into the home. Following the assessment, a plan of care was developed with the person at the centre of the discussions with family for staff to follow. A relative said, "They were thorough before [person] moved in. We went through everything together, [relative] me and the people here. They were wonderful." Care records contained information about people's current needs as well as their preferences. Consent had been agreed by the person or family and documentation was there to confirm this.

People's healthcare needs continued to be carefully monitored and discussed with the person as part of the care planning process. Records looked at confirmed visits to and from General Practitioners (GP's) and other healthcare professionals had been recorded.

Is the service caring?

Our findings

During our inspection visit we sat in the lounge and dining area and observed interactions between staff and people who lived at the home. We found staff were sensitive, kind and caring to all the people in their care. For instance, a staff member was gently drying people's hair and joining in with conversation. People who lived at the home were enjoying the interaction whilst this was taking place. We spoke with a person who said, "Love having my hair done it looks beautiful now." Comments from relatives included, "They are so kind and caring it is fantastic." Also, "We could not want for better care the staff and manager are so kind and caring."

Care plans looked at confirmed people and their families had been involved in their care planning. Records we looked at contained evidence of them being engaged in the development of their care plan throughout the process. Records contained personal preferences about how they wished to be supported. In addition, picture format was available so that people could understand their care plans.

We spoke with the registered manager about access to advocacy services should people require their guidance and support. Advocacy services offer independent assistance to people when they require support to make decisions about what is important to them. The service had information details for people and their families if this was needed. This ensured people's interests would be represented and they could access appropriate services outside of the service to act on their behalf if needed.

There was clear collaboration between the service and the person they supported. For example, the person's preferences and information about their backgrounds had been recorded. Additionally, the service had carefully considered people's human rights and support to maintain their individuality. This included checks of protected characteristics as defined under the Equality Act 2010, such as their religion, disability, cultural background and sexual orientation. Information covered any support they wanted to retain their independence and live a meaningful life'

The registered manager had a good understanding of protecting and respecting the person's human rights. They were able to describe the importance of promoting individual's uniqueness and there was an extremely sensitive and caring approach observed throughout our inspection visit.

We observed during the day of our visit staff had an appreciation of people's individual needs around privacy and dignity. We observed they spoke with people in a respectful way and were kind, caring and patient when supporting people. For example, a staff member was supporting a person with personal care and ensured the door was closed to their bedroom so that they cared for the person in private.

Is the service responsive?

Our findings

People we spoke with told us staff were responsive to their needs and were available when required. During the day we sat with staff and people who lived at The Willows in the lounge. We found it a relaxed environment with staff and people interacting in a pleasant and warm way. For example, one person told a member of staff how much they 'loved them' the staff member responded by hugging the person. It was clear staff were responsive to the needs of people. A staff member said, "They are all brilliant."

We looked at what arrangements the service had taken to identify, record and meet communication and support needs of people with a disability, impairment or sensory loss. Care plans seen confirmed the services assessment procedures identified information about whether the person had communication needs. These included whether the person required easy read or large print reading, brail or audio books.

Each person who lived at The Willows had their own activity planner which they had been involved in developing based on their likes and dislikes. Each person had their own interests which they liked to follow. For example, this included voluntary work, shopping, going out for meals and going on trips and walks. One person enjoyed undertaking voluntary work in an area of interest to them. During our inspection visit we saw people discussing with their support workers their preferred activity for the day. A person who lived at the home said, "I am going out to the café I love that."

The service had Wi-Fi (wireless connectivity) in the building enabling people who use the service to have internet access through their hand-held computers. The registered manager told us this enabled people who use the service to play computer games and watch films at their leisure.

People and relatives we spoke with said they were clear about who to report concerns and complaints to and how these would be addressed. Details provided in the hallway of The Willows explained how individuals could raise concerns. This included the steps the registered manager would take to address any issues. No complaints had been received since the previous inspection. A relative said, "How can there be any complaints the people who work there are so kind and dedicated."

The service is a small care home for younger adults and would not normally be involved in providing end of life care. We discussed this with the registered manager who told us if an end of life situation arose they would liaise with appropriate healthcare professionals and support the person to remain in their home if possible.

Is the service well-led?

Our findings

Comments received from people who lived at The Willows and family members were positive about the service and the way it operated. For example, comments included, "We are one family." Also, [Registered manager] is wonderful and brilliant." We discussed the leadership and organisation of the management team and received positive comments from relatives and staff. Comments included from a staff member, "[registered manager] is so supportive and open we get on so well." A relative, said, "A great manager so supportive." A staff member said, "Absolutely brilliant [registered manager] was so good to me when I needed support fantastic home and people here." We found the service had a calm and relaxed atmosphere and staff were smiling and constantly chatting with people who lived at The Willows.

There was a registered manager in place. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

We found The Willows structure had clear lines of responsibility and accountability. The registered manager and his staff team were experienced, knowledgeable and familiar with the needs of the people they supported. Discussion with staff on duty confirmed they were clear about their role and between them provided a well run and consistent service.

The registered manager ensured the service worked in partnership with other organisations to make sure they followed current practice, providing a quality service and the people in their care were safe. These included healthcare professionals such as GP's, opticians, chiropodists and dietitians. This ensured a multi-disciplinary approach had been taken to support care provision for people in their care to receive the appropriate level of support.

The registered manager focused on involving people and their relatives in the running of The Willows by constantly seeking their views. This was confirmed by people we spoke with. They conducted surveys from staff and relative/residents with a suggestion box situated in the entrance hall. Comments from March 2018 were all positive and included, 'The care given is to a top standard.' Also, 'All the staff put their heart and soul into the job and truly care.' The registered manager informed us any negative comments would be analysed and acted upon. However none had been received.

The registered manager had systems and procedures in place to monitor and assess the quality of their service. Regular audits had been completed reviewing medication procedures, care plans and staff training. Actions had been taken as a result of any omissions or shortcomings found. Staff told us they were able to contribute to the way the home ran through staff meetings and regular supervisions with the registered manager. They told us they felt supported by the registered manager.

The service had on display in the reception area of the home their last CQC rating, where people who visited the home could see it. This is a legal requirement from 01 April 2015.

