

# Overley Hall School Limited The Woodlands

## 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

This Inspection took place on 30 March and 3 April 2017.

The Woodlands is a small location providing accommodation for up to five people with learning disabilities and who require nursing or personal care. At this inspection five people were living there. The Woodlands is located in the grounds of Overely Hall School

A registered manager was in post and was present on day two of this inspection. 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.

People were safe as staff had been trained and understood how to support people in a way that protected them from danger, harm and abuse. People had individual assessments of risk associated with their care. Staff knew what to do in order to minimise the potential for harm. People and staff undertook regular emergency practices and knew what to do in such situations in order to keep themselves safe.

People were supported by enough staff to safely meet their needs. When people's need increased the provider had systems in place to provide additional staff members to safely assist them. People received help with their medicines from staff who were trained and assessed as competent to support them safely. The provider followed safe recruitment practices and completed checks on staff before they were allowed to start work.

Staff members had received training appropriate to the needs of those they supported and had the skills and knowledge to meet people's individual needs. Staff members were aware of current guidance and legislation that governed their practice.

People were supported in a way that maintained their individual rights. People were involved in decisions about their care and were given information they needed in a way they understood. When people were not able to make decisions themselves staff members knew what to do to ensure any decisions made were in their best interests.

People had positive and caring relationships with the staff members who supported them. People's personal histories, likes and dislikes were known by staff who assisted them in a way which was personal to them.

People had their privacy and dignity respected by staff members who supported them.

People were supported to eat and drink sufficient amounts to maintain good health. People had access to

healthcare when needed and staff responded to any changes in needs promptly and consistently.

Staff were supported by a management team who they found approachable and supportive. The provider undertook regular quality checks in order to drive improvements. People were involved in their home and felt their opinions mattered to the provider. The provider had systems in place to respond to the suggestions of others.

## 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.

People were protected as staff had received training and understood how to recognise and report any concerns they had about people's safety or wellbeing. People were supported by enough staff to safely meet their needs. The provider followed safe recruitment practices. People were supported with their medicines by trained and competent staff members.

### Is the service effective?

Good 

The service was effective.

People were supported by staff members who had the skills and knowledge to meet their needs. People had their rights protected by staff members who knew the current guidance governing their practice. People were supported to maintain a diet which promoted their individual health needs. People accessed healthcare when needed to maintain their welfare.

### Is the service caring?

Good 

The service was caring.

People were supported by a staff team they regarded as kind and considerate. Staff spoke about those they supported with warmth and respect. People were supported at times of upset and distress. People were involved in making decisions about their own care and support.

### Is the service responsive?

Good 

The service was responsive.

People were involved in the development care and support plans which reflected their individual needs and wants. Regular reviews took place and accounted for any changes in people's needs. People's individual preferences were known by staff members who supported them as they wished. People and relatives were encouraged to raise any concerns or complaints.

### Is the service well-led?

Good 

The service was well led.

People felt involved in decisions about their home and that their suggestions were valued by the provider. Staff members believed

their opinions and ideas were listened to and, if appropriate, implemented. The provider had systems in place to monitor the quality of service they provided and where necessary made changes to drive improvements.

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# The Woodlands

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check 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.

This inspection took place on 30 March and 03 April 2017 and was announced. The provider was given 24 hours' notice because the location was a small care home for younger adults who are often out during the day; we needed to be sure that someone would be in.

The inspection team consisted of one inspector.

We reviewed information we held about the service. We looked at our own system to see if we had received any concerns or compliments about the provider. We analysed information on statutory notifications we had received from the provider. A statutory notification is information about important events which the provider is required to send us by law.

We asked the local authority and Healthwatch for any information they had which would aid our inspection. We used this information as part of our planning.

We spoke with two people living at The Woodlands and four relatives. We also spoke with three care staff members, the deputy manager, registered manager, director, one maintenance worker and one visiting health care professional. We looked at care and support plans for two people including individual assessments of risk and medicine administration records. We looked at records of incidents and accidents and quality checks completed by the registered manager and the provider. In addition we looked at the recruitment details of two staff members.

# Is the service safe?

## Our findings

We looked at how people were kept safe from the risks of harm and abuse at the Woodlands. One person told us "I am safe. Everyone is great to me." One relative said, "I have no concerns what so ever about [relative's name] being at The Woodlands." Staff we spoke with told us they had received training on how to recognise and respond to signs of ill-treatment and abuse. One staff member said, "I would report anything straight away to [registered manager's name] or [deputy manager's name]." Staff members told us they had access to information telling them what to do if they suspected something was abusive. This included contact telephone numbers for the local authority, the Care Quality Commission and the police. The provider had systems in place to address any concerns relating to the potential ill-treatment or abuse of people living at The Woodlands. At the time of this inspection the registered manager had not needed to take any such action in order to keep people safe.

People told us that they were involved in developing assessments of risk relating to the activities they were involved in. For example, one person told us, "When I go horse riding I keep my helmet on at all times. We spoke about it and it keeps me safe if I ever fall off. But I just don't fall off." One relative told us, "I am confident that things are safe at The Woodlands. Everyone can still go out and enjoy themselves. There appears to be very little restriction on what they can do. However, I have no concerns about [relative's name] safety." We saw people had individual assessments of risk based on their personal circumstances. These assessments included mobility, activities of daily living and travelling in cars and public transport. One staff member told us, "If circumstances change then we have to adapt the risk assessments so that everyone is aware of the risks and work in a consistent way with people." We saw staff members discussing an incident and looking at what could be done differently in the future to ensure people and staff remained safe. This included making staff members aware of potential triggers to people's anxieties and how they can best assist them with recognising and managing their emotions.

The risks to people regarding their physical environment was minimised as regular maintenance checks were completed. We saw one staff member identify a repair which needed to be completed regarding one of the connecting doors. The staff member took immediate action to make the area safe and notified maintenance staff. We later saw a member of the maintenance staff completing an initial fix to ensure the area remained safe and functional. One member of maintenance told us, "Any repairs are reported and any urgent repairs are emailed for our attention." Whilst the maintenance staff were in The Woodlands they took the opportunity to walk around and identify any additional maintenance that needed to be completed. This was in order for people to remain safe in their own environment. The provider had systems in place to identify and rectify any maintenance issues that may present a risk to people. For example, The Woodlands is located in an area surrounded by trees. Regular maintenance was completed to identify any unsafe trees or branches which were removed if required.

Plans were in place to respond at times of emergency. People told us they had personal evacuation plans in place and knew what to do in an emergency. We saw one person was involved in the regular fire alarm testing. People told us they were involved in regular evacuation practices where they went to somewhere that was safe in case of emergency.

People told us, and we saw, that they were supported by enough staff members to meet their needs. This meant people could take part in activities in and outside of their home. If they chose to stay at home staff were available to support them as they needed. Staff members told us if anyone needed any additional support this would be provided. At this inspection we saw some people being supported by staff on a two to one basis. Staff members told us this was as a result of a change in this person's needs. One staff member said, "[Provider] has agreed extra staff during the period when extra support is needed. At the moment we are applying to the placing authority for extra funding to ensure [person's name] gets the right amount of support they need."

Staff members told us that before they were allowed to start work checks were completed to ensure they were safe to work with people. Staff members told us references and checks with the Disclosure and Barring Service (DBS) were completed and once the provider was satisfied with the responses they could start work. The (DBS) helps employers make safer recruitment decisions and prevent unsuitable people from working with people. The provider had systems in place to address any unsafe behaviour displayed by staff members. This included re-training and disciplinary action if required.

We looked at how people were supported with their medicines. We saw people being assisted by staff members who had been assessed as competent to do so. Staff members told us before they were allowed to assist people with their medicines they had to undergo training in the safe administration of medicines. One staff member told us, "I have regular checks to make sure I am doing the right thing when supporting people with their medicines." Another staff member said, "When The Woodlands first opened there were several medicine errors. We think this was because staff were new and unfamiliar to the systems. As a result [registered manager's name] changed the system and included additional checks and two staff members supporting with medicines at all times. Since then there has not been a single error."

We looked at people's PRN "as and when required" medicines. We saw there were guidelines for staff to follow to ensure people received their medicines safely and appropriately. PRN medicine administration was monitored by senior staff members to ensure the correct protocols had been followed. In addition it identified if any changes were needed to people's risk assessments or support plans.



# Is the service effective?

## Our findings

People received assistance from a staff team that had the knowledge and skills to effectively support them. One relative told us, "Staff members are skilled and experienced. They all seem to work together as a team." One staff member told us "I went through loads of training when I first started. This included food hygiene, health and safety and first aid. I think it gave me a good grounding on which I could build." Staff members had a structured introduction to working at The Woodlands. A staff member said, "I first worked alongside other staff members. I could see how people liked to be supported and how staff members helped them. It gave me time to develop my own style and to ask any questions I was not sure about."

Staff members had access to regular training opportunities that they believed benefited those they supported. For example one staff member told us they were being supported to complete a diploma in care and another was completing a medicines competency assessor's course. One relative told us, "We struggled to understand aspects of [relative's name] medicines. [Staff member's name] went on a course. They then explained to us all about the medicine and its benefits. We found this very reassuring."

People were supported by staff members who had the skills to effectively communicate between themselves and others involved in their assistance. We saw staff sharing information appropriately between people they supported and other staff members. For example, one person had changed their mind about what they wanted to do. The staff members discussed the changes with the person and other staff members to identify how they could accommodate the changes this person wanted. We later saw this person engaged in what they wanted to do.

Staff members told us they had received "Team Teach" Training. "Team Teach" involves strategies of de-escalation, talking, listening when assisting people who are showing signs of upset and distress. Team Teach only advocate physical intervention as a last resort. Any interventions used with people involved reassurance and calming strategies. Any situations which involved the use of such techniques were recorded and evaluated by the registered manager. This was to ensure that techniques used were proportionate to the situation and that the person and staff members received any additional support.

People were supported to make their own decisions and were given choice. We saw people were given the opportunity to make decisions about what they wanted to do, wear, eat, watch and listen to at this inspection. People were given time and space to make a decision and were not rushed by staff. One person told us, "I am going out horse riding in a minute and then I have chosen to go and do some shopping." Another person told us what they had chosen for their breakfast and that they had received support to make what they wanted.

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. We checked whether the service was working within the principles of the MCA. The provider had

trained and prepared staff in understanding the requirements of the MCA. One relative told us that they were involved in the best interest decision making process for their family member. Those we spoke with felt their opinions mattered and were considered as part of the process.

We saw people's capacity to make decisions was assessed and reviewed when needed. Staff we spoke with had a clear understanding of the principles of the Mental Capacity Act and the process to follow if someone could not make a decision which included the best interest decision making process.

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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). The provider had made appropriate applications and followed current guidance. The decisions on these applications were still pending. However, we saw the provider had taken action to ensure the least restrictive measures were in place for those they supported. The staff members we spoke with were aware of the pending DoLS applications and how to support people in a way that protected their rights. The provider had systems in place to monitor the time scales for reviews, or a repeat application if necessary, to ensure people's rights were maintained.

People were supported to have enough to eat and drink and to maintain a healthy diet. One person told us what they had chosen for their meals and we saw another had decided to eat out at lunch time. We saw people's weights were monitored by staff who took action if needed. For example, following one person's unplanned weight loss staff members sought guidance from the GP. Meal supplement had been prescribed to encourage well-being. We saw people were involved in the meal preparation and deciding what was included in the menus.

People had access to healthcare services and were supported to maintain good health. One person told us, "I have some itchy skin. I told [staff member's name] and went to see the doctor about it." Healthcare support included doctors and dentists and psychologists to support physical and mental well-being. One visiting health professional told us, "We identified that [person's name] needed to undertake further assessment. As a team The Woodlands supported them to familiarise themselves with the medical procedure." One staff member told us they encouraged people to attend appointments at local health care facilities. This was to help people become used to medical establishments which helped relieve feelings of anxiety should they need to attend urgently or in an emergency.

# Is the service caring?

## Our findings

We saw people were supported by a staff team with whom they had a positive and caring relationship. Throughout this inspection we saw people and staff members chatting in a relaxed environment. They were sharing ideas, jokes and conversations about things people found interesting. One person was telling a staff member about their favourite sport and who they supported. This was reciprocated and the staff member expanded the conversation by including other things the person liked and wanted to plan for the future. People were supported by a staff team who treated them as if they mattered.

People were given the time and opportunity to identify what they wanted and communicate this to staff members. One person started to show that they were upset and anxious. They were supported by staff members until they showed that they were more relaxed and had calmed. We saw staff members talking and reassuring this person when they were upset. When they were happy the staff members supporting them continued to reassure them and see if there was anything else they needed. This was to give the person time and opportunity to reflect on how they felt. The staff members then spoke about if there was anything that could be done differently in the future.

People were supported by a staff team who had the skills to effectively communicate with them. We saw information was presented in a way people understood. This included pictorial representations of what was written down for people to follow. One person showed us a countdown system they used for things they were looking forward too. This involved how many sleeps there were before something happened. One staff member told us this was so that the person could understand time a little better and assisted in managing anxiety.

People were involved in making choices about their own care and support. At this inspection we saw people making decisions about how they wanted assistance and what they wanted to do. One person showed us the care plan that they had written. They said, "This is about me. I put in there what I want and we go through it all the time. If I want to change anything I just say."

People had access to advocacy services at The Woodlands. One relative told us, "We have [Advocate's name] to help us out. Sometimes it is difficult to understand everything that is going on in [person's name] life so any help is appreciated. The registered manager told us "Sometimes with the more complicated decisions it is useful to get the assistance of advocates. This helps to keep the person at the heart of any decision that needs to be made."

People were encouraged and supported to maintain relationships that mattered to them. People we spoke with told us they received support from staff members to visit relatives. Relatives told us they could visit when they wanted and were involved in activities with their family members. Relatives told us they had a good relationship with staff members and that they always received a warm welcome.

We saw people were encouraged to be as independent as they could be. People were engaged in developing daily living skills. This involved changing their own beds, doing their own laundry and clearing up

after meals. One staff member told us, "People should be fully involved in their own home and this does involve doing these things. It helps to develop pride in what they are doing as well as developing personal skills as they go."

We saw people being treated with dignity and respect throughout this inspection. We saw staff members knocking on people's doors and waiting for an answer before entering. We saw people were given their own personal space should they need time on their own and space to express themselves. When staff members came into The Woodlands we saw them introducing themselves to people and engaging with them. They did this before they acknowledged other staff members. We asked one staff member about this and they told us, "This is someone's home and should not be regarded as a workplace. If you went into someone's house it is polite and respectful to talk to them first." We saw people being asked for their permission before they were assisted with any personal care tasks or if they needed any assistance.

Staff members respected people's need for confidentiality. We saw staff members confirming people's authority to access information personal to people. Once this was confirmed the staff members shared information which was only relevant to the decision or enquiry. Records personal to individuals were kept securely and accessed only by those with authority to do so. People had access to their personal records which they could look at and go through if they wanted.

## Is the service responsive?

### Our findings

People told us they had developed their personal care and support plans with the assistance of staff members. One person showed us their care plan and told us, "I wrote this. It is about me and what I want." The care and support plans that we saw were personal to the individual. They reflected what the person believed staff members should know in order to assist them how they wanted. For example these plans contained details about what they liked and didn't like. What they needed assistance with and what they could do by themselves.

People and relatives told us they regularly reviewed the care and support plans or when it was needed as a result of any changes. One relative said, "We are fully involved in decisions and planning the support for [relative's name]. However, we realise that they have now moved into adult services and we can now just give an opinion. It has been hard for us to understand the transition but with the help of [provider] we now understanding things a little more." We saw care and support plans had been adapted to meet people's changing needs and preferences. For example one person started to display anxiety regarding their environment. This was not present before and therefore had not been anticipated in their care and support plans. Once this element of their personality was known it was included in their care plan. This was so all those providing support were aware of how to support them in a consistent manner. Staff members we spoke with were able to tell us about those they supported. This included what they liked and didn't like. What they preferred to do and what caused them upset or anxiety. People were supported by a staff team that knew them well and how they liked to be assisted.

There was a keyworker system in place at The Woodlands. This was a named staff member who would assist people with their day to day needs but who would also involve them in regular reviews of their care. One person told us, "If I needed anything I can go to [staff member's name] and they will get it." One staff member told us, "We have a keyworker system in place which helps people develop their wants and needs as well as their changes to care and support. We can assist them in identifying what they want to achieve in the short term but also plan for long term goals." One person told us they were working in a local café where they had gained experience of working in catering services. Their keyworker told us, "We spoke with [person's name] about what they wanted to achieve next. As a result we are looking at further work in a residential establishment for older people."

At this inspection we saw people engaged in a number of activities. These activities included, shopping, lunch out, swimming, work placement, music, film club and gardening. People also told us they had the opportunity to relax and spend time in their own home without pressure of doing something. One person told us they had been to watch their favourite football team play. They told us, "It made me really happy. The next day I was shattered. I just wanted to stay at home." People were engaged in activities they found enjoyable and stimulating but also had time to relax.

People had information on how to raise a concern or a complaint in an easy to read format. One person showed us where they kept this information and told us what they would do if they had a concern or a complaint. They said, "I would tell [staff member's name] if I had a complaint." One relative said, "I have

never had cause to make a complaint. I have made suggestions and they have always been responded to promptly and efficiently. This gives me faith that if I did have a complaint it would be responded to appropriately." We saw that the registered manager and the provider encouraged people, families and advocates to raise any concerns. The provider had processes in place to effectively address any concerns raised with them.

## Is the service well-led?

### Our findings

People and relatives we spoke with told us they knew who the management team were and that they found them approachable. We saw the registered manager interacted with people and their families at this inspection in a relaxed and informal manner. One person showed us a picture of the registered manager which was in their personal file for their reference. They had pictures of staff members to remind them who people supporting them were.

The registered manager had an understanding of the day to day culture and was up to date with any changes in people's needs and wants. People told us they were involved in developments and decisions regarding their home. One person showed us their room. They told us, "I decorated in here. It is just how I want it." We saw people made decisions about what they wanted on their entertainment systems at The Woodlands and we saw discussions about their home. For example, we saw details of the menus and who chose what particular meal.

People, and those that mattered to them, were encouraged to provide feedback on their experiences at The Woodlands. The provider involved the services of an independent visitor. This person was employed by the provider to assist them monitor the quality of the service they provided. As part of this person's visits they would talk to people about their experiences and whether or not they had any suggestions to make. Those we spoke with were not able to identify any changes but were happy with the service they received. All those we spoke with, including relatives and staff members, told us they felt confident they could approach the registered manager or provider at any time and their opinions were valued.

Staff members we spoke with believed they were valued by the provider and supported to do their jobs. Staff members were involved in regular discussions about The Woodlands and believed any suggestion or idea would be valued. One staff member told us, "At a staff meeting we raised the idea of rotating who worked with who. This was so the same people did not receive their support from the same staff member. It allowed everyone here and every staff member to get to know one another better which is essential for such a new home. This was recognised by [registered manager] and they made the changes."

Staff members told us there were appropriate policies in place to guide their practice including a whistleblowing policy. Staff understood the whistleblowing process and felt they would be supported by the provider should they ever need to raise a concern. Staff understood what was expected of them and were supported to complete their role. Staff told us they felt the management team was supportive and approachable for advice and guidance when they needed.

At this inspection there was a registered manager in post. The registered manager maintained their personal and professional development by attending regular training and support sessions appropriate to their role. This included a level five qualification in health and social care. As part of their role they shared best with other areas in the provider's organisation. For example, following the identification of the incorrect fitting of a window restrictor the provider assessed all other areas of their provision and made any required changes.

The management team understood the requirements of their registration with the Care Quality Commission. The provider had appropriately submitted notifications to the Care Quality Commission. The provider is legally obliged to send us notifications of incidents, events or changes that happen to the service within a required timescale.

The provider and registered manager had systems in place to monitor the quality of service provision. The registered manager told us they assessed information from quality checks, incident and accidents and feedback from people and staff which they used to drive improvements. For example, following a "near miss" incident, changes were made to how people, visitors and contractors accessed the property. This was so people and those visiting The Woodlands could do so safely.