

Crosscrown Limited

Woodville House

Inspection report

37 Bilton Road
Rugby
Warwickshire
CV22 7AN

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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

Woodville House is a care home that provides accommodation and personal care. The home is spread over three floors with communal areas on the ground floor and bedrooms on the second and third floor with lift and stairlift access. The service can support up to 16 people. When we inspected the service there were 14 people living at the home, some of whom had dementia.

People's experience of using this service

People felt safe at the home and were comfortable around staff supporting them. There were enough staff with the appropriate skills and knowledge to provide safe and effective care. Risks to people's health were identified and staff understood their role in keeping people safe and minimising risk. Medicines were stored, administered and ordered correctly.

People's care included an assessment of their needs and abilities and guided staff on how to support people effectively. Staff received regular training to keep their skills and knowledge up to date. People's nutritional needs were met, and staff supported people to eat and drink well. Staff worked with community health and social care professionals to ensure people's health needs were monitored and addressed. 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.

Staff treated people with warmth and respect and generated a cheerful atmosphere through their approach to working with people. Staff were attentive of people's needs and promoted their privacy and dignity.

People received personalised care by staff who knew them well. The registered manager valued people's right to engage in activities that were diverse, varied, meaningful and responsive to their enjoyment. Staff worked with other healthcare professionals to support people to remain at Woodville House at the end of their life if they wished to do so.

There was a positive culture in the service and both people and staff said they would recommend the service to others. The registered manager had quality assurance systems and processes in place to enable them to monitor the quality and safety of people's care.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection and update.

The last rating for this service was good (published 2 September 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.

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.

Woodville 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

The inspection team consisted of two inspectors.

Service and service type

Woodville House 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. The registered manager and the provider are both legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

The inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information we require providers to send us to give some key information about their service, what they do well and improvements they plan to make. This information helps support our inspections.

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority who works with the service and the local Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England. This information helps support our inspections. We used all this information

to plan our inspection.

During the inspection

We spoke with four people who used the service and four relatives/visitors about their experience of the care provided. We spoke with six members of staff including the registered manager, two care staff, the chef, the activities co-ordinator and a member of housekeeping staff. We also spoke with the provider's operations manager and a registered manager from one of the provider's other homes who supported staff training at Woodville House.

We reviewed a range of records. This included two people's care records and a selection of medication records. We looked at two personnel records to check that suitable recruitment procedures were in place, and that staff received supervision and appraisals to continue their professional development. 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 Good. At this inspection this key 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 at the home and were comfortable around staff supporting them. One person told us they felt safe because, "The staff are always ready to help you if you need it." Another person told us they felt safe because of the security of the home and explained, "Nobody can get in if they haven't got the code."
- Staff had received safeguarding training and knew what action they needed to take if they witnessed or suspected abuse. One staff member told us, "We have to contact the manager or senior. If they didn't do anything I would go to safeguarding."
- Safeguarding information was located on notice boards at various locations within the home to increase awareness and make information visible to people, visitors and staff.
- There had been no safeguarding concerns at Woodville House in the 12 months prior to our inspection visit.

Staffing and recruitment

- There were enough staff with the appropriate skills and knowledge to provide safe and effective care.
- Staff were available to provide support in a timely way and had time to spend with people.
- The provider's system for recruiting staff ensured staff's suitability to work at Woodville House.

Assessing risk, safety monitoring and management

- Risks to people's health and well-being were assessed and included within care planning. Care plans contained risk management plans to inform staff how to support people in the most effective and safe way.
- There were effective systems to monitor and maintain the safety and quality of the environment through regular checks and servicing of utilities.
- Hazardous and dangerous chemicals were stored safely in a clearly labelled and locked cupboard.

Using medicines safely

- Only staff who had completed medication training and were competent administered medicines.
- Medicines were stored, administered and ordered correctly. Medication stock checks of 15 different medicines were accurate and corresponded with medication administration records.
- Where staff had hand written information on medication records, this had not always been double signed as is recommended good practice. The registered manager told us they would remind staff of this requirement.
- One person received their medicines through a patch applied directly to their skin. Records presented a clear history of patch placement and the dates it had been changed. There was a system of daily checks to ensure the patch remained in place.

- Staff recorded the date of opening of topical creams to ensure they were used within recommended timescales and there were risk assessments for the use of flammable creams.

Preventing and controlling infection

- Woodville House was clean, fresh and free from odours.
- Staff had received training in infection control practices and personal protective equipment such as plastic gloves were readily available for staff use in bathrooms and corridors.
- A member of housekeeping staff described how they followed nationally recognised infection control precautions by using different coloured mops for specific areas of the home. They told us care staff informed them if anybody had an infection so they could take extra precautions when entering the person's bedroom.

Learning lessons when things go wrong

- Accidents and incidents were recorded by staff and information showed actions had been taken to identify the cause and address any injuries.
- The registered manager analysed accident and incident records every month to identify any trends or patterns and whether any further action was needed to prevent them happening again.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's care included an assessment of their needs and abilities and guided staff on how to support people effectively.
- People's care and support was regularly reviewed, and care plans updated to ensure people's needs continued to be met.

Staff support: induction, training, skills and experience

- The provider ensured care staff completed an induction that met the standards laid down within the Care Certificate. The Care Certificate assesses staff against a specific set of standards.
- Staff confirmed they received regular refresher training to keep their knowledge and skills up to date. For example, staff had completed the local authority's 'React to Red' training to manage and minimise skin damage caused by reduced mobility.
- Staff put their training into practice safely and effectively during our inspection visit.

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

- People's nutritional needs were assessed and used to develop care plans, so staff knew how to ensure people ate and drank well. Information about people's dietary needs was stored in the kitchen so their meals and drinks could be prepared according to their individual needs.
- Food was freshly prepared and home cooked, and people were given choices. Overall people were happy with the standard and variety of meals provided. One relative regularly ate their meals at Woodville House and told us, "I come and have my meal here with [Name] – it's like a restaurant. Very good food, high quality, beautifully cooked."
- Mealtimes at the home were relaxed and sociable events. People were given time and space to eat their meals independently without being interrupted, but staff were on hand and quick to respond when people needed support.

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

- Staff worked with community health and social care professionals to ensure people's health needs were monitored and addressed.
- Relatives told us staff were quick to identify any changes in people's health or well-being. One relative told us, "Staff know when [Name] needs to see the doctor, they know her symptoms." Another relative said, "[Name] can see a GP quicker here than they could at home."
- People's oral healthcare needs had been considered and plans were in place to monitor and address

these.

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.

- The registered manager had identified those people who had restrictions within their care plans they did not have capacity to consent to. They had recently submitted five applications to the local authority as part of the DoLS authorisation process.
- However, mental capacity assessments were not always formally recorded within people's care plans. The provider had identified this as an area needing improvement and had introduced new mental capacity assessment forms. Training in completion of the forms was due to take place the day after our visit.
- Staff worked within the principles of the MCA and supported people in the least restrictive way. They knew they should assume people had capacity to make their own decisions and understood the importance of obtaining people's consent.

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

- Woodville House was previously a hotel and the provider had maintained the décor and original features which created a welcoming and inviting environment. Each bedroom had its own character and was reflective of the person's interests and personalities.
- There was some signage around the home to enable people with memory problems or confusion to find their way around independently.
- There was an accessible garden for people to sit and enjoy the warmer weather.

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 the rating has remained the same. This meant people were consistently supported or 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 caring. One person told us, "The staff are all very kind, they look after us well."
- One person had recently written in the provider's comment book, "Woodville is a happy place to live in. The staff are very kind and helpful, it's all like one happy family." Other comments included: "The staff are always welcoming and attentive" and, "I am always greeted with very caring and helpful care staff."
- Staff treated people with warmth and respect and generated a cheerful atmosphere through their approach to working with people. On several occasions we heard staff singing as they walked along the corridors and went about their duties.
- Staff were nurturing with people and attentive of their needs. They took care and attention to recognise little things that people enjoyed.
- The caring attitude extended to people's relatives. One relative whose family member had passed away at the home continued to visit daily. They told us, "[Name] used to live here until they passed away, but I come here every day for my meals so I'm not on my own. They look after me. I feel happy here, and I like coming here every day. I would describe it as excellent, it couldn't be better."
- Photographs of important events and outings were used to create collages displayed in reception such as one person's 101st birthday celebration. Crafted flowers were added to the displays demonstrating extra time, care and attention was paid to valuing people's memories.

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

- Staff had time to spend with people and involve them in decisions about their care. People spent their day in their preferred way.
- There were regular opportunities for people to give feedback on topics such as the quality of food and the value of activities at regular meetings run by the activities co-ordinator.

Respecting and promoting people's privacy, dignity and independence

- The provider modelled a respectful approach by providing people with a warm, inviting and well-maintained environment.
- Staff took time over people's appearance which promoted their dignity and made them feel valued. For example, ladies wore clothes, scarves and jewellery which reflected their personal choices and individuality.
- Care plans were clear what people could do for themselves to ensure they maintained as much independence as possible.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

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

- People's preferences were identified and included within care planning.
- People received personalised care by staff who knew them well. This was because staff had time to build relationships with people. One staff member said, "We have time to get to know people and what they want." One relative said, "Staff couldn't be more cooperative."
- Relatives told us staff were responsive and willing to listen. One relative told us, "Staff are always on hand if you have any questions or any concerns."

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 had plenty to do. One person said, "We have [Name] who is our activity lady. She is very good, and we do a lot of activities." Another person confirmed, "I am always doing something."
- The registered manager valued people's right to engage in activities that were diverse, varied, meaningful and responsive to their enjoyment. Activities such as exercise classes, craft-making and yoga encouraged physical movement, mental stimulation and social engagement.
- During our visit there was something for people to do all day if they wished to join in. In the morning people enjoyed a game of bingo and singing with a visiting entertainer. Staff were fully involved and encouraged people to participate. In the afternoon people were offered opportunities to engage in games or reading books with staff before most people joined in a general knowledge quiz.
- The activities co-ordinator spoke to people after events and activities to check whether they had enjoyed them and whether they had been of value to them. They used this information to plan future events in the home.
- The environment was interesting with lots of objects to engage and interest people, such as books and board games. There were also artefacts, pictures and photographs to stimulate reminiscence and conversation.
- Annual barbeques, themed Christmas parties and day trips were all planned in partnership with people, to maximise participation and minimise social isolation.
- People who practiced religion, were supported to do so and a monthly church service took place at the home.

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's sensory needs to support their understanding of information were recorded in their care plans.
- The registered manager told us information could be provided in different formats such as photographic or large print if a need was identified.

End of life care and support

- Staff worked with other healthcare professionals to support people at the end of their life to stay at Woodville House if they wished to do so.
- The registered manager told us that once a person had been identified as being at end of life, a specific care plan was put in place to ensure staff understood the care the person needed. However, the registered manager acknowledged they needed to seek people's views about how they would prefer their care to be delivered in their final days while they were still able to express them. They recognised this was an area for improvement.
- We spoke with one relative whose family member had recently received end of life care at Woodville House. They told us, "They looked after [Name] so well during her end of life. I'm very pleased. We had the wake here – it was fantastic. I was so moved."

Improving care quality in response to complaints or concerns

- The provider had a complaints policy and information on complaints was located in the reception to the home.
- The registered manager had received one formal complaint in the 12 months prior to our inspection visit which had been recorded and responded to in line with the provider's complaints policy.

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 good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- There was a positive culture in the service and both people and staff said they would recommend the service to others. One staff member said, "It's friendly, happy and homely, like a family. I would definitely recommend it to my friends or family. I wouldn't hesitate." This was confirmed by a relative who commented, "I'm delighted with the care that [Name] has received here, very happy."
- People were aware of who the registered manager was and felt comfortable to bring any concerns or issues to their attention. One person described the registered manager as, "Very nice, she is very kind, so are all the staff."
- Staff told us they felt valued and were given support and guidance to feel confident in their role. One staff member told us they enjoyed working at Woodville House because, "It is a very happy place and the management is very good. They have created a nice atmosphere and if I request anything they react immediately. They make sure there is a happy atmosphere."

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

- The registered manager had only been in post for 10 months at the time of our inspection visit. They had identified areas where they needed to consolidate their knowledge and understanding and taken action to address these.
- The registered manager worked closely with staff, so they had a good understanding of people's needs and any quality performance issues affecting the service.
- The registered manager had a system of checks and audits to identify where improvements were required.

Continuous learning and improving 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

- The provider had shared learning from issues identified at recent inspections of other services within the provider group. For example, improvements were being made to the documentation to support assessment of people's capacity under the Mental Capacity Act 2005. Arrangements were in place to cover radiators in bedrooms to reduce the risk of people being injured on hot radiators.
- Accidents and incidents were reviewed, and learning was shared and used to improve outcomes for people.
- Throughout our inspection the registered manager and staff team were open and welcomed our

feedback. For example, boxes of prescribed medicines that had recently been delivered from the pharmacy were kept in a cupboard off the dining room. When we identified the means of securing the cupboard were not robust enough, the registered manager immediately arranged for a new lock to be fitted.

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

- The provider valued people's engagement and their views on the quality of care provided at Woodville House. Results from regular quality satisfaction surveys for people, relatives and health professionals were positive overall and framed and displayed in reception.
- Staff regularly met with the registered manager, on a one-to-one basis, to discuss their work and identify any additional support they required.
- Any feedback on the service was reviewed by the registered manager to identify and address potential areas for improvement.

Working in partnership with others

- The registered manager worked with different healthcare professionals and organisations to ensure people received safe and effective care.
- The registered manager provided work experience opportunities for young people from a local college. Students from a local school regularly visited the home as part of their social services visiting programme.
- The activities co-ordinator had established links with a local community faith group which had provided further opportunities for social activity in the home.