

Akari Care Limited

# Wallace House

## Inspection report

Ravensworth Road  
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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: Wallace House is a nursing and residential care home that can accommodate 40 people. Care is primarily provided for older people, including people who are living with dementia. At the time of this inspection 38 people were living at the service.

What life is like for people using this service: Improvements had been made to the service following our previous inspection in October 2017. The registered manager had acted to ensure that the systems for assessing and monitoring the performance of the service were effective. The provider had made significant improvements to all aspects of the environment and they were in the final stages of a full refurbishment programme.

In September 2018 the provider introduced new training programmes and over three-quarters of the staff had already completed the mandatory training using these programmes. The registered manager made sure new staff completed a full induction and all the required training. Checks were made on the ongoing competency of staff.

The registered manager and staff had developed robust risk assessments and acted appropriately to mitigate any identified risks. The provider was redesigning assessments and the care records. They recognised more refinements to these documents were needed.

The cook was very knowledgeable and it was positive to hear they had received focus on under-nutrition training. Staff were encouraging people who were under-weight to eat fortified foods. However, at times catering staff found the budget did not allow for a full range of ingredients to be purchased to make fortified foods but the registered manager worked with them to make sure action was taken to obtain the necessary ingredients.

People participated in a range of activities that met their individual choices and preferences. Staff understood the importance of this for people and provided the structured support people required. This enabled people to achieve positive outcomes and promoted a good quality of life.

Staff effectively investigated and reported any safeguarding matters. The registered manager had acted on concerns, and complaints received by the service and had taken steps to resolve these matters. They ensured that all incidents were critically analysed and from this review lessons were learnt and embedded into practice.

All the people we spoke with told us that the registered manager and staff listened to their views, acted to resolve concerns, when needed, and met people's needs.

Rating at last inspection: Requires Improvement (report published 6 December 2017). This had been the third time the service was rated as requires improvement since July 2016.

Why we inspected: This was a planned inspection based on the rating at the last inspection. The service had improved and was rated Good overall.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received 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?

The service was safe.

Details are in our Safe findings below.

Good ●

### Is the service effective?

The service was effective.

Details are in our Effective findings below.

Good ●

### Is the service caring?

The service was caring.

Details are in our Caring findings below.

Good ●

### Is the service responsive?

The service was responsive.

Details are in our Responsive findings below.

Good ●

### Is the service well-led?

The service was well-led.

Details are in our Well-led findings below.

Good ●

# Wallace 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 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.

**Inspection team:** One adult social care inspector completed this inspection.

**Service and service type:** Wallace House is a care home. People in care homes receive accommodation and nursing or personal care. 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.

**Notice of inspection:** This inspection was unannounced and site visit activity was completed on 7 December 2018.

**What we did:** We reviewed information we had received about the service to plan the inspection. This included details about incidents the provider must notify us about, such as abuse; and we sought feedback from the local authority and professionals who work with the service. We assessed the 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.

**During inspection:** We spoke with 10 people who used the service and four relatives to ask about their experience of the care provided. In addition, we spoke with two healthcare professionals who visit the service. 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 spoke with the registered manager, the deputy manager, a nurse, five care staff, an activities coordinator, the cook, the maintenance person and a domestic staff member.

We reviewed a range of records. This included four people's care records, medication records and various records related to recruitment, staff training and supervision, the management of the service.

# Is the service safe?

## Our findings

Safe – this means people were protected from abuse and avoidable harm.

Good: People were safe and protected from avoidable harm. Legal requirements were met.

### Systems and processes

- The registered manager critically reviewed all aspects of the service and determined if improvements were needed.
- We saw the provider had robust procedures in place to ensure future recruitment was safe.

### Assessing risk, safety monitoring and management

- Staff understood where people required support to reduce the risk of avoidable harm. Care plans contained explanations of the control measures for staff to follow to keep people safe. The records used to monitor those risks such as for hydration, nutrition and pressure care were well maintained.
- The environment and equipment was safe and well maintained. A full refurbishment programme had nearly been completed at the service and this had significantly improved the environment. Emergency plans were in place to ensure people were supported in the event of a fire.

### Staffing levels

- The provider had recently instructed staff to assess everyone as being high dependency and add 10% onto the figures for their dependency calculations. This suggested the staffing tool itself was not effective.
- People and their relatives told us there were sufficient staff and they received care in a timely way. The registered manager made sure there were always sufficient staff on duty to meet people's needs.

### Safeguarding systems and processes

- The provider had effective safeguarding systems in place and all staff spoken with had a good understanding of what to do to make sure people were protected from harm or abuse. They had received appropriate and effective training in this topic area.
- People and their relatives told us how the staff maintained their safety. One person said, "The staff look after me really well and make sure I am always safe."

### Using medicines safely

- Medicines were safely received, stored, administered and destroyed, for example, where people refused to take them or they were no longer required. Where people were prescribed medicines to take 'as and when required' very detailed guidance was available for staff to follow.

### Preventing and controlling infection

- The provider had recently altered the laundry to comply with infection control guidance. They had created a dirty to clean flow by altering the laundry and installing another door.
- The number of domestic staff had been increased since the last inspection and this made sure sufficient staff were available to maintain the cleanliness of the service.

### Learning lessons when things go wrong

- The registered manager critically reviewed all incidents and ensured staff considered how lessons could be learnt. For example, the staff had reviewed how falls were managed and put new processes in which had led to a significant reduction in the number of falls people experienced.

# Is the service effective?

## Our findings

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

Good: 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

- The provider had introduced an assessment tool. This was a tick box assessment form, which did not allow staff to describe how the person's condition impacted them. We found this was not effective at assisting staff to record holistic information about people's needs. The registered manager explained issues with the assessment document had been shared with the provider and more work was being undertaken to improve the document.
- The registered manager and staff had recorded their assessments of people's needs in the care records. This information was detailed and clearly outlined people's needs. For example, when one person had moved to the service staff had quickly identified they were experiencing a form of depression. Within the first few days staff conducted and recorded a full assessment of the impact of this condition on all aspects of their care needs.
- The registered manager actively sought out information on current best practice and standards. They shared this with staff and made sure current guidance was followed.

Staff skills, knowledge and experience

- The staff had access to a wide range of training and the manager was endeavouring to make sure training was up to date. In September 2018 the provider introduced new training programmes and over three-quarters of the staff had already completed the courses.
- Staff had regular supervision and appraisals.
- The registered manager had a good system to understand which staff needed their training to be refreshed and who required supervision. Staff told us they felt supported.

Supporting people to eat and drink enough with choice in a balanced diet

- The cook was very knowledgeable and it was positive to hear they had received focus on under-nutrition training. At times catering staff found the budget did not allow for a full range of ingredients to be purchased to make fortified foods but the registered manager worked with them to make sure action was taken to obtain the necessary ingredients.
- Staff were encouraging people who were under-weight to eat fortified foods. They made sure all the people had access to healthy diets and that they had ample portions of food at meals.
- The provider had introduced a revised MUST tool, which was used to monitor whether people's weight was within healthy ranges. The registered manager was aware that tool needed to be improved, as it did not support staff to accurately identify if people were at risk of weight loss.

Staff providing consistent, effective, timely care within and across organisations

- People told us that the staff tried to make sure the service met their needs. One person said, "Staff are

always there when I need them and they all know how to help me."

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

- The provider was in the process of completing a full refurbishment programme and we saw that part of this redecoration involved ensuring the unit for people living with dementia was appropriately decorated in line with best practice guidance.

Supporting people to live healthier lives, access healthcare services and support

- People were seen by GPs when concerns arose and attended regular appointments with these healthcare professionals. The staff appropriately referred people to other healthcare professionals such as psychiatrists, speech and language therapists, the falls team and dieticians.

Ensuring consent to care and treatment in line with law and guidance

- We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- The registered manager followed all the principles and guidance related to MCA and DoLS authorisations. They were working with staff to make sure all staff completed capacity assessments appropriately.
- Staff ensured that people were involved in decisions about their care; and knew what they needed to do to make sure decisions were taken in people's best interests.

# Is the service caring?

## Our findings

Caring – this means that the service involved people and treated them with compassion, kindness, dignity and respect.

Good: People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported

- People we spoke with were happy with the care provided. Comments included: "All the staff are kind and caring", "We have good carers here. They go out of their way to help" and "They are all caring and respectful people."
- Relatives told us they thought the staff were very kind. All relatives we spoke with confirmed that they could visit whenever they wanted, were always made to feel welcome.
- The registered manager told us how they supported people's human rights and promoted equality and diversity. They actively promoted people's rights and made sure staff treated people in a person-centred manner.
- Staff showed genuine concern for people's wellbeing. It was evident from discussions that all staff knew people very well, including their personal history, preferences, likes and dislikes. We found that staff worked in a variety of ways to ensure people received care and support that suited their needs. People were encouraged to remain as independent as possible.

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

- Staff supported people to make decisions about their care. They understood people's communication needs and this was documented in care plans. Staff supported people to make decisions about their care and knew how to recognise when people wanted help.
- We saw that information about advocacy services was available, and when needed, the staff enabled people to access these services. Advocates help to ensure that people's views and preferences are heard where they are unable to articulate and express their own views.

Respecting and promoting people's privacy, dignity and independence

- The staff explained how they maintained the privacy and dignity of the people they cared for and told us that this was a fundamental part of their role. We saw that staff knocked on people's bedroom doors and waited to be invited in before opening the door.
- People we spoke with said their independence was promoted. Comments included: "The staff give me the confidence to try things for myself." A relative we spoke with said, "[Named person] has benefitted from being here, staff encourage them to do things and this has really helped them maintain their independence."
- We observed the staff team worked well together and with the people who used the service. Staff consistently engaged people in conversations and we heard lots of laughter throughout the visits. We found there was a calm relaxed atmosphere within the home.

## Is the service responsive?

### Our findings

Responsive – this means that services met people's needs.

Good: People's needs were met through good organisation and delivery.

How people's needs are met

- We observed that people were consistently asked to express their opinions about what was on offer and given choices about all aspects of their care and treatment.
- People and relatives told us that the activities coordinator was good at their job and people were listened to and engaged in day-to-day activities. One person said, "The activities coordinator is my friend, she is taking me to see Aquaman at the pictures."
- We found people were engaged in meaningful occupation and the activity coordinator had tailored the programme of activities to stimulate each person and entertain individuals. The activities coordinator organised a wide range of entertainment for people who used the service giving presentations about the local area, visiting local tourist attractions and quizzes.

Personalised care

- People and relatives told us care was delivered in the way they wanted and needed it.
- Care plans contained good personalised information such as how to determine if a person was experiencing hallucinations and how to support them with the negative impact of these experience. How to assist a person to reduce their risk of choking or aspirating on food and fluid. There were detailed plans with a step by step guidance for each identified need.
- People's needs were identified, including those related to equality and their choices and preferences were regularly reviewed. Reasonable adjustments were made where appropriate and the service identified, recorded, shared information and communication needs of people, as required by the Accessible Information Standard.

Improving care quality in response to complaints or concerns

- People had access to information on how to make a complaint and we read that where people had complained, these had been investigated and responded to. We asked people if they felt their concerns were responded to and overall people said that things were actioned immediately.
- All concerns, as well as any complaints had been acknowledged, investigated and responded to by the registered manager. People we spoke with told us any concerns were quickly addressed by the registered manager and resolved to their satisfaction.

End of life care and support

- People were supported to make decisions about their preferences for end of life care, and staff empowered people and relatives in developing care and treatment plans. Professionals were involved as appropriate.
- Staff understood people's needs, were aware of good practice and guidance in end of life care, and respected people's religious beliefs and preferences.

- The service provided specialist equipment and medicines at short notice to ensure people were comfortable and pain free.
- The service supported people's relatives and friends as well as staff, before and after a person passed away.

# Is the service well-led?

## Our findings

Well-Led – this means that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

Good: The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

### Leadership and management

- At the last inspection we found the quality assurance procedures in place lacked 'rigour'. Although some auditing and analysis was carried out, this was not always effective. For instance, the tool supplied for monitoring accidents and incidents did not assist staff to look at wider issues than a fall, so they were not considering if there were patterns or trends. The provider's governance system was not effective in identifying and addressing shortfalls.
- At this inspection we found the provider and registered manager had enhanced the governance systems. The registered manager completed in-depth reviews of all aspects of the care and treatment being delivered and made sure any gaps in practice were resolved.
- The registered manager and the culture they created effectively supported the delivery of high-quality, person-centred care.

Provider plans and promotes person-centred, high-quality care and support, and understands and acts on duty of candour responsibility when things go wrong

- People, relatives and staff told us they felt listened to and that the registered manager was approachable. Staff understood the provider's vision for the service and they told us they worked as a team to deliver high standards.
- Staff felt the manager closely listened to their views, took their comments on board and then, if appropriate implemented their suggested changes.
- The registered manager and staff demonstrated a commitment to provide person-centred, high-quality care by engaging with everyone using the service and stakeholders.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

- The registered manager and staff understood how to effectively monitor the quality of their performance and manage risks.
- The service was well-run. People at all levels understood their roles and responsibilities and their accountability. They were held to account for their performance where required.

Engaging and involving people using the service, the public and staff

- The provider and registered manager positively encouraged feedback and acted on it to continuously improve the service, for example by asking people about which activities they preferred and their views about how their bedrooms should be decorated.
- A healthcare professional commented, "Compared to the other homes we visit we feel this service

provides very high standards of service and they treat people with respect and dignity."

#### Continuous learning and improving care

- The quality assurance system included lots of checks carried out by staff, the registered manager and the regional manager. The registered manager critically reviewed all of the findings from the various audits and tools to identify where improvements could be made. They then ensured action was taken in a timely manner to address any issues raised. Following any change to practice the registered manager then reviewed these to determine if these alterations were having a positive impact for people who used the service.
- A culture of continuous learning meant staff objectives focused on this and improvement.

#### Working in partnership with others

- The registered manager and staff involved people and their relatives in day to day discussions about their care in a meaningful way.
- People, relatives and visiting professionals had completed a survey of their views and the feedback had been used to continuously improve the service.
- The registered manager had forged good links for the benefit of the service within the local community and key organisations. This engagement reflected the needs and preferences of people who used the service and also aided service development.
- The registered manager had actively engaged in the local manager's network and used information from the sessions to assist them to develop and enhance the service.