

# Supported Homes Limited Wrekin Villa

#### Inspection report

116 Wrekin Road Wellington Telford Shropshire TF1 1RJ

Date of inspection visit: 25 April 2019

Good

Date of publication: 31 May 2019

Tel: 01952240981

#### Ratings

Overall	rating fo	or this	service

Is the service safe?	Good •
Is the service effective?	Good •
Is the service caring?	Good •
Is the service responsive?	Good $lacksquare$
Is the service well-led?	Good •

#### Summary of findings

#### **Overall summary**

About the service: Wrekin Villa is a 'care home' registered to accommodate up to five people. At the time of this inspection the service was providing accommodation and personal care to five people with mental health care needs.

People's experience of using this service:

People told us staff fully understood their needs and were very kind and caring. People's individuality was promoted and staff had an excellent approach to raising awareness of dignity and cultural issues.

People felt safe and support was of a high standard.

Staff could recognise and report suspected abuse or poor practice. Managers were aware of the process to follow should an allegation be made.

People received appropriate support to receive their medicines as and when they needed them.

Risks to people were assessed and procedures were in place to help keep people safe.

People were protected from the risks associated with the control and spread of infection.

Staff understood the importance of ensuring people's rights were understood and protected.

People's individuality and diversity was celebrated.

People were supported to live independent lives with appropriate support where required.

People's health care needs were monitored and responded to promptly with cooperation and support from health and social care professionals.

There were sufficient staff to meet people's needs flexibly. Staff were well supported and very well trained.

Support was very personalised to meet individual's individual needs. People had opportunities to engage in activities that gave them a sense of self-worth and achievement.

People were confident that complaints would be addressed and they could talk to staff or managers about anything. Formal processes were in place should a person wish to raise a complaint.

People were very satisfied with the quality of the service provided and feedback from relatives, and visiting professionals was very positive.

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Quality checks and audits enabled the registered manager to ensure the service provided effective, safe and responsive care.

The management of the service was approachable and proactive to ensure the service met the needs of the people they supported.

The service had good community links that promoted inclusion.

Rating at last inspection: The service was rated Good at the last inspection in August 2016.

Why we inspected: This was a scheduled inspection based on the previous rating.

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.

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

#### 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	



# Wrekin Villa 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team: The inspection team consisted of one inspector.

Service and service type: Wrekin Villa is a care home which is registered to provide accommodation and personal care for up to five people with mental health care needs. 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: Inspection site visit activity was announced and started on 25 April 2019 and ended on 25 April 2019. We gave 24 hours short notice of the inspection site visit because we wanted to be sure people would be at home.

What we did: At the time of our inspection five people were living at the home. We reviewed information we had received about the service since the last inspection. This included details about incidents the provider must notify us about, such as abuse. We also assessed the

information that providers 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 used all this information to plan our inspection.

During the inspection, we spoke with two people who used the service to ask about their experience of the care provided. We also spoke with three relatives following the inspection.

We spoke with two members of staff and received written feedback from two others. We also spoke with the registered manager. We received feedback from a health care professional and a social care professional.

We reviewed a range of records. These included two people's care records. We looked at records relating to the general management of the service.

#### Is the service safe?

#### Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm

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

Systems and processes to safeguard people from the risk of abuse

•People told us they received safe support. Staff had received training to understand abuse and were confident to recognise and report it. A relative told us, "The most important thing is that [Person's name] is safe."

Assessing risk, safety monitoring and management

•People told us that risk assessments were carried out regularly and followed to help them remain safe in new situations. People understood the need for the assessments and were fully involved in deciding how to reduce risks. Risks were being managed effectively.

Staffing and recruitment

• There were enough staff to support people to receive the support they required. Staff provided flexible support at times when people needed it. People had developed very positive working relationships with staff and a core group of consistent staffing enabled this to happen.

•Staff confirmed they had been through a thorough recruitment process prior to starting work and the registered manager confirmed that all required checks had been made.

Using medicines safely

•People required minimal support to manage their medicines to keep them safe. One person told us they valued the support from staff to offer prompting and encouragement when taking medicines.

•One person told us how they were being supported to look after their own medicines. They were aware this had been risk assessed and was being discussed with health care professionals, so the process could happen safely.

•Support plans were in place to assist people to receive medicines taken as and when required. Records showed, that for one person, there had been a significant decrease in the amount of this medicine taken and requested. This demonstrated their health was improving.

- •Medicines were stored in a locked cupboard and people understood why this was necessary.
- •Staff were knowledgeable of their roles and responsibilities when administering and recording medicines and training had been delivered as well as ongoing competency checks.
- Senior staff audited records and any errors were well managed.

Preventing and controlling infection

• Staff told us they had received training in relation to infection control.

•People told us that staff took precautions to prevent the spread of infection. For example, one person told us that staff washed their hands before and after offering support.

Learning lessons when things go wrong

• The registered manager told us how they liaised with other service managers to discuss incidents and learn from them as a team.

•Accidents and incidents were reported and monitored by the registered manager and senior managers to identify trends and take action to minimise reoccurrence.

•Incidents were shared with staff and support plans were reviewed to reduce likelihood of reoccurrence where possible. For example, medicines received from the pharmacist had been found to be incorrect. This was picked up prior to administration but the registered manager introduced improved paperwork as a result. This meant that errors were picked up upon delivery to the home so prompt action could be taken. We saw this had happened on the day of our inspection, demonstrating the improved process worked effectively.

#### 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

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 •People's needs were assessed prior to them receiving a service and the information was used to decide if the home could meet the person's needs. One person told us they had been involved in this process and relatives we spoke with also confirmed this.

•Assessments informed care plans which were person centred. They contained details of people's diverse needs and aspects of their life that were important to them.

Staff support: induction, training, skills and experience

• People told us they were confident in the skills and knowledge of the staff. Staff said they received excellent training opportunities and training was relevant to their role. One staff member told us, "We received training in order for one person to administer their own medication. By doing this the person now has more freedom over their time." Staff received training in relation to an identified condition and because of their progress in supporting this person their health had significantly improved. The registered manager told us, "This has been an amazing achievement." A relative also reflected on the hard work by staff to support changes.

•One staff member told us about a course they had attended. It had directly affected the way they supported a person. As a result, they had a better understanding of why people did certain things. They shared this information with the team.

•One staff member told us, "I find the company inspiring and extremely supportive of their employees wanting to further their experience, development and training." Another staff member said, "I feel I am offered extensive training for anything I suggest."

•People who used the service, and the staff team, had received training to raise awareness of bullying and hate crime. People had received a booklet in an easy to read format to support and reinforce this training.

•New staff were supported in their roles with opportunities to work with existing staff and undertake a detailed induction programme.

•Staff told us they felt very well supported by each other and by the management team. One staff member said, "I feel well supported by my management and colleagues who are always available for advice and support even when they are not on shift." Another staff member said, "We have so much support. We are an excellent team and work closely together." Staff told us that peer support was invaluable as was the access to an independent counselling service.

•Staff received recognition for the work they did and this motivated and inspired them. For example, one staff member had been recognised by the team for fundraising and promoting community participation. They were proud to say they had won the award of support worker of the year. Staff also gained recognition for individual achievements and the provider had a facility where staff could nominate colleagues for specific pieces of work and this was shared among other staff to comment. One staff member had been

nominated for the 'going the extra mile award'. This was for supporting a person to connect with their family. The person's relatives told us how happy they were with the outcome of this.

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

- •Although staff did not support people with eating and drinking they were aware of people's dietary needs to ensure they could offer effective support to ensure their wellbeing.
- Staff told us how they promoted healthy eating but recognised people were able to make their own dietary choices.
- •People chose what they ate and where they ate their meals. Some enjoyed the social aspect of meal times and regularly got together with others to share a meal. Other people preferred meals in their rooms.
- Staff supported people with budgeting and making sure food was fit for consumption as well as supporting them to prepare meals for themselves and others.
- •Staff had recently organised a 'nutrition and hydration tea party'. People had completed questionnaires about the values of healthy eating to raise awareness. There was also information on a communal notice board about the benefits of drinking water.
- Staff told us how they had supported one person to learn to cook. This had had a positive impact on the person's diet and health.

Staff working with other agencies to provide consistent, effective, timely care

- Staff told us they worked closely with outside agencies to ensure people's needs and changing circumstances were shared when appropriate.
- •We spoke with a health and a social care professional who told us that they worked very effectively with staff and managers to ensure people received good outcomes. One professional told us, "They take on board suggestions and are very easy to talk to."

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

- •People received only minimal support and were largely independent in relation to managing their health care needs. However, staff worked closely with people and ensured that when their health needs changed, they were signposted to request the appropriate support. This joint working meant that people could live as independently as possible within the community.
- •Records reflected when routine health appointments were attended and staff updated records if and when people fed back to them following a visit.
- The registered manager told us how they had worked with health care professionals to support a person to reduce their medicines. Because of this, the person had an improved quality of life.

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. We checked whether the service was working within the principles of the MCA and found they were.
- •People living at Wrekin Villa all had capacity to make their own decisions about all aspects of their lives. They told us however that they listened to staff guidance and advice to ensure they made informed decisions.
- •Staff spoke about the dilemmas in relation to supporting people's choices but ensuring they carried out their duty of care. They shared examples where they had discussed issues with managers to ensure they were acting in the best interests of the people they supported.

•When one person refused some identified support, we saw staff discuss this with the registered manager who explained to them that it was the person's choice and then identified what action they had to take in relation to documenting how support had been offered. This action was in line with the person's care and support plan.

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

- Wrekin Villa provided a homely environment where people told us they felt 'at home'.
- •People told us they had had input into redesigning the home and choosing new furniture and décor. One person told us they were very happy with the finished result.
- One person was proud to show us their room and explained how they had personalised it to their individual tastes.
- •People told us they came and went as they pleased and there were no restrictions placed upon them. People had their own house keys.

#### 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

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

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

•One person told us, "The staff are lovely. They always talk nicely to me." Another person said, People here are nice. Staff are nice."

•All staff undertake equalities training and work with professionals to support people express their individuality. Support is then personalised to reflect those needs and one person told us staff knew their needs well. Staff told us they encouraged and promoted individual self-expression and then signposted people to the appropriate support as required. One person told us, "Staff treat us with respect. They are good."

• There was a very strong visible person-centred culture within the home that celebrated people's backgrounds. For example, people enjoyed a 'Mexican night' and celebrated Chinese New Year. Staff saw the celebration of diversity to be a positive and enjoyable experience. Staff also demonstrated how they had broken down cultural and religious barriers with people who used the service resulting in excellent working relationships and better understanding. Staff told us how they had celebrated people who used the service's cultural heritage by promoting appropriate food. On one occasion this involved sourcing someone who could cook and prepare it, purchasing the food to try and then cooking the food themselves with selected recipes.

•People were supported to express their sexual identity and staff had sourced information to share with people to assist them to better understand differences and changes. This meant people, and staff had a better understanding of people's individuality.

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

- •One person told us they were fully involved in making decisions about their care. They had detailed plans in place for safe support and said they had agreed to them. They told us, "I feel involved and consulted. Staff are very approachable."
- Care records reflected that people had been involved and consulted and agreements were documented.

Respecting and promoting people's privacy, dignity and independence

•Both people we spoke with said that staff always respected their privacy. They gave examples of how staff knocked on doors and waited to be invited in. We heard staff ask a person if they would like to go somewhere private to receive their medicines.

•Staff told us that every month they focussed on a different aspect of care to explore. They recently looked at dignity and what it meant to people. People who used the service made 'footprints in the sand' and wrote on them what dignity meant to them. Staff then reflected on the outcome and had a better understanding about what dignity meant to different people. One person said that dignity meant 'understanding' and we saw numerous examples of how staff had sought information and support to better understand the person

who said this.

•People told us that staff always promoted their independence by being available for support but not doing things for them. They told us their independence was very important and they were happy with minimal support as required. People recognised that becoming independent was a step towards having their own homes and people were aspiring to this. Staff understood the importance of people doing things for themselves and they actively encouraged it.

#### Is the service responsive?

## Our findings

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

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

Planning personalised care to meet people's needs, preferences, interests and give them choice and control • People told us they were involved in the development of their support plans and in developing and implementing their risk assessments. One person told us, "I feel involved."

• Support was personalised, and we saw how people's involvement was central to this.

- Staff told us that it was important to understand people's life histories to enable them to fully understand their current situations. Plans we saw were very detailed.
- •People's needs and preferences about how they wished to be supported with their medicines, for example, were clearly recorded and staff knew how to offer support safely and why it was important.
- •People were supported to attend one to one sessions known as 'time to change' which focussed on supporting people with their mental health and wellbeing issues.
- Staff supported people to develop their self-worth by encouraging them to give back to the community. They actively did this by raising money for charities. For example, everyone had recently walked up the Wrekin to raise money for a mental health awareness charity. This had been a significant achievement for one person who used the service and staff celebrated this.
- •Staff had produced a book called 'Our Journey' which showed in words and pictures achievements of the people who used the service, some personal and some community based. Pictures reflected a community presence and a significant amount of money had been raised for charity. People were proud of these achievements and so were the staff team. People told us how they enjoyed the events as positive social occasions.
- •People told us they enjoyed in house activities also. They told us they liked watching DVDs together and other social opportunities that took place.

Improving care quality in response to complaints or concerns

- There was a complaints procedure in place that was easy to follow and readily available to people. People were confident they would be listened to if they had a concern or a complaint.
- •One person told us "I don't need a formal process I can talk with staff and managers any time and I know they will listen."
- •We also saw compliments from social care professionals saying how supportive the staff team had been and what a positive impact it had had on people who used the service.
- •People who used the service had access to a website where they could record complaints. This was accessible to people should they need to use it.

End of life care and support

• There was no one using the service who required end of life support. The registered manager was aware of the need to gather such information but was mindful of the impact such discussions may have. Some

people had documented their thoughts and wishes meaning their wishes could be followed when they were no longer able to express them.

#### 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

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

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

• The registered manager worked flexibly with their team to ensure the service was delivered based around the needs of individuals.

• The registered manager was aware of their responsibility to be open and transparent with addressing issues and investigating complaints. This was in accordance with the Duty of Candour. The Duty of Candour is a regulation that all providers must adhere to. Under the Duty of Candour, providers must be open and transparent, and it sets out specific guidelines providers must follow if things go wrong with care and treatment.

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

- •The registered manager understood the responsibilities of their role and acted in accordance with them.
- •Notifications of incidents, events or changes that happen to the service were sent to us within a reasonable timescale and as required by law. These included safeguarding referrals and notifications of injury or police incident.
- The provider had audit and quality monitoring systems in place that identified any concerns relating to the safety and quality of the service. We saw that risk assessments had been recently audited and areas of improvement identified. We saw that training had been developed to address this learning need.
- •External audits had been acted upon.

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

•People who used the service and staff told us how they felt fully involved and consulted in relation to how their support was delivered. Staff had opportunities, both informal and formally to discuss issues and make suggestions for improvements and changes.

- People's views and opinions were valued. One person told us, "I feel involved. We have resident's meetings and we are asked if we have any ideas or any issues."
- The provider used people who used the service to review quality in other services. This meant the service could be considered from the perspective of an independent person who also used a similar service.
- People found the management team and the staff to be approachable, so they felt comfortable to share ideas and opinions.
- Surveys were carried out annually to gather people's views of the service. The latest survey had produced positive outcomes and reflected people's satisfaction about the service provided. The service scored highly

in relation to staff values, learning and development and vision.

Continuous learning and improving care

• Staff told us they were encouraged to share ideas They said that staff voice was important and there were numerous ways they were encouraged to share views. A staff member told us, "My manager makes me feel open to voice new ideas and opinions." Another staff member said, "(They are) the best management team I've ever worked for. It's an amazing place to work."

• The registered manager told us how incidents were reviewed and discussed in staff teams. Staff confirmed this. Accidents and incidents were also reviewed by the provider's health and safety team and the quality department. Actions plans were developed when necessary and compliance with them was monitored to drive improvement.

•Staff excellence was rewarded, and we saw how individuals had received awards for their input into delivering a high-quality service.

#### Working in partnership with others

• The manager worked in partnership with health and social care professionals to achieve good outcomes for the people who received a service. These included the local authority safeguarding team, GP's and community nurses. A health professional told us they had worked successfully with staff at Wrekin Villa to achieve, "Hugely positive outcomes" for one person who used the service. They told us staff and managers communicated well and listened and followed guidance and support.

• The service had recently received the gold star award for Investors in People. This is an award that leads the drive for better leadership and communication in the workplace.