

Fountain Care Limited

The Willows Care Home

Inspection report

1 The Ridgway
Sutton
Surrey
SM2 5JX

Tel: 02086617653

Website: www.fountainlovingcare.co.uk

Date of inspection visit:
08 February 2023

Date of publication:
10 March 2023

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

The Willows Care Home is a residential care home providing accommodation and personal care to support up to 7 adults with a learning disability and/or autism. At the time of our inspection 6 people were using the service.

People's experience of using this service and what we found

We expect health and social care providers to guarantee autistic people and people with a learning disability the choices, dignity, independence and good access to local communities that most people take for granted. Right support, right care, right culture is the statutory guidance which supports CQC to make assessments and judgements about services providing support to people with a learning disability and/or autistic people. We considered this guidance as there were people using the service who have a learning disability and or who are autistic.

Right Support

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 focused on people's strengths and promoted what they could do, so people had a fulfilling and meaningful everyday life. People were supported by staff to pursue their interests. Staff supported people to achieve their aspirations and goals. The service gave people care and support in a safe, clean, well equipped, well-furnished and well-maintained environment that met their sensory and physical needs. People had a choice about their living environment and were able to personalise their rooms. Staff supported people with their medicines in a way that promoted their independence and achieved the best possible health outcome.

Right Care

Staff promoted equality and diversity in their support for people. They understood people's cultural needs and provided culturally appropriate care. People received kind and compassionate care. Staff protected and respected people's privacy and dignity. They understood and responded to their individual needs. Staff understood how to protect people from poor care and abuse. The service worked well with other agencies to do so. Staff had training on how to recognise and report abuse and they knew how to apply it. People could communicate with staff and understand information given to them because staff supported them consistently and understood their individual communication needs. People received care that supported their needs and aspirations, was focused on their quality of life, and followed best practice.

Right Culture

People led inclusive and empowered lives because of the ethos, values, attitudes and behaviours of the management and staff. People received good quality care and support because trained staff and specialists could meet their needs and wishes. Staff placed people's wishes, needs and rights at the heart of everything they did. People and those important to them were involved in planning their care. Staff evaluated the

quality of support provided to people, involving the person, their families and other professionals as appropriate. The service enabled people and those important to them to work with staff to develop the service. Staff valued and acted upon people's views.

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 16 November 2017).

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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.

The Willows Care Home

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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

This inspection was undertaken by 1 inspector.

Service and service type

The Willows Care Home is a 'care home'. People in care homes receive accommodation and personal care as a single package under one contractual agreement dependent on their registration with us. The Willows Care Home is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We met the 6 people living at the service. People had limited verbal communication, however, we met and interacted with the people living at the service. We met the six care workers on duty and spoke with three of them. In addition, we spoke with the deputy manager and the manager providing support whilst the registered manager was on leave. We undertook observations of the environment and interactions between people and staff. We reviewed two people's care records and records relating to staffing and the management of the service. After the site visit we gathered further information regarding staff training and the management of the service. We also received feedback from two people's relatives.

Is the service safe?

Our findings

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

At our last inspection we rated this key question good. At this inspection the rating has remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so. A relative told us, "I have no concerns about [their family member's] safety."
- Staff had training on how to recognise and report abuse and they knew how to apply it.

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well. Staff did not use physical restraint to restrict people and always tried for the least restrictive option when supporting people. At times staff used chemical restraint when people were very distressed. This was regularly reviewed and only used when more than one staff member felt it was appropriate for the person, and in line with advice from healthcare professionals.
- Staff could recognise signs when people experienced emotional distress and knew how to support them to minimise the need to restrict their freedom to keep them safe. We observed staff supporting people with compassion when they were distressed. Staff were aware of what triggered an emotional response from people and tried to minimise these triggers as much as possible, for example, reducing noise levels.
- People, including those unable to make decisions for themselves, had as much freedom, choice and control over their lives as possible because staff managed risks to minimise restrictions. Staff were aware of the risks to people's safety and supported people to minimise those risks. Staff worked with the provider's behaviour support specialist to develop positive behaviour support plans for each person.
- People's care records helped them get the support they needed because it was easy for staff to access and keep high quality care records. Staff kept accurate, complete, legible and up-to-date records, and stored them securely.
- Staff managed the safety of the living environment and equipment in it well through checks and action to minimise risk.

Staffing and recruitment

- The service had enough staff, including for one-to-one support for people to take part in activities and visits how and when they wanted.
- The numbers and skills of staff matched the needs of people using the service.
- At the time of our inspection the service was reliant on the use of agency staff. As much as possible these were regular agency staff who had worked at the service for a period of time and had got to know people well. We spoke with one agency worker who had quickly got to know people's routines, their interests and support needs.

- Safe recruitment practices were in place to ensure people were supported by suitable staff. This included obtaining more than one reference, checking people's eligibility to work in the UK and undertaking criminal records checks.

Using medicines safely

- The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles.
- People were supported by staff who followed systems and processes to prescribe, administer, record and store medicines safely.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

- There were no restrictions in place and people were free to have visitors as and when they wanted. Relatives confirmed they were able to visit regularly. One relative said, "I'm extremely welcome when I come. I feel extremely comfortable when I'm there."

Learning lessons when things go wrong

- The service managed incidents affecting people's safety well. Staff recognised incidents and reported them appropriately and managers investigated incidents and shared lessons learned.
- When things went wrong, staff apologised and gave people honest information and suitable support.

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 our last inspection we rated this key question good. At this inspection the rating has remained good. 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

- Staff completed a comprehensive assessment of each person's physical and mental health either on admission or soon after.
- Staff completed functional assessments for people who needed them and took the time to understand people's behaviours.
- Care plans reflected a good understanding of people's needs, including relevant assessments of people's communication support and sensory needs.

Staff support: induction, training, skills and experience

- People were supported by staff who had received relevant and good quality training in evidence-based practice. This included training in the wide range of strengths and impairments people with a learning disability and or autistic people may have, communication tools and positive behaviour support.
- Updated training and refresher courses helped staff continuously apply best practice
- Staff received support in the form of continual supervision, appraisal and recognition of good practice.

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

- People received support to eat and drink enough to maintain a balanced diet.
- People were involved in choosing their food, shopping, and planning their meals. We observed staff supporting a person in the kitchen during the morning to pick out their breakfast. At lunchtime, a staff member showed people the different options for lunch so people could visually see what was available to help them make an informed choice about what they would like.
- When people were able to, staff supported them to be involved in preparing and cooking their own meals in their preferred way. One person had been assessed as safe to use kitchen equipment and were able to make simple meals such as omelettes.
- People were able to eat and drink in line with their cultural preferences and beliefs. Separate kitchen equipment, fridges and food was available for people who had a halal diet.

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

- People were supported to access healthcare professionals in a timely manner, this included supporting them when they expressed that they were in pain or discomfort or showing signs of an infection.
- People had health actions plans which were used by health and social care professionals to support them in the way they needed.

- People were supported to attend annual health checks, screening and primary care services.

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

- People personalised their rooms and were included in decisions relating to the interior decoration and design of their home. People were supported to go to DIY shops with staff to pick out paint colours and accessories for their rooms.
- The environment was homely and stimulating. The service was a large family home that had a range of communal areas and large en-suite bedrooms for people to use.
- The design, layout and furnishings in a person's home supported their individual needs. People's rooms had been adjusted to meet their needs. This included installing overhead hoists when required or reducing sensory stimulation for those that needed a calmer environment to support their needs.

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 MCA 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- Staff knew about people's capacity to make decisions through verbal or non-verbal means and this was well documented.
- For people that the service assessed as lacking mental capacity for certain decisions, staff clearly recorded assessments and any best interest decisions.
- The service had liaised with the appropriate authorities to deprive people of their liberty to ensure their safety under the DoLS process. Staff organised for these arrangements to be regularly reviewed to ensure they remained appropriate for each person.

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 our last inspection we rated this key question good. At this inspection the rating has remained good. This meant 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

- Staff saw people as their equal and created a warm and inclusive atmosphere. A relative told us, "The care has been extraordinary... The staff are amazing and know [their family member] well."
- People received kind and compassionate care from staff who used positive, respectful language which people understood and responded well to. Staff were working with one person to improve their interactions with others, including staff and other people using the service. A reward chart was in place to recognise positive behaviour and the use of respectful language.
- Staff were calm, focussed and attentive to people's emotions and support needs such as sensory sensitivities.

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

- People were given time to listen, process information and respond to staff and other professionals.
- Staff supported people to express their views using their preferred method of communication.
- People were enabled to make choices for themselves and staff ensured they had the information they needed. A staff member told us, "Irrelevant of their need and ability they all get to choose what they wear every day...I don't think there's anything they don't have a choice over." A relative said, "100% [their family member] is involved and included in their care."

Respecting and promoting people's privacy, dignity and independence

- People had the opportunity to try new experiences, develop new skills and gain independence. Staff supported people with skill development and lead an engaged and meaningful lifestyle.
- Staff knew when people needed their space and privacy and respected this. Each person had their own en-suite bedroom and we observed staff knocking and asking for permission before entering people's rooms.

Is the service responsive?

Our findings

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

At our last inspection we rated this key question good. At this inspection the rating has remained good. 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

- Support focused on people's quality of life outcomes and people's outcomes were regularly monitored and adapted as a person went through their life. Staff had supported people to achieve meaningful outcomes. They had supported one person to become stronger and more confident with their mobility and this person was now able to walk short distances independently. They had supported another person with their physiotherapy exercises and had incorporated these into the person's daily routine to build their strength and they were becoming more mobile. A relative told us, "They are very good with the exercises and anything that is suggested by the physio's they implement."
- Staff provided people with personalised, proactive and co-ordinated support in line with their communication plans, sensory assessment and support plans. Support plans were regularly reviewed to ensure they were appropriate and continued to meet people's needs.
- The service met the needs of people using the service, including those with needs related to protected characteristics.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- Staff ensured people had access to information in formats they could understand. Staff told us how they were working with one person who found it difficult to understand the concept of time and when things were happening. Staff had introduced a colour clock which had a red and green section which helped the person to understand when things were happening. Staff also used social stories to help communicate with people in a way they understood. Staff used social stories with one person to help explain that their relatives were going on holiday and that was why they would not have as frequent visits from them but that they would see them after their holiday.
- Staff had good awareness, skills and understanding of individual communication needs, they knew how to facilitate communication and when people were trying to tell them something. Staff were able to interpret for us people's non-verbal communication so we could understand what people wanted us to do and what they were communicating to us.
- People had individual communication plans that detailed effective and preferred methods of communication, including the approach to use for different situations. Staff were working with one person to go through flash cards to develop their vocabulary and communication skills.

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 were supported to participate in their chosen social and leisure interests on a regular basis. People had meaningful, busy lives engaging in a range of activities. Staff supported people to attend activities in the community and had started to build links with other services supporting people to build social friendships.
- The current recruitment difficulties the provider was experiencing was impacting on people's access to some activities, due to difficulties recruiting staff who could drive the service vehicles. The provider was working on this to minimise the disruption to people.

Improving care quality in response to complaints or concerns

- People, and those important to them, could raise concerns and complaints easily and staff supported them to do so. No complaints had been raised in the previous 12 months. Relatives confirmed they felt able to speak openly with staff if they had any concerns and were confident appropriate action would be taken to address those concerns.

End of life care and support

- At the time of our inspection people did not require support with end of life care. However, staff told us they would liaise with people, their relatives and relevant healthcare professionals should this level of support be required to ensure people wishes were respected and incorporated into any advanced care plans.

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 our last inspection we rated this key question good. At this inspection the rating has remained good. 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

- Management were visible in the service, approachable and took a genuine interest in what people, staff, family and other professionals had to say. The management team had been re-structured since our last inspection to include a deputy manager who worked as part of the staff shift pattern and worked directly with people. This gave them greater knowledge of experiences of staff and enabled them to offer additional managerial support when on shift, particular at weekends.
- Staff felt respected, supported and valued by senior staff which supported a positive and improvement-driven culture. One staff member told us, "I wake up every morning and can't wait to go to work." Another staff member said, "The managers are really supportive, really attentive. They are here for us. I always get help from managers."
- Managers set a culture that valued reflection, learning and improvement and they were receptive to challenge and welcomed fresh perspectives. Staff from all levels were invited to an away day with staff from the provider's other homes to discuss what was important for staff and these ideas were incorporated into the provider's strategy, vision and values.
- Management and staff put people's needs and wishes at the heart of everything they did. A staff member said, "It is their [people's] home. It isn't a home"

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

- People, and those important to them, worked with managers and staff to develop and improve the service. Feedback from people, relatives and staff was sought formally and informally, and used to develop the service. The provider had recently sent out satisfaction surveys to gather people's views and these were in the process of being analysed.

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 service apologised to people, and those important to them, when things went wrong
- Staff gave honest information and suitable support, and applied duty of candour where appropriate.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- The registered manager had the skills, knowledge and experience to perform their role and a clear

understanding of people's needs of the services they managed.

- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support. There was a regular programme of audits to review key service areas and ensure high quality, safe care was provided.
- Staff were committed to reviewing people's care and support on an ongoing basis as people's needs and wishes changed over time. There was regular review of people's support plans and their care needs. Staff supported people to attend reviews with the healthcare professionals involved in their care and the outcome of these meetings was incorporated into people's support plans.
- Senior staff understood and demonstrated compliance with regulatory and legislative requirements.

Working in partnership with others

- The provider engaged in local forums to work with other organisations to improve care and support for people using the service. The service was beginning to build links with other local services that supported people with similar needs to provide a wider social network for people and to develop peer support networks.
- The provider was involved in provider engagement groups organised by the Local Authority which aimed to help improve care services in the local area.