

The Riverside Group Limited

Willowbrook

Inspection report

Willow Brook
Spout Lane
Washington
Tyne And Wear
NE37 2AG

Tel: 03451559039

Date of inspection visit:
09 March 2020
10 March 2020

Date of publication:
21 May 2020

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?	Outstanding ☆
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

Willowbrook is an extra care housing service. People using this service lived in their own apartment within one large building. The building comprised of 79 individual apartments.

Not everyone living at Willowbrook received personal care. The Care Quality Commission only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. At the time of inspection 59 people were in receipt of the service.

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

People experienced care which was exceptionally person-centred, placing great emphasis upon ensuring people lived the best lives they could. Feedback received from people, their relatives and visiting professionals described how the service had impacted positively on people's lives. One person told us, "I am doing things now I would never have done before. Since living here I've grown in confidence which makes things happen." They told us their level of confidence and greater independence was as a result of the outstanding effort and level of care and support they received from staff.

People and their families told us they were involved in the decisions made about the care they received. Care plans were reviewed on a regular basis and where necessary changes to people's care was made. People were supported to maintain both family and personal friendships both internal and external to the service. The provider had a complaints policy in place and any complaints had been handled in line with their policy.

People told us they felt very safe living at the service, and they were protected from abuse. Assessments had been completed and reviewed to make sure people and the environment were safe. People's medicines were handled safely. New staff were recruited safely, and enough staff were employed to support people. The service was very clean, tidy and staff had access to adequate amounts of gloves and aprons to support with infection control.

People's needs were fully assessed before they received their package of care. People received care from staff who were skilled and experienced to care for people.

Staff received regular supervision sessions to support them in their role. People were supported to eat and drink enough to maintain a healthy lifestyle. Where necessary staff referred people to their GP, and other medical professionals to make sure people were supported to remain well. People had access to a variety of communal areas within the service. This included an on-site restaurant/dining area, a well-furnished lounge area.

Staff cared for people with a great level of care and respect. Staff knew the people they cared for very well.

The registered manager, deputy manager and all staff had a very good understanding of their roles and responsibilities. All staff had a good working relationship with various external professionals who supported them to care for people well. Visiting professionals were very complimentary about the service. They told us, "The staff here genuinely care for people. They know people so well. I have peace of mind for my clients who live here. I only wish the service was bigger." The registered manager told us how the service was seen as a 'flagship service.' This was due to the level and model of care provided. Staff had recently been nominated for the British Care Awards and had been successful in getting through to the finals later in the year. People, their relatives and staff told us the service was very well-led and spoke highly of the registered manager, stating they were approachable; caring; lead by example and were a very visible presence in the service. Staff told us they felt valued, supported and listened to in their role.

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

Rating at last inspection

The last rating for this service was good (published 22 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?

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 exceptionally responsive.

Details are in our responsive findings below.

Outstanding ☆

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

Willowbrook

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 one inspector.

Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is bought or rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support.

The service had a registered manager. A registered manager is someone who, along with 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 announced. This was to make sure people would be at home to allow us to be able to talk with them.

What we did before the inspection

We reviewed information available to us since the last inspection. This included details about incidents the provider must notify us about, such as abuse. We sought feedback from commissioners and professionals who work with the service, including the local authority safeguarding adults' team. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

We also contacted Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

During the inspection

We spoke with the registered manager, the deputy manager, six care staff and two visiting professionals. We spoke with six people and five relatives. We reviewed a range of records. This included two people's care records and various medication records. We looked at records related to the management of the service.

After the inspection

We continued to receive information from the registered manager to confirm the inspection findings. We also spoke with one other visiting professional via the telephone.

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 were protected from abuse. Without exception every person we spoke with, told us they felt very safe living at the service. One person told us, "Staff care for me so safely. The care I get is second to none."
- The provider had a safeguarding policy in place which was regularly reviewed. Safeguarding issues had been logged and notified to the local authority.
- Staff were confident in their ability to identify and action any safeguarding issues. They told us they had received regular training in this topic to support their understanding. Staff were very confident regarding how to recognise and address any safeguarding issues.
- Every relative we spoke with told us people received safe care. One relative told us, "I am very happy and confident to go home as I know [person's name] will be well looked after."

Assessing risk, safety monitoring and management

- Risks to people's health and safety were assessed and managed.
- All accidents and incidents were recorded and reviewed by the registered manager and deputy manager. Appropriate actions had been identified and followed up. Incidents and accidents had also been shared with the local authority.
- Appropriate safety checks of the premises were carried out on a regular basis.

Using medicines safely

- People's medicines were managed safely.
- Staff who administered or supported people to take their medicines had received appropriate training and had their competency in this area checked. Staff told us they felt confident to administer people's medicines. People told us staff supported them with their medicines and these were given on time.
- The registered manager completed regular audits of people's medicine administration records to promote the application of best practice in medicines management by staff.

Staffing and recruitment

- Staffing levels were appropriate to meet people's needs. Where there was a change in people's needs, staffing levels were reviewed. One person told us, "The staff here have never let me down, they have never missed one of my calls."
- The provider had a safe recruitment process in place. This ensured only suitable staff were employed to work within the service.

Preventing and controlling infection

- Robust infection control procedures were in place. Staff had received training in infection control which

they applied in practice in their roles.

- Staff had access to personal protective equipment including gloves and aprons to help prevent the spread of infection.

Learning lessons when things go wrong

- Incidents and accidents were reviewed and used as a point of learning in an effort to prevent any re-occurrence.

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 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 needs were fully assessed before moving into the service.
- People and their relatives had been involved in the creation of care plans.
- Care plans included information which supported staff to care for people how they wished. Information included people's health details, people's likes and dislikes along with people's interests.

Staff support: induction, training, skills and experience

- Staff had the appropriate skills and experience to care for people.
- Staff told us they received regular training and records confirmed this. Newly employed staff attended an induction programme along with shadow shifts before working in the service.
- Every person, their relatives and visiting professionals we spoke with, told us all staff had the right level of skills and experience to care for them safely. Comments included, "Staff definitely have the right skills to care for us, if they didn't, they wouldn't be working here!" and, "The staff here are great. They treat me like family, and they know me better than I know myself." One visiting professional told us, "The staff here genuinely care for people. They know people so well. I have peace of mind for my clients who live here."

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

- People were supported and encouraged to eat a healthy diet. Where assistance was required staff would prepare or support people to prepare meals of their choice.
- People had access to an on-site restaurant and people told us they made good use of this facility.
- Where required staff monitored people's weights. If any concerns were identified with people's eating or drinking they were referred to the appropriate healthcare professionals for their input and guidance.

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 various external agencies to make sure people received effective care. This included working with occupational therapists, district nurses, and social workers.
- People and their relatives told us staff were very quick to contact other healthcare services if people were unwell. One person told us, "Staff will contact my GP if I ask them to or if they think I am unwell."
- Where changes in people's needs were identified, staff referred people to the appropriate healthcare professionals for their advice and assessment.

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, 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. When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA and whether these principles were being met.

- Where people lacked capacity, records showed capacity assessments had been completed and decisions had been made in people's best interests.
- Staff had a very good understanding of the MCA and applied this throughout their work.

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 this key question has remained the same. 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

- People received care from dedicated staff who supported and cared for them very well. One person told us, "The staff here are brilliant. The atmosphere isn't one of carers and residents, it's like family – we work alongside each other." Another person said, "I love it here. The staff are lovely. I wake up every day and I feel like I am on my holidays – I truly love it."
- A lot of staff had worked in the service for a considerable length of time and their knowledge and understanding of the people they cared for was very clear. Throughout the inspection, every member of staff, regardless of their role, were seen to engage and interact with people with genuine affection. One relative told us, "I totally would recommend Willowbrook. This place is a safe and relaxing place to live – there is a real sense of community and they treat all their clients and relatives as part of one big family."

Respecting and promoting people's privacy, dignity and independence

- People's dignity and independence were respected and promoted. People were encouraged to be as independent as they could. People told us, "I have changed so much since coming here, I am so much more independent" and "The care I get here is much better than I have had before. I am getting more and more independent and I can now go out on my own."
- People told us staff were very respectful in all aspects of their care and they made sure people's dignity was maintained at all times.

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

- People were involved in decisions about their care. Care plans included lots of information about people's likes and dislikes, what was important to them and how they wanted to be supported in their life. People told us staff discussed their care with them on a regular basis
- Relatives told us they felt very involved with their loved one's care.
- At the time of inspection no one was supported by an advocate. However, the registered manager told us information regarding advocacy services was available for people to access if needed.

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 improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- People received an exceptional level of person-centred care. Staff knew the people they cared for extremely well as they had taken time to get to know each person individually. This included details around people's life history, their families, their working life, what was important to people in the past, in the present and in the future. This approach had resulted in people feeling truly valued by staff who cared for them, with many people telling us they seen staff, not just as staff, but as much valued friends. Relatives also spoke very highly about the level of personalised care people received. One relative told us, "[Person's name] sometimes gets a bit 'down in the dumps.' The staff know exactly what to do to get [person's name] feeling better. As soon as staff walk through that door, people living here are their priority."
- Great care and emphasis was placed upon people achieving, living and leading the best possible life they could. One person living at the service told us how much their life had changed since coming to live at Willowbrook. Prior to living at Willowbrook, they told us their personal goals had seemed unachievable to them. However, with the encouragement and excellent support from dedicated staff, this person had begun to believe in themselves which had allowed them to grow in confidence and self-belief. As a result, this person had achieved their goals of becoming more independent across various aspects of their life.
- The registered manager shared with us how the service was seen as an important and integral part of the local community, and how much people living in the service were proud of their local heritage. One person told us, "We've got the best carers in the north east. They always spend time listening to us, listening to our stories."
- The registered manager proudly told us how the service had recently been chosen by the local commissioning authority to trial a new technology system. This system supported staff to monitor people's health, thus ensuring any potential needs were identified at any early stage. One visiting professional was very complimentary about the service and the exceptional approach and attitude of staff, they told us, "They are so flexible in their approach, they are always open to try new things."
- People's care plans were reviewed and updated on a regular basis.

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 maintain and develop relationships which were important to them.
- The management team organised a range of activities for people to join in. This included coffee mornings, film days, choir singing and card making. One relative told us, "There is always so much going on for people to join in – it's fantastic."
- The service had forged good community links which included a local children's gardening club, who were

regular visitors to the service.

Improving care quality in response to complaints or concerns

- Complaints had been handled appropriately and in line with the provider's own policy.
- Every person we spoke to told us they had not raised any concerns, but they knew who they would speak to if needed.

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 communication needs were met. This information was identified as part of the assessment process. The registered manager told us staff would support people with a sight impairment with their understanding of various documents and if required, documents would be made available for people in larger print.

End of life care and support

- Care plans included some information regarding people's end of life wishes. The registered manager agreed they could be improved and told us they would take immediate action to do so.
- At the time of inspection no one was receiving end of life care.

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.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Working in partnership with others

- Managers and staff had a very clear understanding of their roles. Audits had been completed at both location and provider level to monitor quality within the service.
- The registered manager had notified the CQC of incidents in line with regulations and their legal responsibilities.
- Staff were passionate about their role they played in people's lives. They all told us how much they enjoyed working at the service. They told us they felt very supported by their managers.
- The registered manager proudly shared with us how they had been nominated and won the north east regional home care manager award. In addition, the care management team at Willowbrook had also been nominated for an award. All nominees who had won at regional level had secured a place in the national finals.
- People, their relatives, and visiting professionals were keen to tell us how well all staff carried out their role. One visiting professional told us, "This service is fantastic. Anyone coming in from the outside can see exactly what is being done – care plans are spot on. [Registered manager] is so approachable and visible, they go above and beyond." One person told us, "I love all the staff here. There are times when I am crying with laughter as we all get on so well. I am so happy when I am with them."
- The registered manager and staff worked in close partnership with other professionals to support good outcomes for people.

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

- People, staff and relatives were encouraged to engage with the registered manager and provide their feedback. One person told us, "I am on the resident's committee. Any issues we raise get sorted every time – we are definitely listened to." Relatives told us they were invited to provide feedback and the registered manager operated an 'open door policy.'
- Staff told us they felt involved in the service and their feedback and ideas were valued and taken on board.
- The registered manager held regular team meetings.

Continuous learning and improving care

- The registered manager shared with us how all feedback was used as a way of improving the service and level of care provided. One example had been regarding staff induction. This feedback had been used to make changes to the staff induction process.

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

- People received care which was very person-centred. People told us staff were very keen to make sure they lived the best possible lives they could. Comments included, "Before coming to live here I had no confidence. That has all changed since living here. I am off to a family celebration with my partner and I wouldn't have done that before coming to live here."
- The registered manager reviewed all matters brought to their attention. Where necessary investigations were carried out and actions taken to address any issues.
- People and relatives were well informed. Staff were open and honest if things had gone wrong which included offering appropriate apologies.