

Sage Care Homes (Willowbank) Limited

Willowbank Nursing Home

Inspection report

Pasturegate
Burnley
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Date of inspection visit:
15 October 2019

Date of publication:
20 November 2019

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

Willowbank Nursing Home provides accommodation and nursing and personal care for up to 53 people who are living with a dementia or mental ill health. There were 52 people living in the home at the time of the inspection.

Willowbank Nursing Home is an extended detached older property which has retained a number of original features. The home is set in a quiet residential area approximately a mile from Burnley town centre with shops, a post office, public houses and a bus route nearby. The home is set in 1.5 acres of gardens.

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

People were happy with the care and support they received and with the way the home was managed. They made positive comments about the registered manager and the staff team. The registered manager considered people's views about the quality of care provided and used their feedback to make improvements to the service. All aspects of the quality of the service were monitored and appropriate action was taken to improve the service when needed. Lessons learned were discussed at management and staff meetings.

People felt safe and we observed staff being kind and patient. Staff understood how to protect people from abuse. Risk assessments were carried out to enable people to retain their independence and receive care with minimum risk to themselves or others. People received their medicines when they needed them and were protected from the risks associated with the spread of infection.

Recruitment processes ensured new staff were suitable to work in the home. There were enough numbers of staff to meet people's needs and ensure their safety. All staff received appropriate training, supervision and support. Staff enjoyed working in the home and felt valued and supported.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice. People's care needs were assessed prior to them living in the home.

People enjoyed the meals and were supported to eat a nutritionally balanced diet. People had access to various healthcare professionals, when needed. People were happy with their bedrooms and with the communal areas. A development plan was in place to ensure ongoing refurbishment and redecoration.

Staff treated people with dignity, respect, care and kindness and knew people well. We observed positive and caring interactions between staff and people who lived in the home. Staff spoke with people in a friendly and patient manner and we overheard laughter and friendly banter. Staff knew about people's routines and preferences to ensure they received the care they needed and wanted. People or their relatives, where appropriate, had been involved in discussions about care needs.

People enjoyed a range of appropriate activities and entertainments and links with local community groups had been developed to enhance people's lives. People were supported to maintain contact with their friends and family. People could raise any complaints or concerns if they needed to and had access to a complaint's procedure.

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

Rating at last inspection

The last rating for this service was good (published 24 May 2017).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our effective findings below.

Is the service caring?

Good ●

The service was caring.

Details are in our caring findings below.

Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

Willowbank Nursing 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 Care Act 2014.

Inspection team

The inspection was carried out by one inspector, a Specialist Advisor (SpA) and an Expert by Experience (ExE). An ExE is a person who has personal experience of using or caring for someone who uses this type of care service. A SpA is a health and social care professional who has clinical expertise in areas relating to this inspection.

Service and service type

Willowbank Nursing Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with CQC. 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.

What we did before the inspection

We looked at the information we held about the service. This information included statutory notifications the provider had sent to CQC. A notification is information about important events which the service is required to send us by law.

The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service

does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We contacted local authority commissioners and asked them for their views about the service. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

We spent time in the communal areas observing how staff provided support for people to help us better understand their experiences of the care they received. We spoke with five people who lived in the home and with five relatives. We also spoke with the registered manager, registered nurses, three care staff and an activity coordinator.

We looked at two people's care and support records, staffing rotas, two people's medicine records, three staff recruitment records, training, induction and supervision records, minutes from meetings and complaints and compliments records. We looked at records related to the safety, auditing and monitoring of service. We also looked at the most recent report of the service from the local authority commissioning team and feedback from the recent customer satisfaction survey.

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 the risk of abuse and unsafe care. People told us they felt safe.
- Management and staff understood safeguarding and protection matters and were clear about when to report incidents and safeguarding concerns to other agencies. Staff had access to appropriate training and to policies and procedures.

Assessing risk, safety monitoring and management: Learning lessons when things go wrong

- The registered manager and staff assessed and managed any risks to people's health, safety and wellbeing. Staff were provided with guidance on how to manage the risks in a safe and consistent manner.
- The risks associated with managing people's behaviours had been assessed and managed well. Records showed appropriate action had been taken to respond to any incidents. Guidance and training was provided for staff and we observed staff responding to difficult situations in a calm and patient manner.
- The provider promoted an open and transparent culture in relation to accidents, incidents and near misses. The registered manager reviewed all incidents to ensure appropriate actions were taken. Risks were reassessed to prevent reoccurrence where possible, and where lessons had been learned these were shared throughout the staff team.

Staffing and recruitment

- The registered manager ensured there were good numbers of staff to meet people's needs in a timely and flexible way. Any shortfalls in staffing were covered by existing staff rather than agency staff; this provided continuity of care. There was a stable team of staff.
- People said, "Plenty of staff", "I get help when I need it" and, "Some people have more needs than others and when help is needed, some have to wait." We observed people received assistance in a timely way.
- The registered manager followed safe recruitment systems and processes to protect people from the employment of unsuitable staff.

Using medicines safely

- The registered manager and staff followed safe processes to ensure people's medicines were managed safely. People received their medicines when they needed them. Staff were suitably trained to administer medicines and checks on their practice had been carried out.

Preventing and controlling infection

- There were systems to help prevent the spread of infection and staff had received training in this area. All areas of the home were clean and fresh smelling although we noted some areas needed additional cleaning.

The registered manager took immediate action to address this and would discuss this with staff following the inspection. Appropriate protective wear to prevent cross infection was readily available throughout the home.

- The home had been awarded a five-star rating following their last inspection by the 'Food Standards Agency'. The service was rated 'very good' in relation to meeting food safety standards about cleanliness, food preparation and associated record keeping.

Is the service effective?

Our findings

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

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

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

- People's needs were assessed before they moved into the home to ensure they could be looked after properly. Assessments from health and social care professionals were also used to plan effective care for people.
- Management and staff applied their learning in line with expert professional guidance such as the management of nutrition, skin integrity and falls. This led to good outcomes for people and supported a good quality of life.
- Staff considered people's protected characteristics, such as sexuality, age, religion or belief. Policies and the initial care assessment supported the principles of equality and diversity.

Staff support: induction, training, skills and experience

- The registered manager provided staff with a range of training to carry out their role effectively. New staff were given an in-depth induction to ensure they could carry out their role safely and competently.
- All staff were provided with ongoing support and supervision. Staff were complimentary about the support they received from the registered manager. People and their relatives considered staff were knowledgeable and well trained.

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

- People were supported to eat a varied and nutritious diet based on their individual needs and preferences. We observed people receiving patient and considerate help and encouragement with their meals. We discussed how the mealtime experience could be improved in the main dining area. People said, "The meals are very good. They show me what I can have. Everybody has a choice" and "It's nice, a good choice."
- Staff monitored risks associated with poor nutrition and healthcare professionals were involved where required.

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

- People were provided with appropriate support to meet their healthcare needs. People's physical and mental healthcare needs were documented which helped staff recognise any signs of deteriorating health.
- Staff worked closely with other social care and healthcare professionals as well as other organisations to ensure people received a coordinated service. Staff shared appropriate information when people moved between services such as transfer to other services, admission to hospital or attendance at health appointments. In this way, people's needs were known, and care was provided consistently.

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

- The design and layout of the home was suitable for people living there. Communal areas were comfortable and bright with plenty of items of interest for people to enjoy. Bathrooms were appropriately adapted. Gardens were safe with access to outside seating areas and raised flower beds. People were able to personalise their rooms.
- The registered manager had identified areas where the environment needed to be improved. A plan was available to support this.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- The registered manager and staff understood when an application for a DoLS authorisation should be made and worked with the local authority to ensure where people were deprived of their liberty, any decisions made on people's behalf, were lawful and in their best interest. At the time of the inspection, eight authorisations were in place and conditions were being met. Other applications had been submitted to the local authority for consideration.
- Staff made sure people were supported to have maximum choice and control of their lives and supported them in the least restrictive way possible. Staff were patient and respectful and supported people to make choices about their daily lives.

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 were treated with warmth, kindness and respect. Staff respected people's equality, diversity and human rights and recorded them as part of the care planning process.
- People were complimentary of the care and support they received. People commented, "They are kind", "They are nice to me" and "They treat [family member] with respect." Messages of appreciation also highlighted the caring approach taken by staff. A relative described staff as, 'Angels without wings.'
- Staff and people living in the home had developed good relationships. Staff took time to sit and talk to people. They knew about people's preferences and how best to care for and support them.

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

- Staff encouraged people to make decisions about their day to day routines and their care needs, in line with their personal preferences. People could express their views as part of daily conversations, regular meetings and customer satisfaction surveys. Information around the home helped keep people informed of proposed events and of any changes.
- Staff ensured people had maximum choice and control over their lives, including those with protected equality characteristics.
- People were given information advising where they could access advocacy services and how to contact other useful agencies. The advocacy service could be used when people wanted support and advice from someone other than staff, friends or family members.

Respecting and promoting people's privacy, dignity and independence

- Staff encouraged people to develop their independence and self-esteem to enable them to make choices and express their preferences. Staff offered people opportunities to increase their independence and to have freedom and control over their lives.
- Staff respected people's privacy, dignity and independence. Staff called people by their preferred name and spoke to people with respect.
- Staff understood their responsibilities for keeping people's personal information confidential. People's information was stored and held in line with the provider's confidentiality policy and in line with government regulations.

Is the service responsive?

Our findings

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

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

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

- People's care and support was planned in line with their choices and preferences. Management and staff recognised the importance of appropriately supporting people on an individual basis, promoting equality and diversity and respecting individual differences.
- Staff understood people's needs well. People's care plans described their health, care and support needs and included their preferences and daily routines. The information was kept under review and some people, or their representatives, had been involved in discussions about care needs.

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. 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.

- Management and staff understood people's communication needs and preferences. Information was available in a variety of formats, such as easy read and pictorial to meet the communication needs of people and to give people more control over their lives. Technology was used as a means of communicating with people and achieving positive outcomes for them.

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

- There were designated activity organisers who provided people with a range of meaningful activities in line with their needs and wishes. During the inspection, we observed much laughter and discussion whilst people participated in the activities they enjoyed.
- Links with local community groups had been developed and people were supported to access the local community to enhance their lives. People were supported to maintain contact with their friends and family.

Improving care quality in response to complaints or concerns

- The provider had a system to monitor complaints, compliments and concerns to help them understand how they could improve or where they were doing well. The registered manager confirmed there had been three complaints raised in a 12-month period. We saw the complaints had been thoroughly investigated and resolved.
- People had no complaints or concerns and felt confident talking to staff or the registered manager. The complaint procedure was available in the service information guide and displayed in the hallway.
- People were encouraged to discuss any concerns and air their views about all aspects of the service during

meetings, day to day discussions and by completing a satisfaction survey.

End of life care and support

- Management and staff had experience of caring for people at the end of their life. Relevant professionals were involved when required and appropriate medicines and equipment was made available to ensure people received dignified, pain free care. At the time of our inspection, the service was not supporting anyone with end of life care.
- People's preferences and choices in relation to end of life care and their cultural and spiritual needs had been explored and recorded, where possible.

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

- The registered manager and staff had a clear understanding of their roles and contributions to service delivery. Staff morale was good, and they felt valued and supported.
- The provider had effective quality assurance systems to ensure safety, quality and improvement were consistently monitored. Appropriate action was taken when shortfalls were found.
- The registered manager was experienced, and staff were knowledgeable about the needs of the people they supported. We found the service was well-organised, with clear lines of responsibility and accountability. People said, "[Registered manager] is always here when I visit. She is always available" and "[Registered manager] does a wonderful job."

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

- Management and staff planned and promoted person-centred care to ensure good outcomes for people. People told us the home was well managed. One person said, "Everything is excellent."
- The provider ensured the culture of the service was caring and focused on ensuring people received high standards of person-centred care. People, where possible, were empowered to make decisions about their care and support.
- The registered manager knew people well and was knowledgeable about their needs and preferences. They often worked alongside staff providing people with care and support. This meant they had a good understanding of the complexity of people's needs and the pressures placed on staff in challenging situations.

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 registered manager and provider understood their responsibilities under the duty of candour. They promoted and encouraged candour through openness. Good relationships had been developed between management, staff and people using the service and their family members. Staff described the registered manager as approachable.
- The registered manager had been open with people when things went wrong. Any incidents were discussed with staff during meetings or in one to one support sessions.

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

characteristics

- Management and staff encouraged feedback from people living in and visiting the home. There was good evidence people were listened to and changes were made. The quality of the service was monitored to ensure people were happy with the service and to ensure their diversity and personal and cultural needs were met.
- The registered manager had an 'open door' policy, so people could approach them directly to discuss any concerns openly and in confidence.

Continuous learning and improving care; Working in partnership with others

- The provider encouraged continuous learning and development within the service. The registered manager and staff worked in partnership with external agencies to learn and share knowledge that promoted continued service development.
- The management team were aware of the improvements that were needed in the service and had good working relationships with a variety of professionals to enable effective coordinated care for people.