

Mrs L Woodstock and M Duke

The Willow

Inspection report

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Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Outstanding ☆
Is the service well-led?	Good ●

Summary of findings

Overall summary

About the service

The Willow is a residential care home providing personal care for up to 11 people aged 65 and over. At the time of the inspection 11 people were living at the home.

The care home is located in a large detached house, within a residential area of the small town of Chesham, Buckinghamshire. People had access to three seated areas on the ground floor and extensive well-maintained garden.

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

People benefited from a service which was exceptionally person-centred, individualised and responsive. People were valued as individuals and encouraged to maintain a role in society and take part in local community events. The registered manager had forged many links with local services and had developed a local club called 'The Willow Club'. There was an emphasis on reducing social isolation and increasing integration.

People and their relatives told us the service was well-led. The provider had policies and procedures in place. However, they did not always reflect best practice guidelines. We have made a recommendation about this in the report.

People were supported by staff who routinely promoted privacy and dignity. Staff had a good understanding of people, their likes and dislikes.

People were supported by staff who had a good knowledge of how to protect them from abuse and harm. People were encouraged to live as they wanted to. Staff encouraged independence in people.

People who required end life care were supported by staff who demonstrated kindness, compassion and supported the person's family.

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.

Rating at last inspection

The last rating for this service was Good (published 21 March 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 ●

The Willow

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 on 4 September 2019.

Service and service type

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

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

The provider was not asked to complete a provider information return (PIR) 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. Throughout the inspection we provided the service opportunities to give us feedback on what they did well and any improvements they had planned to make.

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 all of this information to plan our inspection.

During the inspection

We spoke with four people who used the service. We spoke with six members of staff including the registered manager, deputy manager and support staff.

We observed medicine administration to three people. We reviewed a range of records. This included three people's care records and medication records. We looked at five staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We received feedback from relatives, friends and staff.

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.
- People and their relatives told us they felt safe at the home. Comments included. "He is 100% safe. He often thanks me for getting him in there as it saved his life."
- Staff had received training on how to recognise signs of abuse and were able to tell us about how to support people keep safe and protect them from abuse or harm. One member of staff told us "I would report anything that causes harm, or affects an individual's physical, mental wellbeing or safety, and also to ensure protection within the future." Another member of staff told us "In the unlikely case of a more serious incident I would report an incident of bad practice to my local Care Quality Commission."
- Two staff members had been identified as safeguarding officers who took the lead in ensuring staff and people knew what to do in the event of a concern being raised. The safeguarding local authority telephone number was displayed for people.

Assessing risk, safety monitoring and management

- People were protected from potential risks. Risks posed to people as a result of their medical condition had been assessed. For instance, we found risk assessment were written and detailed what support people needed to move position. Staff told us they were aware of how to minimise the risks posed to people. People who wanted to maintain their independence by going into the local community were supported.
- People were protected from unsafe premises. Environmental risks assessment had been carried out. A Legionella risk assessment was dated 27 April 2018. Equipment used in the service was routinely maintained. A five year hard wiring electrical safety certificate was in date.
- A fire risk assessment was dated 26 June 2018 and the service had received a visit from the local fire service in June 2019. A number of recommendations were made. We checked on the progress of the actions. We found the provider had carried out a number of actions and had plans in place for the remaining recommendations to be completed.
- Each person had a person emergency evacuation plan (PEEP) in place which described the support they required in an emergency. Staff had support from an 'emergency responder', this was a member of staff who could assist night staff if required.

Staffing and recruitment

- People were supported by enough members of staff. The registered manager monitored staffing levels. People and their relatives told us there were enough staff. Comments included "There are enough staff I would say."
- People told us, and we observed requests for support were responded to quickly. One visitor to the home

told us "The home is well managed, this is because they [Residents] are given attention quickly. Every need they have is dealt with quickly, they don't have to wait to go the toilet."

- Care staff had support from office staff when required. For instance, the registered manager and deputy manager were able to support people if needed. We observed the deputy manager supported people with a GP visit on the day of the inspection.
- Records we looked at demonstrated staff had been recruited safely. The registered manager was aware of the required checks prior to a new member of staff commencing work.

Using medicines safely

- Where people required support with administration and management of their prescribed medicine this was detailed in their care plan.
- People were supported with their medicine by staff who had received training and were deemed competent to provide safe care to people.
- We observed people receiving their prescribed medicine. Staff were professional and calm when administering medicines. The member of staff asked people if they were ready for their medicines. People were discreetly asked if they needed as required medicines for pain relief.

Preventing and controlling infection

- Staff received training on how to minimise the risk of infections and demonstrated knowledge on the subject. We observed good practice which promoted the prevention of the spread of infection.
- The home was clean and tidy with no unpleasant odours.
- Staff had access to personal protective equipment (PPE) such as gloves and aprons.
- Staff who supported people with their meals had received training on food hygiene. The service had been inspected on 2 May 2019 and given the highest food safety rating of five.

Learning lessons when things go wrong

- Incidents and accidents were recorded.
- Staff were aware of what needed to be reported.
- The registered manager and provider had systems in place to monitor and analyse trends in accidents and incidents.
- The registered manager met with other local providers. Each service shared their experiences and any learning from events.

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

- Prior to moving into the home. The registered manager or deputy manager carried out a full care needs assessment. This captured important information about people's physical and mental health, likes, dislikes, family and social history.
- Assessments identified any individual needs which related to protected characteristic identified in the Equality Act 2010. For instance, preferred language, faith, religion, and cultural considerations.
- We observed, and the deputy manager told us prior to people moving in, people would be offered an opportunity to spend some time in the home. On the day of inspection one person was visiting the service for lunch, they were warmly welcomed by staff.
- Where a person's assessment had identified the need for additional equipment or technology, this was provided. For instance, some people had been assessed as at high risk of falling. Sensors had been obtained which provided staff with an early warning sign a person was moving about. Staff were then able to attend to people and observe them mobilising and support them if required to prevent a fall.

Staff support: induction, training, skills and experience

- People were supported by staff who had received training to ensure they had the right skills and knowledge.
- Staff were supported with an induction to their role. Induction training was able to be tailored to each member of staff, depending on their level of experience.
- New care staff were supported to study the Care Certificate. The Care Certificate is a set of nationally-recognised standards all care staff need to meet. The standards include communication, privacy and dignity, equality and diversity and working in a person-centred way, as examples.
- Staff told us they felt supported. The home had an administration and HR manager role. The person currently in post provided face to face manual handling training for the staff. Senior staff had oversight of staff training and arranged re-refresher training to ensure skills and knowledge were kept up to date. One member of staff told us "All mandatory training is updated and completed in line with policies and procedures."
- One visitor to the home told us "There is a trainer who is part of the team. Staff appear to be well trained and know what is needed to be done." People, their relatives and friends told us they felt the staff were well-trained.

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

- Where people required support to maintain their nutrition and hydration levels, this was detailed in their care plan. One person required to have a soft diet, this was provided. Staff supported them with their meal.

We observed this was carried out professionally and calmly.

- We observed a lunch time meal. People were relaxed and chose to either remain in the lounge area or move to the dining area to eat their meal.
- Staff were knowledgeable about people's food choices.
- Throughout the inspection we observed staff supporting and offering people drinks.

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

- Records demonstrated staff worked in conjunction with other agencies to ensure people received effective and appropriate care.
- We observed staff worked well together. Staff communicated well between themselves. A daily handover between outgoing and incoming staff occurred. This meeting was an opportunity for important information to be shared. In addition, handover information and important messages were displayed on a hand-held computer which staff checked when they came onto shift.
- Staff told us they were routinely kept up to date with any changes in people's needs. One member of staff told us "We are a small team who work and know the residents very well, we communicate with each other effectively to ensure we have all the knowledge needed to support them."
- People were supported to live a healthy life, the activities co-ordinator facilitated gentle chair-based exercises.
- People were referred to external healthcare professionals when required. On the day of the inspection we observed the local GP had been asked to visit three people as staff had raised concern about them. It was clear from the interaction with residents and staff, the GP had visited the home before and found the staff knowledgeable about people's needs.

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

- The premises were bright, clean and pleasant.
- The service had previously considered the environment and had made some changes. A new dining area had been created which overlooked the garden and a new quiet lounge area was in place. Feedback at a recent resident meeting was positive. People said, "It is a definite improvement and a pleasure to have meals together at the round tables."
- Throughout the inspection we observed people move around the home with ease. One person was sitting alone in the quiet lounge in the morning. They told us they liked to sit there and read and listen to music.
- People were able to personalise their room with their own furniture.

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 with appropriate legal authority. 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 any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- People were supported in line with the Mental Capacity Act 2005. Staff had received training in the subject. One member of staff told us their understanding was "It is about protecting individuals' rights, respect and dignity, and when required making decisions on their behalf in their best interest."
- The service worked with people and their family members to determine if they needed to assess a person's mental capacity. Staff understood the five principles of the MCA which include a presumption that people had full capacity to make informed decisions about their care and support.
- Where a third party had applied and registered legal authority to support a person with decision making, the service ensured it received a copy of the powers granted to them. This ensured the service involved and sought support from legally appointed third parties.
- We asked the deputy manager if they considered if any people were being deprived of their liberty and if any DoLS applications had been made. The deputy manager informed us they were monitoring one person's ability to consent to their care.
- We routinely observed staffing seeking consent from people prior to them being supported. People were asked "Where would you like to sit?" and "What would you like to do?"

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

- Throughout the inspection we observed, kind, considerate and professional interactions between staff and people.
- People and their relatives gave us positive feedback about how the staff supported them. Without exception people and their relatives were complimentary about the home environment, atmosphere and staff conduct. Comments included, "He also very much enjoys the excellent care and attention he gets from the staff," "Care is superb. I would recommend it to anyone," "it is the 1:1 attention they get, it's a luxury that not many homes can afford" and "I cannot fault the staff dedication here. The staff turnover appears to be very low and without exception they are all wonderfully dedicated to providing an outstanding service to the residents."
- People and their relatives told us The Willow was a homely, welcoming place to live. Comments included, "The atmosphere that [Name of registered manager] and the team create is very much a 'home from home'," "You never feel that you are in the way when you visit and the whole team are very friendly" and "Visitors are always warmly welcomed and offered refreshments." Another relative told us "The house feels more like a person's own home rather than an institution, mum was encouraged to furnish her room with her familiar and treasured possessions."
- The registered manager and the staff fostered a family atmosphere. During the inspection we observed relatives were warmly welcomed by staff. It was clear staff interaction with people and their relative was a naturally genuine gesture. Relatives and friends, we spoke with or observed were clearly well-known by all residents.
- We saw people were relaxed in the company of staff. People were seen to be smiling and joking with staff in a way they wanted.
- People were routinely addressed by their preferred name.

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

- People were routinely involved in decisions about their care. We overheard staff talking to people in a respectful manner.
- People were routinely invited to attend resident meetings. We saw a wide range of topics were discussed at meetings. People clearly felt able to share their views about the service and had opportunities to make any suggested changes. At the last meeting people discussed the different options they had to engage in local community events or social settings.
- People were encouraged to be independent and continue with the lifestyle they experienced when living within their own home prior to moving into The Willow. Comments from friends and relatives confirmed this.

We were told the service "Gets the best out of them [people] mentally. They are not coerced into doing anything. [Name of person] has stopped worrying about things since he went into the home" and "Mum was treated as she wanted to be, still able to maintain her independence, both of body and mind, but with all her needs catered for."

Respecting and promoting people's privacy, dignity and independence

- We observed people were routinely treated with dignity and respect within the home.
- Staff had received training in dignity and equality. The registered manager and senior management team lead by example and fostered an environment which promoted people's privacy and dignity.
- Information about people was stored securely and only people who required access had this.
- Staff ensured they went into a quiet area when they needed to discuss people's care needs. For instance, the handover meeting was carried out in private.
- People and their relatives were complimentary about how the staff team supported people. Comments included "The team at The Willow are very flexible and are happy to accommodate individual requests such as preferred foods, favourite treats at bedtime" and "The fact that it is so small means that staff can know the residents exceptionally well and cater to their requests."

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 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 received an exceptionally personalised service from the staff. Each person had a care plan which detailed their care needs, likes, dislikes and how they liked to be supported.
- People and their relatives commented how personalised the support was. Comments included "Staff demonstrate a caring and person-centred approach towards residents. For example, the notes we provided on mum's background and previous daily routine were evidently read and referenced by the care staff." Staff had a good understanding of people's lifestyle, which helped them provide personalised support to them.
- Staff were knowledgeable about people. One member of staff had spent time with people to record their life history. People told us this had provided them with an opportunity to reflect on their past life and celebrate their achievements. Relatives were extremely complimentary about the life histories. One relative told us "I have experienced them being truly interested in their residents and have put together a wonderful 'life history' through both speaking with [Name of person], myself and his sister. This is something the whole family have been able to read and enjoy."
- Staff understood the importance of a person's social and work history and how it impacted on their wishes and needs within a care home. For instance, the member of staff who was responsible for planned and unplanned activities took time to understand people, so activities could be tailored to meet their needs. A relative told us "She was warmly welcomed, made new friends and had all her needs catered for. She was enjoying life again. She joined in activities, enjoyed outings and continued to see many old friends, who were also welcomed at The Willow."
- People were regularly supported to go to the local theatre where they enjoyed shows and entertainments. We saw photographs of people at the theatre and it was clear people had enjoyed the events. One person had received a special mention by the theatre company when they had put on a D-Day celebration.
- The management team and staff understood people's spiritual needs. One member of staff told us "My main concern is that I meet the physical and spiritual needs of each person. When people come into the home I read their care plan and ask them questions about their life, interests, hobbies, likes, dislikes." Another member of staff told us "It helps to have background knowledge, so I don't ask the wrong questions and cause unnecessary upset. It also helps to speak to their family and find out as much as possible." It was clear staff were genuinely interested in people and their wider family network.
- Staff were aware of situations which may place people at risk of discrimination. One person who lived at the home was recently visited by external healthcare professionals who criticised the home for allowing them to dress as they did. Staff were confident in challenging the professional. Staff had a good understanding it was the person's choice to dress as they did. The registered manager told us "We have never knowingly admitted a resident who might need support regarding their sexuality, if we do, they would be treated with the utmost respect and we would assist them in whatever way they wished to live their life."

We promote individuality."

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

- The registered manager and whole staff team were passionate about supporting people to retain an identity and role within the community. The service had introduced a number of schemes, projects and suggestions in partnership with people to relieve social isolation.
- The home had developed a community social club named 'The Willow Club'. The registered manager had forged links with a local housing association and had hired a local community hall. The club was held every month for two hours. People who lived at The Willow joined people from the local community to chat, play quizzes and have refreshments. People told us they had forged friendships with other local residents and looked forward to attending. The club was featured in a local free magazine which promoted the opportunity to relieve social isolation. The registered manager told us they had received feedback from one person who had told them the club had helped him re-integrate into the community following a bereavement.
- The home supported people to attend a local social club ran by an external party. Two residents regularly attended the senior club which provided an opportunity for people to meet with local residents and school children. One person told us "I very much look forward to it."
- The registered manager had worked with a local community group to introduce intergenerational support to people in the care home. The home had invited parents to take their babies and toddlers to visit the home. We spoke with three people after the visit. We received positive comments from people about how it made them feel. Comments included "I thought it was really nice," "I had a ball, you should have been here" and "I certainly thought it was wonderful, I loved it." Staff who were present told us "It was lovely, they [People] were talking about it all afternoon." They went on to say they witnessed "pure delight" on people's faces.
- We received positive feedback from external parties about the level of commitment demonstrated by the registered manager to support people to engage and feel part of the local community. One community group told us "[Name of registered manager] is so motivated and enthusiastic and really wants to make a difference to the residents of The Willow as well as the wider community. Her aim is to reduce isolation and give the residents a varied and active social life."
- People were encouraged and supported to maintain important relationships with family and friends. The home welcomed visitors. We received many positive comments from visitors to the home, we were told staff were "Welcoming to all family members and took an interest not just in their residents but also in the residents' friends and family" and "We find the atmosphere relaxed and friendly towards visitors." A relative told us "When searching for a care home I looked at seven other places and The Willow was far beyond the others in terms of what would suit her needs."
- Staff within the home had developed relationships with local school children and had facilitated a 'pen friend scheme'. School children had written letters to people who had replied to share experiences and tales. It was clear from the responses we looked at both parties had thoroughly enjoyed the experience. One person continued to receive letters from their 'pen pal' over the summer holiday. They told us "It was a surprise to receive it."
- Relatives were extremely complimentary about the home and how they were made to feel welcome. One relative told us "The staff are a very warm group of people who would go out of their way to help in any way they could, and the small number of residents meant that time was available for the staff to talk to the residents and take an interest in their lives."
- The registered manager told us how they had planned an event in October to mark the national celebration of older people. A 'Silver Sunday' event was planned in the home. People told us they were looking forward to the day.

End of life care and support

- At the time of the inspection no-one was being supported with end of life care needs.
- People's end of life care needs was discussed with them. Where people were happy to share their wishes, this was clearly recorded. For instance, if people had expressed a preference for a particular ceremony.
- The registered manager and whole staff team were passionate about providing a home for life. They worked well with external healthcare professionals to manage changes in people's health needs.
- Relatives of family members who had received end of life care at the home, were extremely complementary. Comments included " I could not think of how I could repay you for all you did for [Name of person] and me," "It was wonderful that you all as a team have such compassion, kindness and generosity to share your love with people who live in the home" and "We feel very lucky that he was looked after by a such a caring and dedicated team of people."
- Relatives were supported during their family members last days. The home welcomed visits from family throughout the day and night. On relative told us "It was a happy home, with excellent staff who went above and beyond what would normally be expected to see that the resident's needs were taken care of. We were so fortunate to find somewhere where she was happy, and so was the family, to know that her needs were being met and being cared for by such professional and caring staff." Another relative told us "The support the family received during mums final weeks at The Willow was given freely and generously, for which we are very appreciative."
- Relatives told us the registered manager and staff had accommodated people's changing needs and responded well to ensure people were pain free, comfortable and their dignity promoted. One relative told us "Mum's condition deteriorated fairly rapidly...all of which was superbly handled by The Willow with the minimum of fuss. I applaud the expert way this was all handled by The Willow, [Name of registered manager] herself didn't hesitate to get involved at every stage, including making out-of-hours calls when needed and mum was treated with such care, warmth and dignity right up to the time of her passing away."

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.

- We observed people's communication needs were identified, recorded and highlighted in care plans. These needs were shared appropriately with others.
- We spoke with the registered manager about AIS after the inspection. We were reassured that people were supported to receive information in a format which was easy for them to understand. The registered manager told us "We also have headphones and a recorder so that we can give verbal information to residents if necessary and should anyone require braille we would of course do this as well."
- People had access to and were encouraged to use a voice activated virtual assistant device to play their chosen music and seek answers to trivia questions. One person liked to listen to Frank Sinatra and the device was asked to play songs by him. It was clear from the look on the person's face they enjoyed it. We later overheard them singing along to the music.

Improving care quality in response to complaints or concerns

- The service had not received any formal complaints since our last inspection.
- People and their relatives knew who they would talk to if they had any concerns and had confidence they would be managed well.
- The provider had systems in place to manage any concerns. The registered manager told us "We have not received any formal complaints. If we did, we would follow our complaints procedures as outlined in the leaflet we display. Should a resident or family member ever mention an issue to us it is dealt with

immediately so as to prevent there ever needing to be a complaint made. This again is the benefit of a small home that sees everyone all the time."

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.

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;

- There is a legal requirement for providers to be open and transparent. We call this duty of candour (DOC). Regulation 20 of the Health and Social Care Act 2008 (Regulated Activities) Regulation 2014, states when certain events happen, providers have to undertake a number of actions. We checked if the service was meeting the requirements of this regulation.

The provider did not have a policy about duty of candour. We spoke with the registered manager about this. They were aware the service needed to fully embed the requirements of the regulation. Following the site visit we received documentation from the service about how they had planned to improve communication with people about DOC. The registered manager advised us they would be ensuring a policy was in place.

- The provider had policies in place, however, these did not always reflect best and current practice. Policies were not dated and were not routinely reviewed. For instance, a safeguarding policy referred to "The Multi-Agency Policy and Procedures for Safeguarding Vulnerable Adults were changed and reissued on the 12th January 2011". However, a further update had been made following the implementation of The Care Act 2014. We discussed this with registered manager who confirmed action would be taken.

We recommend the service seeks support from a reputable source on developing processes to manage policies and procedures to ensure they reflect best practice and the requirements of the Regulations.

- Staff told us they felt able to raise concerns freely with the management team. Staff told us concerns would be listened to and appropriate action taken by managers.

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

- People were supported by staff who shared a vision to provide a high-quality service. The registered manager set clear expectations for staff and led by example.

- It was clear throughout the inspection and feedback we received, the service was committed to providing person-centred care which promoted people's quality of life.

- People and their relatives felt the service was well-led. Comments included "As a family, we will always be grateful to [Registered manager] and her team. We could not have asked for mum to be treated any better anywhere" and "The Willow management and staff have been reassuring and understanding. We value the support they've given to both our mum and the family. This has enabled mum to settle far more quickly than we anticipated."

- Staff told us they felt valued and listened to. Staff said their views were respected by the management team. Comments included "I often make suggestions to the manager and other staff, and I feel listened to and valued in doing so" and "I find [Registered manager] and all the managers very approachable and if I have any concerns there is always somebody I can speak to." One ex member of staff told us "I can hand on heart say that all the staff I worked alongside in my time at The Willow provided the most amazing care, everyone went above and beyond. It has a really family feel to the home." They also told us "The management team at The Willow were supportive to staff, residents and their families and friends at all times."

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

- There was a registered manager.
- There was a clear management structure in place. Staff were supported to understand their role and responsibility. Staff had been given key roles within the home, which included a lead for infection control, safeguarding and medicine as examples.
- Providers and registered managers are required to notify us of certain incidents or events which have occurred during, or as a result of, the provision of care and support to people. One notifiable event is when there has been an allegation of abuse. We checked our record against records held at the service, we had been notified when required.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The home had forged links with the local community. An arrangement was in place for children from a local school to visit people, a 'pen friend scheme' had been set up and more recently an intergenerational visit had been arranged. People had been visited by over 20 babies and toddlers.
- The registered manager was keen to ensure people had opportunities to be part of the local community.
- The service had supported local and national charities. The registered manager advised us "The local community were trying to raise money to have memorial statues put in Chesham. I donated £ 200 on behalf of the residents."
- The home worked in partnership with external healthcare and social care professionals to obtain the best outcomes for people they supported.
- The provider had systems in place to meet with people and their relatives to seek feedback about the service. Regular residents and staff meetings took place.

Continuous learning and improving care

- The registered manager demonstrated a commitment to continuous learning. The management structure supported this.
- The registered manager was a member of local and national care organisations and received updates on changes affecting the care industry.
- The service received national safety alerts and had systems in place to take appropriate action as required.
- The registered manager attended local managers and provider networks. They had developed a local small care home networking group with similar sized, privately owned care homes. The registered manager told us "This is a valuable exercise as we can give and take from each other so that we all achieve good practice."