

Cotswold Spa Retirement Hotels Limited

Willow Lodge Care Home

Inspection report

Osbourne Gardens
North Shields
Tyne and Wear
NE29 9AT

Tel: 01912964549
Website: www.fshc.co.uk

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

Summary of findings

Overall summary

About the service

Willow Lodge Care Home provides personal and nursing care to both younger and older adults, some of who may be living with Dementia. The service can support up to 48 people with bedrooms being situated on two floors. At the time of our inspection there were 33 people using the service, seven of which were there on respite. Respite is a short-term service which provides people and their carers with a break.

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

People told us they felt safe living at Willow Lodge Care Home. Risks to people's safety had been assessed and plans were in place to minimise these risks. Safe recruitment practices were followed. Staff understood how to keep people safe and were confident any concerns raised would be addressed by the management team. Following accidents and incidents information was used to identify any lessons to be learnt to reduce the likelihood of reoccurrence. Arrangements were in place for the safe management of medicines and to protect people from the spread of infection.

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. People's dietary needs and preferences were recorded and known by the chef and staff. People had access to health care professionals to maintain their wellbeing.

Staff had access to a range of training to develop the skills and knowledge needed to meet people's needs. Staff had developed caring relationships with people. People and their relatives told us they found staff to be kind and caring and respected their privacy and dignity.

Care plans contained detailed information. They focused on people's preferences for how they wanted to receive care and support. A range of activities were available most days.

People and their relatives knew how to raise a concern or complaint and felt comfortable to do so. People and their relatives were supported when making decisions about how they wished to be cared for at the end of their life.

Effective quality assurance systems were in place to monitor the quality of service being delivered. People and their representatives had opportunities to feedback their views about the home and the quality of the service they received.

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 03 July 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.

Willow Lodge Care Home

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Willow Lodge Care Home 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 on the first day of our inspection. 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. The manager had left the service prior to our inspection and had their registration cancelled on the second day of our inspection. The provider had appointed a new manager who was in the process of applying to become the registered manager.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included information about concerns and incidents the provider must notify us about. We sought feedback from the local authority professionals who work with the service and Healthwatch. Healthwatch is an independent consumer champion that gathers and represents the views of the public about health and social care services in England.

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 or have made since the last inspection. This information helps support our inspections.

We used all of this information to plan our inspection.

During the inspection

We spoke with eight people who use the service and two relatives about their experience of the care provided. We spoke with 13 members of staff including the regional manager, manager, deputy manager, senior care workers, care workers, catering and housekeeping staff. We received feedback from four health and social care professionals who worked alongside the service. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included three people's care records, risk assessments and medication records. We looked at two staff files in relation to recruitment and staff supervision. We reviewed a variety of records related to the management and quality assurance of the service.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data.

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 Requires Improvement. At this inspection this key question has now improved to Good.

Systems and processes to safeguard people from the risk of abuse

- Staff understood their responsibilities to keep people safe. Staff had completed training in safeguarding and said they would feel confident the management team would address concerns.
- Safeguarding procedures were in place to guide staff on how to keep people safe from harm or abuse.
- People told us they felt safe living at Willow Lodge Care Home. Comments included "Everything I do, like transferring, there is someone there to make me feel safe" and "It is safe. Staff check on you all of the time."

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

- Risks were well managed. Risks to people's personal safety had been assessed and plans were in place to minimise these risks.
- The environment and equipment were safe and well maintained. Records showed regular health and safety checks were completed.
- Managers recorded and reviewed accidents and incidents to identify any trends or patterns.

Staffing and recruitment

- The provider followed safe recruitment practices. Recruitment checks had been completed to ensure new staff were suitable and of good character.
- There were sufficient staff to meet people's care needs. People's assessed needs determined staffing levels and were regularly reviewed.
- People and relatives said there was enough staff to meet their needs. Comments included "Yes there is always someone about."

Using medicines

- Arrangements were in place for the safe management and administration of medicines.
- Improvements to medicines management had been implemented since the last inspection and regular audits highlighted any areas for improvement.
- Staff received training and had their competency assessed before administering medicines.

Preventing and controlling infection

- People were protected from the risk of infection. Procedures were in place in relation to infection control and hygiene.
- Staff followed infection control guidance. Personal Protective Equipment (PPE) was available to help prevent cross contamination and the spread of infections.

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.

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

- People's needs were assessed prior to them moving to the service. This ensured the service was able to meet their care and support needs.
- People's care was delivered in line with relevant legislation and best practice guidance. Staff applied learning in line with best practice to support people to have a good quality of life.

Staff support: induction, training, skills and experience

- Staff were knowledgeable and skilled. They said they had received the correct training to carry out their roles effectively. One staff member commented "I enjoy the training and feel staff put their knowledge and skills acquired from training in to practice."
- New staff completed an induction to the service. The manager told us the induction process was currently under review to ensure it met the requirements of the Care Certificate.
- Staff said they received regular supervision and appraisal and felt supported. There were no supervision records available for 2019. The manager was in the process of compiling a supervision matrix to identify when staff's supervisions were due to ensure they took place.

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

- People received the necessary support to ensure they received enough to eat and drink.
- People's dietary needs and preferences were documented. The chef and staff knew people's needs.
- People were provided with a choice of food and drinks. People and their relatives spoke positively about the food. Comments included "They are good with me. There is plenty to eat and drink" and "The food is very good and there is a choice. I have been offered food when I have been in bed."

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

- The service supported people to have access to a range of health and social care professionals.
- People's health care needs were monitored and any changes prompted a referral to their GP or other healthcare professional.
- The service assessed and considered people's oral health care needs. Care plans guided staff on the support people needed to maintain good oral healthcare.

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

- The service was adapted to meet people's needs. The layout of the building provided sufficient space for

people using wheelchairs or walking aids to mobilise safely.

- The decoration of the building needed updating. The manager explained that it had been some time since the building had been decorated. A programme of refurbishment was in place for the coming months. People's rooms were personalised and contained their own furniture and belongings.
- People had access to a secure outside space.

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.

- People's rights were protected because management and staff acted in accordance with principles and guidance relating to MCA and DoLS.
- The manager ensured where someone lacked capacity to make a specific decision, a mental capacity assessment and best interest process had been carried out.

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.

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

- People and relatives spoke positively about the care and support provided. Comments included "They are very caring, when they pass, they smile and wave. They ask you if you are okay" and "They are caring. If I am feeling sad they will come and talk to me."
- People were treated with kindness and compassion. We observed positive and caring interactions between staff and people. However, we observed some inconsistencies in how staff interacted with people. For example, at lunch time we observed one staff member assisting a person with their lunch. They did not inform the person what food was on their plate and did not talk with the person whilst assisting them. We have spoken with the manager regarding our observations and they will speak with staff about this.
- The manager and staff understood equality and diversity. The manager was aware of the changing needs of people accessing the service and planned to run some workshops to support staff to understand how to support people with their sexuality and sexual needs.
- Staff showed concern for people's wellbeing. They knew people well and followed guidance in care plans to ensure they met people's care needs.

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

- People stated they felt involved in planning their care. Comments included "I am able to tell the staff what I need, and they will do anything they can to help" and "Yes, I have a care plan and they put in it what I need."
- Arrangements were in place to support people and their relatives to share their views. 'Resident and relative' meetings had taken place under the previous manager and the new manager had organised a meeting to ensure these continued.

Respecting and promoting people's privacy, dignity and independence

- Staff respected people's privacy and dignity. Staff supported people discreetly with their personal care with doors and curtains being shut.
- People's independence was promoted. People were encouraged to make decisions about their day. Care plans supported staff to understand what assistance people required with their care and what they were able to do for themselves.
- Management observed and monitored staff's interactions and approach to people. They said they did this to assure themselves people were being treated with dignity and respect.

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.

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

- People felt they were able to make day to day choices about their care and support. Comments included "I can go to bed whenever I like. I like a bath, I tell the girl in the morning and normally I get it at the time I want."
- People's care plans were personalised. They contained detailed information of the care people required to meet their needs and were reviewed regularly.

● 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.

- The service assessed people's communication needs. Care plans contained information for staff on what support people needed with communication and accessing information.

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 had a range of activities they could be involved in. Comments included ""There are loads of different things. Singers, bingo and I have been to the coop. I go on in my wheelchair to the Co-op" and "Sometimes I go over to the other home, I have been three weekends running to socialise."
- The manager planned to seek opportunities to develop links with the local community, such as involving schools and colleges.
- People were supported to maintain important relationships. Friends and family were encouraged to visit whenever they wished.

Improving care quality in response to complaints or concerns

- People and relatives knew how to raise concerns or make a complaint. They said they would feel comfortable in speaking with staff or management. One person who had raised a concern told us they were satisfied with how it had been addressed.
- The provider had a complaints procedure which was available to people and their relatives. The procedure outlined how complaints would be responded to and investigated.

End of life care and support

- People were supported to make decisions about their preferences for end of life care.

- Staff worked closely with healthcare professionals when providing 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.

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

- The manager was visible within the home. Staff spoke positively about the support they had provided.
- Management and staff were clear about their roles and responsibilities. They spoke about the importance of ensuring people received a high standard of care and support.
- Quality assurance systems were in place to monitor the quality of service being delivered. The manager had an action plan in place which identified areas for development.

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

- The manager valued people's and staff's feedback and acted on their suggestions.
- The home had a positive and homely atmosphere. Staff morale and teamwork were good. One staff member told us, "We are a great team. We have worked hard to improve standards."
- People and their relatives considered the service to be well-led. People and relatives told us all staff were approachable.

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

- People and their relatives had attended meetings and been encouraged to share their views about the service. The new manager planned to meet people and relatives.
- There were opportunities for staff to engage with the management team. This included one to one meetings, team meetings and daily handovers. One staff member told us, "The new manager is visible and has taken the time to get to know staff. There was a daily huddle where staff and management have time to catch up with each other."

Working in partnership with others

- People's care plans evidenced involvement from other health and social care professionals to meet people's needs.
- The manager had identified the need to develop links with the local community to avoid social isolation.

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 manager investigated incidents fully and was open and honest with exploring any lessons to be learned. Where identified, the manager implemented changes to improve people's experiences of their care

and support.