

Mrs Karen Godwin

# The Willows

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

# Summary of findings

## Overall summary

The Willows is registered to provide accommodation and support for six people with a learning disability or autistic spectrum disorder. There was a registered manager in post at the home. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care (2008) Act and associated Regulations about how the service is run.

The inspection took place on 14 December 2017 and was unannounced. At our last inspection in November 2014 the service was rated Good.

At this inspection we found the service remained Good.

Why the service is rated Good.

People and their relatives told us they continued to receive care which protected them from avoidable harm and abuse. Risks to people's safety were identified and measures were in place to help reduce these risks. When people required support to take their medicines this only happened when staff had received the training to do so. Regular checks on staff practices were undertaken to support people's safety. People and their relatives thought there enough staff to provide support to people and meet their needs.

People are 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 support this practice.

Staff had received training to provide them the skills and knowledge they needed to provide the right care and support people as required. People were provided with care which continued to be effective in meeting their individual needs.

People enjoyed spending time with the staff that cared for them and were treated with dignity and respect. People were encouraged to maintain their own personal interests and take part in activities within the home or out in the local community.

People's care was planned in ways which reflected their preferences and wishes. Relatives' and health and social care professionals' views and suggestions were taken into account when people's care was planned.

People knew how to complain. The complaint procedure was available in Easy Read Format so was accessible for everyone. Although people and their relatives had not made any complaints about the service provided.

People living at the home and their relatives were encouraged to give regular feedback on the service

provided. The registered manager regularly checked the quality of the care people received. Where actions were identified these were undertaken to improve people's care further.

## 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 remains Good.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Good ●

The service remains Good.

### Is the service responsive?

Good ●

The service remains Good.

### Is the service well-led?

Good ●

The service remains Good.

# The Willows

## Detailed findings

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Our inspection took place on 20 November 2014 and was unannounced so no-one knew we would be inspecting that day. The inspection was conducted by one inspector.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We also looked at information we held about the home. This included notifications received from the provider about deaths, accidents/incidents, safeguarding alerts which they are required to send us by law, and we spoke with commissioners from the local authority. We contacted Healthwatch to see if they had any information to share with us about the home. Healthwatch are an independent consumer champion, which promotes the views and experiences of people who use health and social care services.

During our inspection we spent time with people in the communal areas of the home. We spoke with three people living at the home, two staff, the registered manager and the provider. We spoke with three relatives via the telephone. We also used the short observational framework tool (SOFI) to help us assess whether people's needs were appropriately met and to identify if people experienced good standards of care. SOFI is a specific way of observing care to help us understand the experiences of people who could not talk with us.

We looked at a range of documents and written records including three people's care records, staff training and recruitment records and minutes of meetings with staff. We saw the checks made by senior staff on the administration of people's medicines. In addition, we looked how complaints processes were promoted and managed.

We also looked at information about how the registered manager monitored the quality of the service provided and the actions they took to develop the service people received further. These included quality

questionnaires completed by people and their relatives, and checks made on the care planned for people and the suitability and safety of the home.

# Is the service safe?

## Our findings

At our last inspection in November 2014 this service was rated Good in Safe. At this inspection it continued to be rated Good for the following reasons:-

People told us they felt safe living at the home. One person told us "I like living here and the staff are nice." A relative told us "It's a weight off my mind knowing [person's name] is safe living there. I'm over the moon with the care they receive."

Staff told us they had completed training in how to keep people safe and they had been provided with relevant guidance about abuse. Staff we spoke with had a good understanding of the signs of potential abuse and how to report this to support people's safety. One staff member told us, "If I thought someone had been or was being abused I wouldn't hesitate to report it to the manager." Staff felt confident any concerns raised would be referred to external agencies such as the local authority and the Care Quality Commission.

We saw from people's support plans risks to people's safety and wellbeing had been assessed, managed and reviewed in order to keep people safe. For example we saw guidance for staff to follow when supporting one person out in the community as they were afraid of dogs and could become very anxious. Staff told us following this guidance and their presence helped the person feel safe and they were able to enjoy their outings.

Relatives and staff told us sufficient staff were available to meet people's needs. A staff member said, "[Registered manager's name] always makes sure there is enough staff on duty, so people can do their activities." We saw on the day of our inspection this was the case as people were supported by one to one care with staff.

The provider followed robust recruitment procedures. Recruitment records demonstrated prospective staff had completed a thorough recruitment process. Staff confirmed that checks into their background had been completed before were appointed. These included Disclosure and Barring Service checks (DBS) and two reference checks. DBS checks return information about any convictions and cautions, which help employers, make safer recruitment decisions and prevented unsuitable people from working with people who lived at the home.

We saw people's medicines were administered and managed safely. There were appropriate facilities for the storage of medicines. For example people's medicines were stored in a locked medicine cupboard. We saw written guidance was in place if a person needed medicines 'when required.' These were recorded when staff had administered them and the reason why, so they could be monitored. We saw daily medicine counts took place to identify any errors or gaps to reduce the risk to people of not receiving their medicines. These practices supported action to be taken promptly if necessary to reduce risks to people's health and welfare. Staff administering medicines had their competencies checked annually to ensure they followed the provider's medicine policy and procedures which assisted in further reducing avoidable risks to people.

We saw the provider had taken into account infection control and prevention measures in order to keep people safe. For example when staff worked in the kitchen they used disposable aprons and gloves when preparing people's food.

We looked at the way the provider recorded any accidents and incidents. We saw the provider kept a record of any accidents and incidents, so any patterns or themes could be identified to see where lessons could be learned to prevent a further occurrence.



## Is the service effective?

### Our findings

At our last inspection in November 2014 this service was rated Good in Effective. At this inspection it continued to be rated Good for the following reasons:-

People were supported by staff that had the training and knowledge to meet their needs so they would be able to enjoy the best well-being possible. Staff told us they received regular training which helped them deliver up-to-date, evidenced based care. A staff member told us " We are offered lots of training, so we are kept up-to date." One relative told us, " The care is very good [person's name] receives."

The provider told us people benefitted from a consistent staff team. However the provider confirmed when new staff started their employment at the home they were expected to complete the care certificate as part of their induction. The care certificate is a set of standards that health and social care workers can work in accordance with. It is the minimum standards that can be covered as part of the induction training of new care workers. The provider also encouraged young people to join the care sector by offering an apprenticeship scheme, the provider told us this had proved very successful in training staff to have the values they promoted within the home.

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We checked and found the provider had either applied or had authorisation of DoLS to help people stay safe. For example authorisations had been sought where people were required to have constant staff support whilst accessing the local community. We saw staff members were all very encouraging, helpful and positive with people and each other, staff asked consent from people before supporting them with their particular needs.

We saw how people were assisted to maintain their independence and enjoy their meal time experiences by offering the choice of what and where they would like to eat their meals. Staff had a good understanding of people's individual dietary requirements. In the PIR the registered manager stated, "Staff ensure that clients who are on modified diets receive a varied, appetising and enjoyable diet and food presentation is key to this, we purchase modified shaped meals and have developed special menus and food preparation techniques for two clients to enable them to have many foods that they would not normally be able to enjoy. The feedback from these two clients is very positive." We were told how one person had been assisted to eat healthy and maintain a healthier lifestyle, which had positively impacted on their anxieties and behaviour.

People's individual needs had been assessed and plans were in place to support staff in providing effective care to meet each person's needs. Relatives told us staff supported their family members to see health professionals so they remained as well as possible. We were given the example of how staff had supported a person to help stop smoking and staff described how this had drastically improved the person's health. Relatives confirmed they were notified of people's health appointments and their outcomes. Every person

living at the home had their own 'Health Action Plan'. (A Health Action Plan records any health appointments, the outcomes and any further actions required). The information was in easy read format, to help people understand the contents. We could see from these records people had accessed doctors, dentists, physiotherapists, dieticians and psychiatric professionals as required to ensure people's needs were met.

We saw where people required specialist equipment to help them maintain their independence this had been provided. For example, where it was assessed as necessary people had specialist profile beds, to help them sleep safely. We saw people had the opportunity to decorate their rooms to their personal taste and have their important possessions around them. We saw visitors had left comments on just how homely the home was. One visiting professional had commented, "This place is absolutely lovely."

## Is the service caring?

### Our findings

At our last inspection in November 2014 this service was rated Good in Caring. At this inspection it continued to be rated Good for the following reasons:-

People told us they were happy living at the home. Relatives described the staff as very caring. We saw examples of how people enjoyed spending time with staff. For example we saw people singing and joining in the pre-Christmas festivities. People and staff were sat singing Christmas carols together. It was clear from people's body language and smile; they felt relaxed in staff's company. One person told us, "I'm going to the Cathedral to a carol service, I'm going to do some singing." A relative told us, "[Person's name] is really well looked after here, much better than their previous placements. I think they are in the best place." The provider told us, "We want people to treat The Willows as their home and feel part of The Willows family."

In the PIR the registered manager said, "We consider our client's views, preferences and choices and gather information from clients and those who know our clients best before planning any delivery of care, outings or activities. The Willows is very homely, active, enjoyable and stimulating environment with plenty for our clients to do, enabling clients to live a fulfilling and meaningful life the way they want to. Clients (where possible) are encouraged to contribute as much as possible to their care plan and care is delivered in a method that respects our clients right to dignity, choice and privacy and that promotes the client's strengths and independence."

We saw this ethos in practice as people were encouraged to stay as independent as possible and were encouraged to make as many day to day decisions as they could. For example what each person wanted to wear and what hobbies and fun things they liked to do. Information for people and staff had been collated in an easy read format to aid people's communication and express when and what they wanted to do each day. For example we saw in people's support plans information and cues for staff to follow for example, "When I am happy I will..." and "What I will do if I am unhappy." This was especially important for staff to follow the signs where some people had limited verbal communication skills, so situations which caused people's anxieties could be avoided.

We saw staff respected people's dignity, privacy and independence. We saw staff asked people if they would like to help prepare drinks and meals with their support. A further example of how staff respected people's dignity was when a staff member told us, "It's important to always knock on people's doors before entering... and I always ask people if they would like a shower and not assume they would."

We heard about situations where the provider had gone the "extra mile" for the people they cared for and their relatives so important relationships could continue. We heard examples of how the registered manager had offered to find accommodation for elderly relatives near to The Willows home so they could be close to their relatives and be supported by the staff if required.

## Is the service responsive?

### Our findings

At our last inspection in November 2014 this service was rated Good in Responsive. At this inspection it continued to be rated Good for the following reasons:-

People and their relatives confirmed they had been involved with their care plans and reviews as required. One relative told us, "When [person's name] came to live at the home, we were asked about what they liked and disliked and any routines they liked to stick to. We're very pleased because they [staff] have done that." Another relative told us, "They [staff] always call us if anything changes with [person's name]. We saw staff shared information at the start of their shifts to ensure people received consistent care and support, the way they preferred.

In the PIR the registered manager said, "Our care plans are dynamic and updated soon as a change in circumstance or needs is identified. The care plans identify what our clients can do for themselves and areas where they require support. We promote our clients to be as independent as they possibly can and promote choice."

The provider told us they wanted people to have as many opportunities as possible including the chance for employment and involvement in the community. The provider had purchased a small holding and some animals, where if people chose they could spend time on there caring for the animals. We heard an example how people living at the home enjoyed once a week cleaning the church pews. One person had been supported by the registered manager to follow their dream of having a flying lesson. They told us "I really enjoyed it; they let me have the controls for half an hour."

We discussed with the registered manager how responsive the provider was in relation to equality, diversity and human rights; and how they promoted inclusion for people of all religions, cultures and sexual orientation. They gave us examples of how they respected people's chosen religions, cultures and sexual orientation and any specific instructions were recorded in people's care plans for staff to follow. For example we heard how people were supported to follow the religion of their choice.

The provider had a complaints procedure for people, relatives and staff to follow should they need to raise a complaint. We found the provider had given information to people about how to raise a complaint in an easy read format so everyone could access help. Everyone we spoke with told us they had never felt the need to make a complaint but felt confident if they raised a concern the registered manager and provider would deal with it..

We saw the provider had sought to gain people's end of life wishes and these were recorded in people's support plans for staff to follow in the event of their death. We heard from the provider that sadly one person had recently passed away and they were in the process of planning their funeral. They were able to describe how the person's last wishes were going to be respected and how the staff had been able to fulfil their dreams of having a piper at the funeral because they loved everything Scottish.

## Is the service well-led?

### Our findings

At our last inspection in November 2014 this service was rated Good in Well-led. At this inspection it continued to be rated Good for the following reasons:-

A registered manager was in post at the time of our inspection. The registered manager is also the registered provider/owner of The Willows who has worked there over thirty years. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The registered manager and their family live at the property and consider it their family home. People living at The Willows are considered part of the family. In the PIR they said, "The manager takes an active part in the delivery of care, activities and outings and is accessible to the clients when on site." On the day of the inspection we saw this occurred, the registered manager had been out to visit a relative with one of the people living at the home.

People and their relatives knew who the registered manager was and were complimentary about the culture within the home. A person living at the home described the manager as "Really nice". A relative told us, "I wish I could be as nice a person as [registered manager's name]." Staff told us the registered manager was "Very approachable and supportive." Staff understood how their roles contributed to providing a quality service by following policy and procedures, the completion of training and upholding the values of the service. One staff member said "I love working here."

People's opinions of living at the home were regularly sought on a weekly, monthly and yearly basis. We saw people had been asked to complete a questionnaire in easy read format. All the responses recorded were very complimentary. Relatives had been asked their opinion and most had scored the home as 'excellent'. Visiting professionals were encouraged to add their comments and these included "Staff always make you feel very welcome, great communication." Another person had written when asked, "What could we do better?" "Absolutely nothing, you are marvellous, wonderful."

The registered manager carried out checks to ensure the service met people's needs effectively and safely. This included checks of care plans, medicines and health and safety. Any concerns with the quality checks were recorded together with how they had made improvements and action taken for future learning. The registered manager told us they had plans to develop the activities on offer over the next twelve months which they had confirmed in the PIR by stating, "We want to introduce more activities, our clients love going out, however when the weather is inclement we want to have a huge choice of activities for clients to do and develop on them, over the last 12 months we introduced new activities which include chocolate making, candle craft, song writing, pottery, balloon races, music and bingo."