

Mr & Mrs J T Orley

Wordsley House

Inspection report

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26 February 2020

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27 April 2020

Ratings

Overall rating for this service	Good ●
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Is the service safe?	Good ●
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Is the service effective?	Good ●
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Is the service caring?	Good ●
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Is the service responsive?	Good ●
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Is the service well-led?	Good ●
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Summary of findings

Overall summary

About the service

Wordsley House provides accommodation for up to eight people who require personal care. The service supports younger adults and older people some of which were living with mental health needs. At the time of this inspection there were eight people living at the service.

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

People who used the service and their relatives were happy with the care and support they received. Without exception, people and their relatives said staff were kind, caring and respectful.

People and their relatives told us the service was safe. Appropriate safeguarding procedures were in place and staff had been trained in how to protect people from abuse. People managed their own medicines safely. The provider managed risks well and learned from accidents and incidents. The home was clean and health and safety checks had been carried out.

There were enough staff on duty to meet people's needs. Staff received the training, support and information they needed to provide effective care. The provider had effective recruitment and induction procedures to ensure only suitable staff were employed.

Staff had developed good relationships with people. They ensured each person felt included and valued as an individual. People's care was based on detailed assessments and person-centred care plans. People and those important to them had been involved in planning and reviewing their care.

People were engaged in meaningful activities of their choice. There were good links with the local community. People maintained important relationships with their friends and relatives. People and their relatives did not have any complaints about the service.

People were supported with their healthcare needs and had access to healthcare professionals when required. 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.

The provider had effective systems for monitoring the quality of the service, gathering feedback and making continuous improvements. People, their relatives and staff were empowered to make decisions and contribute to the running of the home.

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 7 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.

Wordsley House

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. The Expert by Experience had personal experience of caring for someone who used this type of care service.

Service and service type

Wordsley House is a 'care home'. People in care homes receive accommodation and nursing or personal care as a 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 the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service. We sought feedback from the local authority and professionals who worked 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.

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.

During the inspection

We spoke with five people who used the service and two relatives. We spoke with the registered manager, deputy manager and two care staff.

We spent time with people, observed how they were being cared for and reviewed a range of records. This included two people's care and medication records. We looked at the personnel files for two staff and we reviewed records related to the management and quality assurance of the service.

After the inspection

We continued to seek clarification from the registered manager to validate evidence found.

Is the service safe?

Our findings

Safe – this means 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 remained good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- The provider had effective safeguarding systems.
- People told us they felt safe and their needs were met. One person told us, "This is the best place for feeling safe." One relative said, "The staff give continuous care that's how they keep [name] safe."
- The registered manager and staff had a good understanding of safeguarding procedures. Staff had been trained in how to protect people from abuse.

Assessing risk, safety monitoring and management

- Individual risks to people were assessed and monitored. Care plans were in place to help mitigate risks and were reviewed regularly.
- The provider had systems to support people in the event of an emergency, such as a business continuity plan. Each person had a Personal Emergency Evacuation Plan which contained information about how best to support them during an evacuation.
- The environment was well maintained and equipment was safe.

Staffing and recruitment

- The provider operated a safe recruitment process.
- People told us there were enough staff to support their needs. One person said, "There is always enough staff."

Using medicines safely

- Appropriate arrangements were in place for people to safely manage their own medicines.
- Staff were knowledgeable about people's medicines and had completed relevant training.
- Medicine audits and checks were completed regularly.

Preventing and controlling infection

- The home was clean.
- Staff followed the provider's policies and procedures to promote good infection control.
- Equipment was available to help prevent the spread of healthcare related infections.

Learning lessons when things go wrong

- The service responded appropriately when accidents and incidents occurred.

Is the service effective?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question remained good. 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 and choices were recorded in detailed assessments and in line with best practice. These were used to develop people's care plans.

Staff support: induction, training, skills and experience

- Staff were appropriately trained and carried out their roles effectively.
- Staff received regular supervisions, an annual appraisal and felt supported.

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

- Staff were knowledgeable about people's special dietary needs and preferences.
- People told us they enjoyed their food and had a choice of meals. They were supported to prepare meals and maintain a balanced diet. Comments included, "We get substantial meals" and "We get lots of choice."
- People's weight was monitored closely. Detailed records were completed and regularly reviewed.

Professionals were involved as appropriate.

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 who used the service had the capacity to make their own decisions.
- The registered manager and staff had a good understanding of the MCA.

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

- Staff worked with professionals to ensure people's healthcare needs were met. One healthcare

professional commented, "Staff know people well. I feel residents are safe and comfortable."

- People's care records showed relevant health care professionals were involved with their care. This included, GPs, district nurses, dentists, opticians, physiotherapists and chiropodists. One local authority professional said, "Whenever additional professional or medical input is needed the home is very proactive in sourcing it in a timely manner."

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

- The home was comfortable and well furnished. People's rooms contained personal possessions and were decorated to reflect their individual personalities and preferences.
- The provider adapted the home to meet people's changing needs.

Is the service caring?

Our findings

Caring – this means 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 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 supported by staff who were kind, thoughtful and professional. Comments included: "The staff are very kind, they have known me a long time", "Everyone is so friendly" and "[Name] receives good care. I couldn't find better. They are a nice little family here."

- Staff knew people very well and ensured they received the care and support they needed.

One person told us, "I am happy with the care I receive." One relative said, "Staff really understand [name] and their little ways."

- The provider and staff recognised equality and diversity. People were supported to maintain their religious beliefs.

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

- People and their relatives were involved in care decisions. One person told us, "I manage my own medicines." And another person said, "I have a key to my room."

- The staff team worked well together and with the people who used the service. One staff member told us, "It makes me happy when the people are happy."

- Information was available for people to access advocacy services. Advocates provide impartial support to people and communicate decisions.

Respecting and promoting people's privacy, dignity and independence

- Staff maintained people's privacy and dignity. One relative told us, "Staff always ask their permission before doing anything."

- People were respected, showed patience and understanding. One relative said, "[Name] certainly gets individual attention."

- People's independence was promoted. One person told us, "We get a lot of personal freedom."

Is the service responsive?

Our findings

Responsive – this means that services met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question remained good. 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 had personalised care plans. They clearly described the care and support people required to meet their needs. One person told us, "I have a fair idea what my care plan says, I have seen it." One relative said, "I come to all the meetings, every review."
- People were empowered to make choices. They had as much control of their care, as possible. Comments included, "I'm early to bed, early to rise, that is my choice" and "I can go out when I want."

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- People were supported to take part in activities, events and outings of their choice. People told us, "I play chess and go on my computer", "We play with the cat", "I listen to music and watch television" and "I like to visit my mum and dad."
- Staff supported people to maintain important relationships. One relative told us, "We had a family party here for [name] so they could see the grandkids. The manager put a little buffet on for us."
- Relatives could visit whenever they wanted and were always made to feel welcome. One relative told us, "Staff are very approachable. They say, 'come in and have a cup of tea and a sandwich.' [Name] loves me having tea with them."

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People who used the service were able to communicate their needs to staff without support.
- People had access to Wi-Fi and they used technology to communicate with relatives.

Improving care quality in response to complaints or concerns

- The provider had a structured approach to dealing with complaints.
- People and their relatives did not have any complaints or concerns although were aware of the process. Comments included, "I would talk to staff if I was unhappy" and "I have never made a complaint. If I did, I would go straight to the manager and it would be sorted, I'm certain."

Is the service well-led?

Our findings

Well-Led – this means 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 remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The home had a positive atmosphere which was open and inclusive.
- Staff morale and teamwork were good. They were enthusiastic about ensuring people received good care and support.
- People and their relatives told us the registered manager and staff were very approachable. Comments included, "The manager is exceptional" and "This place has saved my life."

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

- The registered manager and staff understood their roles and responsibilities. One local authority professional told us, "The manager is very involved in the running of the business and knows her residents very well."
- The provider monitored the quality of the service to make sure a high standard of care was delivered.

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 acted in an open and transparent way. They submitted statutory notifications to CQC following significant events at the home.

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

- The views of people, relatives and staff were regularly sought. Their feedback was used to make changes and improvements to the service. One person told us, "If you have a problem the staff will always listen to you." One relative said, "I can talk to the manager about anything."
- Staff told us the management team were very supportive.

Continuous learning and improving care

- The provider had an effective quality assurance system to review areas of the service and to drive improvement.

Working in partnership with others

- Staff worked in partnership with local commissioners and key organisations to achieve good outcomes for

people. One healthcare professional commented, "I feel staff put all residents first. They have excellent communication skills and cater for all resident's needs. I believe they go the extra mile to ensure residents have a good quality of life."

- The service had good links with the local community.