

Sovereign (Coxwell Hall) Limited

# Coxwell Hall and Mews Nursing Home

## Inspection report

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## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Outstanding 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

### About the service

Coxwell Hall and Mews is residential care home providing personal and nursing care to 57 people with a range of conditions, including people living with mental health conditions and dementia at the time of the inspection. The service accommodates up to 66 people in one adapted building.

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

People received care and support that in many cases was life changing for them. The staff excelled in managing people's complex needs, including distressed behaviours by using responsive techniques that had a positive impact on people's well-being. We saw many examples where staff successfully contributed to people's quality of life, this included people who in their previous settings were described as 'complex'.

The service was led by a registered manager who was completely dedicated to providing high quality care that achieved the best possible outcomes for people. People benefitted from exceptional care delivered by a dedicated staff team who were committed to the vision and values of the service. Without exception feedback about the registered manager was exceedingly positive, both in relation to her exceptional leadership skills and her caring, empathetic approach to everyone. The registered manager constantly looked for ways to improve the service and had effective systems in place to monitor the quality of the service.

There was a warm, welcoming atmosphere that was promoted by caring, compassionate staff. People enjoyed worthwhile relationships with staff, who valued and respected them. There was a strong commitment to providing personalised care that appreciated people for who they were and recognised the value of their life experiences. Professionals were extremely impressed by the positive outcomes people had achieved through the support and encouragement provided at the service. We received exemplary feedback from several external professionals praising the significant impact living at Coxwell Hall and mews had for people.

The staff excelled in caring for people living with dementia. The service achieved an accreditation as a 'Butterfly Care Home'. By fully embracing the Butterfly approach staff created a nurturing environment where people's feelings mattered most. This culture was well embedded in the day to day care delivery and ensured people had support that recognised their personalities and individuality beyond their diagnosed conditions. People enjoyed a range of activities and staff took every opportunity to engage people in the activities of daily living. There was a collaborative approach to activities which meant all staff were involved in ensuring people participated in activities of their choice.

Staff received outstanding support from the registered manager both at a professional and personal level. Staff had completed high quality training that ensured they were confident and competent at delivering person centred care. Staff were encouraged and supported to develop their skills and follow a career progression within the service.

The provider ensured their practices were in line with the current good practice, guidance and legislation. There was a focus on continuous development, for example the environment was being developed in line with standards set out in research around environments that improved the impact on people living with dementia

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 felt safe living at the service and for some this had a significant impact on their well-being. There were always sufficient staff available to meet people's needs. Risks were assessed and there were plans in place to ensure risks were managed. Staff were confident in conflict resolution and in supporting people who could experience distressed behaviours. Medicines were managed safely.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was good (published 19 May 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

#### Follow up

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

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was safe.

Details are in our safe findings below.

### Is the service effective?

Outstanding ☆

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Outstanding ☆

The service was exceptionally caring.

Details are in our caring findings below.

### Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in our responsive findings below.

### Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our responsive findings below.

# Coxwell Hall and Mews Nursing Home

## **Detailed findings**

### Background to this inspection

#### The inspection

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

#### Inspection team

The inspection was carried out by two inspectors.

#### Service and service type

Coxwell Hall and Mews 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

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority. 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 three people who used the service and three relatives about their experience of the care provided. We spoke with one visiting health professional and a visitor. We spoke with seven members of staff including the registered manager, the operations director, nurses, care workers and housekeeping staff. 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. Due to the nature of people's conditions people were not always able to speak with us. The majority of the judgements were formed observing staff interactions and feedback from relatives and professionals.

We reviewed a range of records. This included four people's care records and multiple medication records. We looked at one staff file 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 received written feedback from three people's relatives, one visitor, five health and social care professionals and 12 members of staff which included maintenance staff and activity staff. We spoke with one healthcare professional and an advocate who supported people living at the service.

# 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 told us they felt safe. One person said, "I am very safe here." This was important to the person as they told us they had not felt safe in their previous accommodation.
- Staff understood their responsibilities to identify and report any concerns relating to harm or abuse. One member of staff told us, "I've had the training so if I thought something was wrong I'd tell my manager." Staff were aware of the external agencies they could report to if they felt action had not been taken by the registered manager or provider.
- The provider had policies and procedures in place that ensured effective action was taken when there were any concerns relating to harm and abuse. Incidents were reported to external agencies appropriately.

Assessing risk, safety monitoring and management

- Care plans included risk assessments and where risks were identified there were plans in place to manage the risks. This included risks associated with choking, pressure damage and distressed behaviours.
- Where people posed a risk to themselves or others due to distressed behaviours there were clear de-escalation plans in place. Where necessary there were physical intervention care plans which identified when physical intervention should be used. These had been written with input from appropriate health professionals. Care staff had been trained in safe physical intervention techniques.
- There were effective systems in place to monitor the premises and equipment to ensure people were safe. This included fire systems, hoisting equipment and pressure relieving equipment.

Staffing and recruitment

- There were sufficient staff to meet people's needs. A relative told us, "There is always someone to look after them wherever they are." One member of staff told us, "Yes, there's enough so we can do all what we need to do and still do activities."
- Throughout the inspection the atmosphere was calm, and staff did not appear rushed. Staff had time to spend with people, chatting and supporting them to engage in activities.
- There were effective recruitment procedures in place to ensure the provider made safe recruitment decisions.

Using medicines safely

- There were systems in place to ensure medicines were ordered, stored and disposed of effectively. Staff had completed training in medicines management and had their competencies assessed to ensure they were skilled to administer medicines.
- Where people were prescribed 'as required' medicines there were detailed plans in place. This ensured people received those medicines when needed.

- Care plans identified where people may require medicines covertly. Covert medicines are medicines that are hidden in food or drink without the knowledge or consent of the person receiving them. Care plans included consultation with the person's GP and the pharmacist to ensure medicines were safe to be administered in this way. Staff told us administering medicines covertly was a 'last resort' and that other techniques would be used first.

#### Preventing and controlling infection

- The service was clean and free from malodours.
- Staff had completed infection control training and used personal protective equipment effectively.

#### Learning lessons when things go wrong

- Accidents and incidents were reported and recorded. The registered manager and provider had systems in place to ensure all accidents and incidents were analysed for trends and patterns.
- Systems were in place to enable learning from accidents and incidents. This included discussions at team meetings to create a learning opportunity for staff.



# 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 had improved to outstanding. This meant people's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive.

Staff support: induction, training, skills and experience

- People benefitted from highly skilled staff who had an in-depth understanding of dementia and managing distressed behaviours. Staff successfully managed people's anxiety with a personalised approach that recognised their individual needs. Throughout the inspection we saw how staff used their skills to respond effectively to people's anxiety. Staff stepped in, using distraction techniques when people showed signs of distress. This resulted in a service that was able to manage complex behaviours that benefitted people's well-being.
- Relatives were extremely complimentary about the skills of staff. One relative spoke of the improvement in the person after they moved to the service. They said, "It is very noticeable how much more settled and stable [person] has become since moving care home to Coxwell, and most of this seems to be down to the skilful and patient way the staff handle [person]. I've been impressed."
- Feedback from external professionals showed they were equally impressed by the skills of staff. One professional told us, "Nursing staff are very experienced and are excellent role models." Many of the health professionals described how staff skills in managing distressed behaviours contributed significantly to the positive outcomes for people.
- Staff completed specialist training in conflict management, physical intervention and dementia care. This had a positive impact on people and how staff approached them. One member of staff told us, "New advanced training at all levels has been introduced and the benefits of this are now obvious throughout the home and within everyday working practices, one particular example that springs to mind would be staff now being skilled in dealing with conflict and tension. It is my feeling that everyone now feels more knowledgeable which in turn has installed confidence within the care staff and has provided that togetherness, that team spirit which now impacts on our residents so positively."
- One person had moved to the service displaying extremely distressed behaviours. They had experienced an unsuccessful placement at a previous service. Staff understood that all behaviours are a way of communicating and took time speaking with the person and getting to know them to understand what the person was trying to communicate. Staff learnt that due to the person's condition, repositioning could be painful. They worked with the person to find a more comfortable way of supporting them to move. As a result the person rarely displayed distressed behaviours. When they did staff understood the need to spend time with the person talking to them to understand.
- Staff felt extremely well supported to develop their skills and knowledge to meet people's individual needs. One member of staff told us how they had been supported to develop through their career at the service and was now being supported by the registered manager to complete their nurse associate training.
- All staff, regardless of their roles, completed training to ensure they were able to support people who could

present with distressed behaviours. One member of ancillary staff said, "I am happy with the training, I've had the same training as the carers." This showed a commitment from the provider to ensure staff had the expertise to interact with and support people appropriately.

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

- A detailed assessment was completed prior to people moving into the service. People's experience of the assessment process was extremely positive. One relative told us, "[Registered manager] came and met with [person] and she was incredible with [person]. I knew then that this was where I wanted [person] to go."
- Assessments were used to consult with staff and determine whether Coxwell Hall and Mews would be a suitable home for people. A person-centred care plan was then developed using the assessment, which included information to meet current standards including oral health care plans, accessible information standard (AIS) and current best practice relating to dementia care.
- There was continuous assessment and review to ensure people's needs were met. This included reviews of people's medicines. There were many examples of people's medicines, that were prescribed to manage complex behaviours being reduced as a result of the person-centred care they received.

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

- The registered manager had done extensive work to improve the environment to ensure it met people's needs. This had included creating mood boards for the refurbishment using colour therapy which aimed to create colours that helped to balance moods. The plans had been made using research with the assistance of a university specialising in colours and fabrics to enhance dementia care.
- The provider had purchased twelve specialist chairs which ensured people were able to sit comfortably. The chairs were mobile and enabled people to be transferred around the service without being repeatedly hoisted. The chairs also enabled people to be hoisted in the privacy of their own rooms.
- The environment had been adapted to ensure that any areas that were at increased risk of triggering distressed behaviours were managed. This had resulted in clearing corridors to enable people to pass each other easily and creating safe outside spaces where people could walk freely.
- People were involved in decisions about their personal environments and were encouraged to personalise their rooms as they wished. We saw some people chose to display various items of importance to them.

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

- People received excellent support around the nutrition. Staff had a good understanding of the impact dementia may have on a person's dietary intake and were skilled ensuring people had sufficient food intake. People were supported to have snacks and meal times were staggered to enable staff to have time to sit with people, creating a social atmosphere that encouraged people to eat.
- Staff were exceptional of finding ways to support people in relation to their dietary needs. This included people who were at risk of weight loss and those on weight loss programmes. One person had come to Coxwell Hall and Mews as a bariatric patient. Bariatric is a term used for people who are assessed as overweight or obese. The person had extremely distressed behaviours due to pain. Staff worked with the person to agree a weight loss programme ensuring they were involved and agreed to the programme. As a result of the significant weight loss the person's pain had reduced and they rarely displayed distressed behaviours. This meant the person enjoyed an improved quality of life and well-being.
- People and relatives were positive about the food they received. One relative told us, "[Person] is really happy with the food, he is putting on weight. I am happy he is here."
- Where people were at risk of weight loss this was closely monitored to ensure people were eating and drinking. There were snacks and drinks available throughout the day.
- Specific dietary needs were met and care plans identified the consistency of food required using the International Dysphagia Diet Standardisation Initiative (IDDSI). IDDSI provides a common terminology to describe food textures and drink thickness.

- People were shown a choice of meals and encouraged to make a decision about what they would like to eat. Staff used their detailed knowledge of people to support them to make those decisions.
- Where possible, staff sat with people and enjoyed a meal, this created a relaxed environment which encouraged people to eat and drink.

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

- The service empowered people to make informed choices about their health. They were supported to have access to information to help that decision. One person required some specialist eye tests. Staff recognised going to the appointment would cause extreme distress. They liaised with health professionals and supported the decision the person made in relation to their treatment.
- The service had purchased a defibrillator to ensure staff and people had access to support should they experience a cardiac arrest. The whole staff team had been trained on how to use the defibrillator.
- The service worked collaboratively with health and social care professionals to ensure people were supported to move to the service or to move to another service in a measured and calm way. The registered manager had worked with a social care professional when the decision was made that a person was to move to another service. It was decided that the person had settled so well at Coxwell Hall and Mews that a move would not be in their best interest. The registered manager worked with the professional to find a solution that enabled the person to remain. The person remained settled and happy at the service.

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.

- Staff had completed training in MCA and had a clear understanding of how to support people in line with the principles of the act. One member of staff told us, "I assume capacity and offer choices."
- The inclusive culture within the service ensured people were involved in decisions wherever possible. Staff used their knowledge of people to maximise their ability to make decisions.
- Care plans clearly documented where people had been assessed as lacking capacity to make decisions and there was clear evidence of decisions being made in people's best interest.
- Where any restrictions were necessary in order to meet people's needs these were always the least restrictive option and were legally authorised.

## 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 now improved to outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- There was a strong person-centred culture that ensured everyone was valued, loved and respected. Everyone, without exception, spoke of the incredible kindness, compassion and understanding shown by staff. One relative told us of their experience when their loved one moved to Coxwell Hall and Mews, "I felt the staff were there for me as well as for [person]. A kind word, a hug or just a chat, they are great." A professional said, "The staff genuinely care for residents. They are absolutely exceptional at what they do."
- Staff at all levels were passionate about their roles, showing an overwhelming commitment to ensuring people were at the heart of the service. We received a significant amount of feedback from staff displaying their dedication to improving the lives of everyone at the service. One member of staff said, "I love seeing residents come so far and achieving what they couldn't before, the smiles and the laughter of everyone."
- Throughout the inspection there was an exceptionally caring, relaxed, happy atmosphere. Everyone enjoyed each other's company and interactions showed how people and staff valued each other. Without exception the interactions between people and staff at all levels were kind and compassionate. Staff never passed by people and took time to have meaningful conversations with them, using their knowledge and understanding of people to engage with them on a personal level. One person walked constantly, staff walked alongside them chatting and laughing, talking with them about their family and their past.
- One person had moved to the service with few clothes. The person displayed distressed behaviours, however staff took time to engage with the person and spent time learning about them, the clothes they liked and the colours they preferred. They then chose some clothes based on the person's choices. This resulted in the person feeling valued and being dressed in the way they preferred.
- Staff went to exceptional lengths to get to know people and engage with them in a way that valued them. One person came to the service totally immobile, having been described as 'aggressive' at their previous placement. Staff quickly identified that the person liked particular television programmes and responded positively to praise. The person is now able to walk and will often 'show' his skills to staff who applaud the improvement. Staff ensure the person is involved in all aspects of their care and had identified the person enjoyed writing. The person was involved in recording their care records which included completing an incident report when they had experienced a fall. This meant the person was now enjoying an improved quality of life and was truly valued as an individual.
- Comments we received about the service described the family atmosphere and the important impact relationships had on people's well-being. One relative told us, "I have no other family, but I feel [person] and I are part of the Coxwell family and I am so grateful for all that [registered manager] and the team do to give [person] the best quality of life."
- There were many examples of staff using their caring approach to achieve significantly improved outcomes

for people. One visitor told us how the person they visited had improved since moving to live at the service. They told us, "When [person] came to Coxwell she was very withdrawn, very, very slow in replying, not initiating conversation, not able to get out of a chair by themselves. [Person] is (now) remembering snippets of poetry, authors, friends, places [person's] been to and is seeing the funny side of things. [Person] can also, with difficulty, get out of a chair and her walking is improving. It is so good to see these improvements and I commend the care [person] has been getting that has enabled [person] to get to this position. I am impressed with the kindness of the carers." Staff had identified this person's love of poetry through exploring their work history with them and bringing in books to read together. The service had purchased large print books and a magnifying glass which had also enabled the person to read independently again. The person was also being supported to go out and watch a play from her favourite author. This was an outstanding achievement as when the person had moved into the home, five months previously, they had not had any speech and were not interacting with people.

- The service promoted an inclusivity that ensured diverse needs were respected. The service supported both staff and people from a range of ethnic backgrounds and ensured everyone was treated equally. One member of staff told us, "Coxwell Hall and Mews, it's not only a nursing home but a family made up of people who respect each other no matter of nationality, religion or beliefs."

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

- There was an inclusive approach to care that valued people and ensured they were included in decisions about their care. Staff protected people's rights and ensured that advocacy services were involved to guarantee people's voices were heard. For example, the registered manager had been informed, at short notice, that a person was to be moved to another service. The person's relative did not want the move to take place as they would be unable to visit. The registered manager recognised the importance of the ongoing relationship to both the relative and the person. They arranged an urgent visit by the person's advocate who was able to support the person and their relative to ensure the person's voice was heard. Subsequently a best interest decision was made for the person to stay at the service where they were settled and happy. This had a significantly positive impact on the person's well-being and enabled them to have regular contact with their relative.

- Relatives were extremely involved in decisions and felt valued as partners in people's care. All relatives we spoke with gave examples of how they were as involved as they wished to be in decisions about people's care that resulted in the best outcomes for people. One relative told us, "I have just had a review of [person's] care plans with one of the nurses and I was asked to look at them all a few months ago as well when they were renewed. I feel very engaged in [person's] care and able to input. I firmly believe that [registered manager] and the team are giving far better care than I could ever give to provide [person] with the best quality of life possible."

- Staff were innovative in finding ways to ensure people spent their time as they wished whilst ensuring they received the support needed. At lunchtime people were encouraged to sit at the table for their meal. However, through the meal people stood up and moved to different areas. Staff did not try to guide them back to the place they had been sitting. They took their meal to them. For some people this meant moving the meal several times to ensure they ate enough food to meet their needs. One person declined to sit down, staff supported them to eat whilst they stood. Staff ensured the dining experience remained calm and was a sociable, relaxed occasion.

Respecting and promoting people's privacy, dignity and independence

- The service placed significant emphasis on promoting people's independence. There were many examples of people's confidence and independence improving as a result of the support they received. One person had required one to one care when they moved to the service. Within three months the person no longer required this support. The person had been supported to buy their own fridge and went shopping weekly to buy food they liked as this was their wish. This enabled the person to maintain control of their decisions.

- People's privacy and dignity was respected at all times. Staff were respectful when speaking with and about people, showing a true commitment to valuing people as individuals. One member of staff said, "This is about treating them as a person, I treat people as I would want to be treated."
- Staff promoted people's dignity and looked for ways to ensure they were able to support people to maintain elements of themselves that were important. One person had always taken pride in the colour of their hair. The person's mental health had declined, and they became distressed when staff tried to colour their hair. Staff had purchased a spray in colour which enabled the person to maintain this important element of their individuality without causing distress.

# 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 now improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- Health and social care professionals were extremely complimentary about the positive impact living at Coxwell Hall and Mews had on outcomes for people. One professional told us, "From the day my client moved in the positive changes kept happening to an extent that we went from risk of unintentional self-neglect, aggressive behaviours, racially disinhibited language in the previous care home to my client having a beaming smile on my visit telling me how much he felt respected and responded to by staff at Coxwell Hall and Mews Nursing Home." Another professional told us the service supported people with extremely complex needs in a way that had not been achievable in other health or care environments.
- Many people living at the service had complex mental health needs and came to live at the service from other health or social care settings where their needs could not be met. Health professionals were extremely positive about the huge improvements noted in people's well-being when people moved to the service. One professional, who had supported a person to move to the service said, "[Person's] behaviour was unmanageable even in the local hospital, where [person] was so challenging, [person] abused several nurses and security was called every 30 minutes. [At Coxwell Hall and Mews] the outcome was unbelievable. My client who used to have challenging behaviour episodes every single hour managed to go 72 hours without single incident." This meant there was a significant improvement in this person's quality of life and they now enjoyed being part of family community at Coxwell Hall and Mews. .
- People received truly personalised care that genuinely valued them as individuals. All staff knew people extremely well and used this knowledge to interact with them in a way that consistently promoted their physical and mental well-being. There were many examples of people's lives improving when they had moved to Coxwell Hall and Mews. Relatives and professionals told us of the significant improvements they had seen in people. One professional said, "Since their admission to Coxwell and through the care that is delivered I noticed the positive impact on my clients. The support that they have been receiving is absolutely outstanding."
- Immense planning went into ensuring people's needs could be met by the service. Prior to people moving to live at Coxwell Hall and Mews, the registered manager completed a person-centred assessment, involving the person, relatives and professionals. When the assessment was complete the registered manager met with staff responsible for the unit where the person was to live. They discussed the holistic needs of the person and the potential impact on people already living on the unit before a decision was made as to whether the person's needs could be met. This ensured people were admitted to an environment where they could be supported effectively.
- Care plans were extremely person-centred and recognised people's uniqueness. Care plans concentrated on who people were, the lives they had lived and who was important to them. One professional told us, "I



wanted a bespoke care plan to be created for my client as I knew that anything less would not be sustainable. Instead of saying "This is how we do things here" which is what I had been getting every day in my search, this care home manager [registered manager] said, "Tell me what you're aiming to achieve for [person] and I will see if this is equitable here." I explained, she listened, and a care plan was formulated." The person had gone on to be supported and achieved positive outcomes

- Staff approach to people was innovative and looked closely at the triggers to behaviours rather than at the behaviours themselves. This resulted in hugely improved outcomes for people. One person was admitted from another care home where they had been described as being 'aggressive'. It was reported to staff that the person would grab at staff and hold them. On admission to the service the person required one to one care. Staff approached the person and if they 'grabbed' staff then staff stayed and sat with them. The person then began to lay their head on staff members shoulder and relaxed their hold. Staff understood that the person was holding staff as they did not want to be left alone. Staff used this information to support the person and provided them with reassurance. As a result the person no longer required one to one care and showed a genuine warmth towards staff.

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 service was accredited as a 'Butterfly Care Home'. The accreditation required regular audits by the organisation Dementia Care Matters to ensure the standards were being maintained. The Butterfly Care Home approach improves the lived experience for people living with a dementia. This culture was truly embedded in the service, where staff used every interaction to ensure people felt safe, loved and valued. Staff did not walk past people and took every opportunity to engage in a meaningful way. This had a significantly positive impact on people
- Staff went to exceptional lengths to ensure people had access to activities that met their individual needs. One person had enjoyed collecting specific items when living in their own home. On admission to the service staff had immediately engaged with the person to find ways to encourage this interest. A lap top was purchased, and staff sat with the person helping them to look for the items on the internet. One member of staff told us, "[Person] is in his favourite place when sat on [person] laptop with staff looking at [item] to bid on. [Person] as great fun talking about all [collection] and having the staff spend time with [person] to look and talk about them, before [person] came to us we were told [person] wouldn't come out of room and [person] didn't want to talk to anyone."
- Activities formed part of day to day life at Coxwell Hall and Mews. The whole team had an outstanding approach to providing and contributing to keeping people occupied. There was a vibrant, social atmosphere that was inclusive of everyone.
- The registered manager was working to improve community involvement in the service. They were building a Coxwell Friends group to involve families, friends and the local community. In addition the service accessed local public houses, the local choir and the local scouts group visit and the local nursery group visited weekly.
- There was a garden group who grew their own vegetables, two people believed they worked as gardeners at the service and one person received a weekly payslip. This resulted in the person feeling valued and respected for their contribution.
- The service had developed a sensory room with an interactive floor which was very beneficial for many people who lived at the service. One person sang when interacting with the floor showing how much they enjoyed the activity.
- Staff sought additional ways, such as pet therapy to engage with people. The service had pet rabbits which were clearly enjoyed by all. A member of staff took the rabbits to people. Where people did not wish to sit with the rabbits the member of staff walked alongside them. This approach had a significant impact on one person who was not engaging with other people around them. The member of staff placed the rabbit in the



person's eye line and they immediately responded and smiled. They were then guided to a seat and sat for many minutes petting the rabbit on their lap.

- Staff went to exceptional lengths to support relationships that were important to people. One person, who's mental health had improved significantly since being supported at Coxwell Hall and Mews was supported to go out for dinner with a relative to celebrate an important event. This had a significantly positive impact on both the person and their relative who described the evening as "amazing."
- The service had strong links with the community to enable people to feel connected with groups of people outside of the service. This included visits from a local choir and local children's nursery. People went out with staff and the registered manager to local shops and to help with errands for the service. These links had improved people's well-being. One person who was not able to communicate verbally always joined in singing with the local children when they visited. Staff told us how much this meant to the person and staff.

#### 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.

- Care plans contained detailed information relating to people's communication needs. This included an assessment of needs and how those needs should be met. Where English was not a person's first language the service had made cards with key words to help staff communication. Staff were partnered with people if they shared the same first language. This had a significant impact on people. We saw people talking and laughing with staff who spoke the same language.
- Staff were wholly committed to finding ways to communicate with people. This included using electronic tablets, picture cards and signs. One member of staff told us how one person's communication had improved through persevering with signs. The person was now able to use signs and was also trying to communicate verbally.

#### End of life care and support

- People benefitted from staff that understood the importance of ensuring pain free and dignified death. Staff ensured people were supported in a person-centred way at the end of their life. One member of staff told us how they had sat with a person and sung their favourite songs to them. Another person needed to be admitted to a hospital and the registered manager stayed with the person as they had no relatives to stay with them.
- There were many cards and letters of thanks displayed from relatives whose loved one had been supported with end of life care at Coxwell Hall and Mews. All were extremely complimentary about the care and support both the person and relatives had received.
- Relatives were kept informed when people were nearing the end of their life and were supported to be as involved as much as they wished. One relative told us, "We had a good discussion re end of life care."
- Care plans contained people's end of life wishes, which included where people wished to be supported and whether they wished to be admitted to hospital.

#### Improving care quality in response to complaints or concerns

- There was a complaints policy and procedure in place. Records showed that all complaints received had been investigated and responded to in line with the provider's policy.
- None of the people we spoke with had any complaints. Relatives and visitors were comfortable to raise any concerns with the registered manager and were confident they would be dealt with in a timely and effective manner. The registered manager had an open door policy and saw concerns and complaints as a way to improve the service.

# 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 now improved to outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- There was an exceedingly positive culture that ensured people were at the heart of everything the service did. The registered manager was totally committed to providing high quality care that achieved the best possible outcomes for people. The registered manager provided exceptional leadership and had developed a dedicated staff team who were committed to the vision and values of the service. We reported on outstanding results achieved by the team as a result of excellent leadership in the caring and responsive sections of this report.
- The registered manager had been responsible for the introduction and accreditation of the service becoming a 'Butterfly Care Home'. This was central to the truly person-centred culture that ensured people were valued. The registered manager was passionate about ensuring people were valued for who they were and worked tirelessly, with staff to ensure this was embedded in all the service did. The registered manager told us, "All the team are recruited for their caring passionate nature and are trained in person centred care, workshops for Butterfly are held every two months, and Coxwell have a core Butterfly team. All staff are motivated to the delivery of exceptional high standard of care."
- There was an extremely open and honest culture where everyone was comfortable to have their say. One member of staff told us, "I feel the biggest change in Coxwell now is related to the openness, honesty and transparency that is encouraged, work correctly and compassionately all day every day. Speak up if problems are encountered or changes need to be made and do not try to hide them. If we are getting it right all the time, then we have nothing to hide."
- Everyone gave outstanding feedback about the registered manager. One relative told us, "[Registered manager] provides fantastic leadership." Professionals were particularly impressed by the registered manager's ability to welcome people into the service who lived with extremely complex mental health needs, who had been unsuccessfully supported in other services. One professional told us, "The manager responded to my request [regarding a person with complex needs] with such empathy that I knew effectively this was going to be the calm response that my client would respond to." Another professional told us, "[Registered manager] is very accommodating and her approach with my client was humbling."
- The registered manager was extremely approachable. Staff told us the registered manager was always available and worked side by side with staff to support and encourage them. Throughout the inspection the registered manager was present in the service and took time speaking with people and supporting staff. It was clear the registered manager knew everyone extremely well and promoted the inclusive culture that had developed in the service.
- Staff were proud to work at the service and spoke passionately about their commitment to the people and

staff team. Comments included: "The home is the residents home, we as a team come to work to care for them as they decide and in my opinion, everything that happens now at Coxwell revolves around our residents individuality and this makes me want to stay and be part of it for a while longer" and "There is nowhere else I would want to work other than Coxwell. I cannot thank Coxwell, [registered manager], my colleagues and the residents for making my job the best experience of a life time. It doesn't feel like a job working at Coxwell it feels like I'm visiting my family and my second home."

- The registered manager was extremely supportive of staff both professionally and in their personal lives. Staff gave many examples of the registered manager supporting them outside of work. One member of staff told us, "From the interview with [registered manager], we didn't get only work but also a lot of support and help. She showed incredible commitment beyond her official duties. She devoted her time and helped us adapt in a new country from the very beginning." Another member of staff told us about the significant impact the support from the registered manager and staff had when they had been experiencing poor mental health.

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

- The registered manager had developed a dedicated workforce who were encouraged to progress and develop. One member of staff told us, "Registered manager always sees the potential in all staff and will try their very hardest to help staff achieve their goals and help them progress in their roles. Registered manager has helped me progress in my role and encouraged and supported me to reach my goals."
- The registered manager had created new lead roles which had encouraged staff to take on additional responsibilities which they welcomed. One member of staff told us, "Some positive moves for me are that individual staff members have been given new key roles within the home this is working to great effect. Staff confidence within areas such as care planning, reporting and administrative tasks seems to be at an all-time high." This promoted a culture of continuous improvement with staff sharing their specialisms with others to ensure people benefited from staff with exceptional skills.
- There was a strong quality assurance framework in place providing robust reassurance to the provider that the quality of the service was constantly being monitored and improved. This included a detailed monthly audit by the operations director that resulted in a clear action plan. These action plans were reviewed by the registered manager and all actions were completed to ensure improvements were on-going and sustained. The audit reports were shared with all staff. A head of departments meeting was held monthly, to ensure all team members were aware of their responsibilities in relation to continuous quality improvement.

Continuous learning and improving care

- The registered manager was constantly looking for ways to improve people's experience of the service. This included refurbishment of the environment to provide a home that was suitable for people living with dementia and mental health conditions. The registered manager had recognised the disruptive nature of a walkway from the main entrance, creating a busy area that was not always supportive of the people living in that area of the service. The registered manager had submitted an application to the provider to create a new main entrance.
- The registered manager was extremely well trained and qualified for their role. Their priority was to support all staff in the service to focus on and improve the outcomes for people. The registered manager kept up to date on best practice and shared learning which included research from universities specialising in dementia care.

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

- The registered manager had worked tirelessly to ensure everyone was involved in the running and development of the service, this included taking people out to choose art work for the service, tasting menus

for people to choose menus each season and involving them in the decoration of the service. The registered manager sought feedback from people and relatives when completing staff probationary reviews of new staff and used questions devised by people when interviewing potential staff.

- Staff at all levels were encouraged to share their ideas for improvement and felt valued for their contribution. One member of staff told us, "Lots of hard work has gone into involving all team members in all units of the home, staff at all levels including myself are encouraged to share their ideas for improvement and readily do so. Some great ideas are added to the activities list constantly and changes to activity programmes and improvements in care are always being made."

#### Working in partnership with others

- The registered manager had developed strong partnership working with health and social care professionals. One health professional provided feedback to the registered manager, "I know you all try your best as a team at Coxwell to help a lot of residents with challenging behaviour and very advanced Dementia. I always feel very welcome and appreciated when I visit, a pleasure to be able to visit."

- Social care professionals were extremely positive about the accommodating approach of the registered manager and their commitment to making Coxwell Hall and Mews people's homes. One social care professional told us, "I think it's pretty great here. They do magic with clients who have complex needs."

- The provider was looking to extend the facilities at Coxwell Hall and Mews. The registered manager had a clear vision regarding the additional accommodation and was meeting with commissioners to discuss the viability of the service they hoped to develop.

#### 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 had a clear understanding of their responsibilities in relation to duty of candour.

- The registered manager promoted a culture that was open and transparent in everything the service did.

They recognised the importance of learning when things went wrong and sharing that learning with others.