

## Denmax Limited Woodland Villa Care Home

#### **Inspection report**

91-95 Alma Road
Plymouth
Devon
PL3 4HE

Date of inspection visit: 17 May 2022

Good

Date of publication: 10 June 2022

#### Tel: 01752669625

#### Ratings

Overall	rating	for th	is service
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Is the service safe?	Good	
Is the service effective?	Good	
Is the service well-led?	Good	

## Summary of findings

#### Overall summary

#### About the service

Woodland Villa is a residential care home providing personal care to up to 53 people. The service provides nursing and residential care to older people who may have a physical disability. At the time of our inspection there were 42 people using the service.

People's experience of using this service and what we found Risks were identified, assessed and recorded. Care plans were completed for each person and contained details of the person's needs and preferences.

There were sufficient staff to support people. The service was fully staffed with no vacancies. The service was not using any agency staff at the time of this inspection. Recruitment procedures were robust.

People told us they felt safe with staff. There were systems to help protect people from abuse and to investigate any allegations, incidents or accidents.

People were supported by staff who had been appropriately trained and were skilled in their role. Staff told us they felt well supported. Relatives comments included, "They (Staff) have worked wonders with (Person's name). They went in at what we were told was 'the end of their life', and now they have done a complete turnaround and are now so much better. The care she has received has been exceptional. (Person's name) was one of those people who never wanted to go into a home. Now she is enjoying it so much, she is frightened she may be asked to leave?"

People's care and support needs were assessed before they started using the service. People received support to maintain good health and were supported to maintain a balanced diet where this was part of their plan of care.

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.

Staff understood the importance of respecting people's diverse needs and promoting independence.

Mental capacity assessments had been carried out where it was indicated. Deprivation of Liberty Safeguards (DoLS) authorisations had been applied for appropriately.

There were robust auditing or monitoring processes in place at the time of this inspection. The service had implemented effective quality assurance systems to monitor the quality and safety of the care provided.

Staff were well supported and we able to access the management team whenever they needed any

assistance or guidance. Staff comments included, "I like working here it's a good place" and "I love the residents, they all have their own characters."

People told us they liked living at Woodland Villa and that the staff were caring and responded when they called. Comments included, "We are both very happy with care provided and have no issues," "Now I can't grumble about the food, its excellent, if I don't want the food they get me something else" and "Staff are lovely and kind, I have no worries here, if I did then I can talk to staff."

People were asked for their views by the management team. People's comments included, "I am very happy here, I am just here for assessment at the moment, but I hope I can stay. They asked me to hold Sunday church services in the home each week, as long as I feel well enough it is good for me and for them," "The food is good and I can have what I like to eat" and "Staff are great always around and easily contacted when I need them."

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

For more information, please read the detailed findings section of this report. If you are reading this as a separate summary, the full report can be found on the Care Quality Commission (CQC) website at www.cqc.org.uk

Rating at last inspection:

The last rating for this service was good (published19 September 2018).

Why we inspected

We received concerns in relation to people's access to diet to fluids, poor continence care, poor communication, slow staff response to people's changing needs, poor infection control practices and an environment in need of repair. As a result, we undertook a focused inspection to review the key questions of Safe, Effective and well-led only.

For those key questions not inspected, we used the ratings awarded at the last inspection to calculate the overall rating.

The overall rating for the service has not changed following this inspection.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Woodland Villa on our website at www.cqc.org.uk

We looked at infection prevention and control measures under the Safe key question. We look at this in all care home inspections even if no concerns or risks have been identified. This is to provide assurance that the service can respond to COVID-19 and other infection outbreaks effectively.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

### 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 well-led?	Good 🗨
The service was well-led.	
Details are in our well-led findings below.	



# Woodland Villa Care Home

## Background to this inspection

#### Inspection team

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 Health and Social Care Act 2008.

Inspection team The inspection was carried out by three inspectors

#### Service and service type

Woodland Villa is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and we looked at both during this inspection.

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. 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.

At the time of our inspection there was a registered manager in post.

Notice of inspection This inspection was unannounced.

#### What we did before the inspection

Before the inspection, we reviewed information we held about the service and the provider which included any statutory notifications sent to the CQC. A notification is information about important events which the service is required to send us by law. We used the information the provider sent us in the provider information return. This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make.

We used all of this information to plan our inspection.

#### During the inspection

During the inspection we reviewed six people's care plans and risk assessments. We looked at three staff files in relation to recruitment. We reviewed staff training and supervision. We also reviewed other records relating to the management of the service, including complaints received. We met with the registered manager, the matron and the administrator.

We spoke on the phone with two relatives of people who were living at Woodland Villa, about their experience of the care provided. We spoke with five people and eight staff during the inspection.

## Is the service safe?

## Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At our last inspection we rated this key question good. The rating for this key question has remained good

This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- There were safeguarding processes in place and the service had made appropriate referrals to the local authority where required.
- People told us they felt safe with the staff that supported them.
- Staff knew how to recognise abuse and protect people from it. Staff had received training in how to keep people safe.

Assessing risk, safety monitoring and management

- Some people required specific equipment to protect their skin from pressure damage. Pressure relieving mattresses were in place for people who had been assessed as needing them. Some of these mattresses were not set correctly for the person using them. We discussed this with the registered manager who took immediate action to address this concern. Following the inspection, it was confirmed that a regular mattress setting check had been added to the nurses responsibility.
- Risks associated with people's care needs were identified, assessed and recorded. This provided staff with the information needed to support people safely
- Experienced staff had a good knowledge of the people they supported. They were aware of risks associated with people's care, how to monitor them and what action to take to reduce risks.

#### Staffing and recruitment

- Recruitment practices were robust. Staff files showed the relevant checks had been completed including Disclosure and Barring Service (DBS) checks. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- The service had sufficient numbers of staff to meet people's needs.

#### Using medicines safely

• Nurses had received training in medicines administration. Nurses regularly audited medicines than needed stricter controls.

• People were supported to take their medicines when and as they were prescribed. Some people selfadministered their own medicines. Risk assessment were in place to help ensure they were competent to do this.

• Paper medicine administration records (MAR) were completed by nurses where necessary. These records were checked by management. There were regular audits in place to effectively monitor all aspects of

medicines management.

Preventing and controlling infection

• People were protected from the risk of infection and cross contamination including COVID-19. People told us staff always wore personal protective equipment (PPE) when they delivered care to them.

- The service had an ample supply of PPE. Staff had received training in the safe use of PPE. People told us staff practice reflected current guidance.
- Staff had received training in infection control.

Learning lessons when things go wrong

- There were processes in place to ensure that accidents and incidents were recorded, actioned, and analysed to help reduce any re-occurrence.
- The registered manager told us they had reflected on any past complaints or concerns raised. There was a strong focus on ensuring all care and support provided by staff was always recorded. As this helped with investigating and responding to any concerns raised.

## 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 our last inspection we rated this key question good. The rating for this key question has 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 were assessed before people moved into Woodland Villa, to ensure their needs could be met by the service.
- The assessment also considered people's protected characteristics as part of the Equalities Act 2010, including any disabilities. Woodland Villa is an old, previously residential, building which had been adapted for use as a care home many years ago. The layout of the service was not always suitable for people with mobility issues or cognitive impairment, so the registered manager told us they only take people who are suitable for the service.
- Records showed that regular reviews took place to ensure people using the service had their current needs recorded.

Staff support, training, skills and experience

- Staff received supervision and appraisals from the management team.
- Staff completed training in a range of different subjects to ensure they had the right skills, knowledge and experience to deliver effective care.
- New staff received an induction which included training and a period of working alongside a more experienced staff member before they started working on their own.

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

- People were supported with their dietary needs where this was part of their plan of care.
- People's preferences, likes, dislikes, and dietary requirements were recorded in their care plan. Experienced staff knew people's needs well. People's comments included, "The food here is good, I can eat what I enjoy"
- Kitchen staff were fully aware of all people's dietary needs and preferences.
- Staff monitored people if they were at risk of poor nutrition and involved healthcare professionals where required. People had their weight regularly monitored.

Staff working with other agencies to provide consistent, effective, timely care

• Woodland Villa worked with a range of agencies when taking in new people to live at the service. The service supported the local acute hospital by taking people whose needs required a period of assessment before going home. The service also had many people stay for short periods, from one week to a few months at a time.

- Staff ensured people's health care needs were being met and if they had any concerns regarding a person's health then this was communicated with the relevant professional.
- Relatives were assured the care staff that supported their family members were quick to identify changes in the person's health, report their concerns and request the required assistance. Comments included, "They (Staff) have worked wonders with (Person's name). They went in at what we were told was 'the end of their life', and now they have done a complete turnaround and are now so much better. The care she has received has been exceptional. (Person's name) was one of those people who never wanted to go into a home. Now she is enjoying it so much, she is frightened she may be asked to leave?"
- People told us, "I am very happy here, I am just here for assessment at the moment but I hope I can stay. They asked me to hold Sunday church services in the home each week, as long as I feel well enough it is good for me and for them" and "Staff are great always around and easily contacted when I need them."

Supporting people to live healthier lives, access healthcare services and support

- People were supported with their dietary needs where this was part of their plan of care.
- People's preferences, likes, dislikes, and dietary requirements were recorded in their care plan. Experienced staff knew people's needs well.
- Staff monitored people if they were at risk of poor nutrition and involved healthcare professionals where required.
- There were clear records which evidenced people were seen by external healthcare professionals when required.

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 MCA 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.

- People were involved in decisions about their care and treatment and staff supported them to have maximum control of their lives. Were appropriate capacity assessments had been carried out.
- People told us staff consulted them and asked for their consent before providing care and support.
- Staff received training in the MCA. Records were kept showing where people had appointed Lasting Power of Attorneys (LPA)
- Where appropriate people who required specific restrictions, to keep them safe, had had applications made to the local authority for these restrictions to be authorised. Two authorisations were in place at the time of this inspection.

## 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 our last inspection we rated this key question good. The rating for this key question has 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

- People and relatives were complimentary about the service received at Woodland Villa.
- The culture of the service was open and transparent.
- The registered manager was very committed to providing the best care to people.
- We spoke to the relatives of one person who was admitted for care at the end of their life. We were told this person had improved greatly due to the care received at the service.
- We saw from the nursing records that they were effective in promoting the healing of any areas of broken or damaged skin that was identified.

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 understood the duty of candour requirements and ensured information was shared with the relevant people when concerns were identified.

• Where some issues were identified by inspectors during the inspection, they were immediately addressed. A hot food trolley was seen in use in a corridor. We were concerned about the potential risk to anyone touching it or falling on to it and possibly sustaining a burn. The trolley was immediately taken out of use by the registered manager and provider and another way of keeping food hot for further parts of the service was being resourced. This showed the manager and provider were open to a concern being raised and took timely action.

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

- The service had a registered manager at this time.
- The audit and monitoring processes which were currently in place were robust. There was a programme of regular audits which were done regularly and shared with the provider who visited weekly.
- The registered manager used opportunities to learn from reflecting on past events, concerns or complaints to further improve the service.

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

• People had been asked for their views on the service. People's feedback was positive.

• We spoke with people and their relatives, comments included, "We are both very happy with care provided and have no issues," "Now I can't grumble about the food, its excellent, if I don't want the food they get me something else" and "Staff are lovely and kind, I have no worries here, if I did then I can talk to staff."

• Staff told us that they felt valued and supported by the management team. They told us they enjoyed working at the service. Staff comments included, "I like working here it's a good place" and "I love the residents, they all have their own characters."

Working in partnership with others

• The service had established good working relationships with professionals including health and social care professionals and commissioners of care to ensure good outcomes for people.