

# Key inspection report

## Care homes for older people

<b>Name:</b>	Woodford House Nursing Home
<b>Address:</b>	The Green Trysull Staffordshire WV5 7HW

<b>The quality rating for this care home is:</b>	two star good service
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A quality rating is our assessment of how well a care home is meeting the needs of the people who use it. We give a quality rating following a full review of the service. We call this full review a 'key' inspection.

<b>Lead inspector:</b>	<b>Date:</b>
Keith Jones	0 5 0 6 2 0 0 9

This is a review of quality of outcomes that people experience in this care home. We believe high quality care should

- Be safe
- Have the right outcomes, including clinical outcomes
- Be a good experience for the people that use it
- Help prevent illness, and promote healthy, independent living
- Be available to those who need it when they need it.

The first part of the review gives the overall quality rating for the care home:

- 3 stars - excellent
- 2 stars - good
- 1 star - adequate
- 0 star - poor

There is also a bar chart that gives a quick way of seeing the quality of care that the home provides under key areas that matter to people.

There is a summary of what we think this service does well, what they have improved on and, where it applies, what they need to do better. We use the national minimum standards to describe the outcomes that people should experience. National minimum standards are written by the Department of Health for each type of care service.

After the summary there is more detail about our findings. The following table explains what you will see under each outcome area.

**Outcome area (for example Choice of home)**

**These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:**

This box tells you the outcomes that we will always inspect against when we do a key inspection.

This box tells you any additional outcomes that we may inspect against when we do a key inspection.

**This is what people staying in this care home experience:**

Judgement:

This box tells you our opinion of what we have looked at in this outcome area. We will say whether it is excellent, good, adequate or poor.

Evidence:

This box describes the information we used to come to our judgement.

We review the quality of the service against outcomes from the National Minimum Standards (NMS). Those standards are written by the Department of Health for each type of care service.

Copies of the National Minimum Standards – Care Homes for Older People can be found at [www.dh.gov.uk](http://www.dh.gov.uk) or bought from The Stationery Office (TSO) PO Box 29, St Crispins, Duke Street, Norwich, NR3 1GN. Tel: 0870 600 5522. Online ordering from the Stationery Office is also available: [www.tso.co.uk/bookshop](http://www.tso.co.uk/bookshop)

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- Regulating health and adult social care services to ensure quality and safety standards, drive improvement and stamp out bad practice
- Protecting the rights of people who use services, particularly the most vulnerable and those detained under the Mental Health Act 1983
- Providing accessible, trustworthy information on the quality of care and services so people can make better decisions about their care and so that commissioners and providers of services can improve services.
- Providing independent public accountability on how commissioners and providers of services are improving the quality of care and providing value for money.

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## Information about the care home

Name of care home:	Woodford House Nursing Home
Address:	The Green Trysull Staffordshire WV5 7HW
Telephone number:	01902324264
Fax number:	01902894934
Email address:	manager@woodford-house.co.uk
Provider web address:	

Name of registered provider(s):	Heart of England Properties Ltd T/A Woodford House Nursing Home
Type of registration:	care home
Number of places registered:	40

Conditions of registration:		
Category(ies) :	Number of places (if applicable):	
	Under 65	Over 65
dementia	40	0
mental disorder, excluding learning disability or dementia	40	0
old age, not falling within any other category	0	40
physical disability	40	0
Additional conditions:		
The maximum number of service users who can be accommodated is: 40		
The registered person may provide the following category of service only: Care Home with Nursing (Code N); To service users of the following gender: Either; Whose primary care needs on admission to the home are within the following categories: Dementia (DE) 40, Mental disorder, excluding learning disability or dementia (MD) 40, Old age, not falling within any other category (OP) 40, Physical disability (PD) 40		
Date of last inspection		
Brief description of the care home		
The home is situated in the centre of Trysull village, conveniently located close to local amenities, overlooking the village green. The home provides nursing care for up to 40		

### Brief description of the care home

older people. Over the years Woodford House has been transformed from the village hotel to a very comfortable care home with the necessary facilities in place to offer a high standard of care. Accommodation is on two levels with a passenger lift providing access to each floor, there is a staff call throughout the home and aids and adaptations for dependent people. There is an attractive roof garden with outdoor seating areas which is additional to pleasant gardens at the side and back of the home. Adequate car parking available at the front of the home.

The Service User guide was not viewed during this inspection and so no information was obtained about fees that are charged. As the fee information has not been included in this report we advise the reader to contact the service for this information and of any other costs that may be charged for, in addition to the fees.

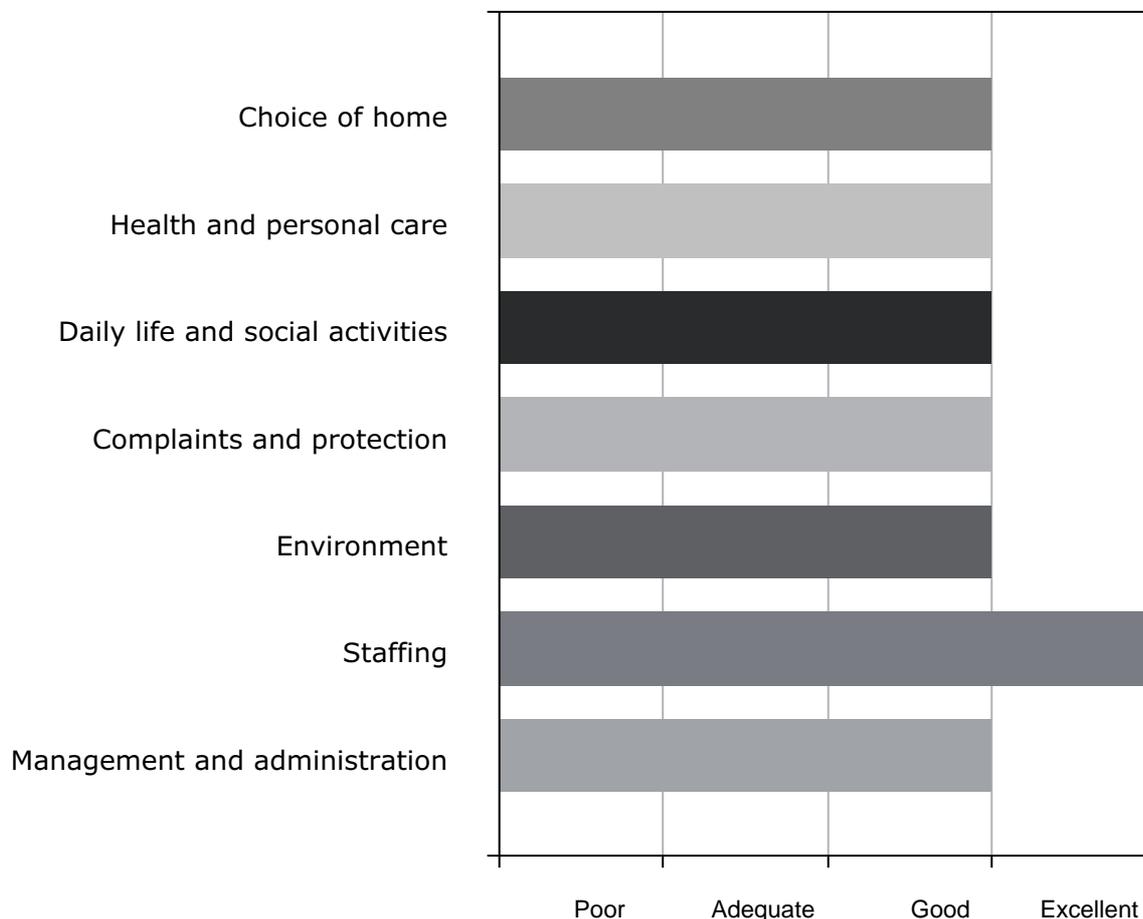
## Summary

This is an overview of what we found during the inspection.

The quality rating for this care home is:

two star good service

### Our judgement for each outcome:



### How we did our inspection:

We conducted this unannounced inspection with the Registered Care Manager, the Deputy Care Manager, senior nursing and care staff on duty, whose input contributed to this report. Our inspection of the building allowed us free access to all areas and open discussion with people who use the service, relatives and staff. There were 38 people in residence on the day of our inspection. We looked at how care is being arranged and supported for a range of people with health care needs. To do this we looked at (case tracked) four people's care records from pre-admission to the present time, and three staff files were examined. We also looked at other information such as complaints, incidents, events and other professional reports.

We took the opportunity to speak with a number of people who use the service, relatives and members of staff, who took an active role in the inspection process, and contributed to the subsequent report. We acknowledged receipt of the Annual Quality Assurance Assessment (AQAA), and nine survey forms received from those we issued

to people who use the service some weeks before the inspection. The AQAA is a self-assessment that focuses on how well outcomes are being met for the people using the service. It also gave us some numerical information about the service.

We inspected a sample review of administrative procedures, practices and records, confirming consistent good practice and effective management.

There followed a report feedback, in which we offered an evaluation of the inspection, indicating those recommendations resulting from the inspection.

## What the care home does well:

We found that Woodford House offers a genuine commitment to care with a competent, yet open and personable approach, which reflects the professionalism and homeliness of a confident relationship between carer, and those people using the service:

"Looks for the positive way forward, and helps people live their lives, respects everyone".

"Compared to other homes that we visited, Woodford House is an order of magnitude better than others. Julie, Woodford's manager, is an angel".

My mother's health has improved since she has been in Woodford and she is content there".

From examination of care records we established that there was an detailed and effective assessment, care planning and review of individual needs, which are meaningful and robust in formulating a good standard of care. The process has been introduced to reflect the high dependency needs of people with dementia. When we discussed the quality of care with those people using the service, it was made clear that they appreciated this highly personable attitude and approach to care. The service's AQAA states: "At Woodford House, it is our main priority to ensure that the holistic care of each client is of a high quality and standard". This we found to be true.

We considered that the overall management style demonstrated a very positive approach in maintaining an environment conducive to the care of the physically disabled and elderly.

## What has improved since the last inspection?

We found that there is a closer involvement in care planning, and the review of care, by people using the service and their relatives, following internal surveying of the care and services offered. This is a consistent move forward in meeting the changing needs of people, especially with dementia, complemented with improved staff awareness in meeting peoples physical and mental health needs. There has been a more focused address towards the socialization and activities resulting in more 1:1 and group activities, and more diverse programme of activities and individual assessments of need. We were also informed of responses to comments from people about the catering service, resulting in an increased contact from kitchen staff with people regarding menus and choices, including requests for convenience foods, that is pizza, burgers and pasta dishes.

We acknowledged improvements made to the fabric and furnishings in the old wing, although the work that needs to be completed remains a challenge. It was noted that there has been a reduction of a double room to two single en suite bedrooms, and that the gardens have been landscaped and equipped with new patio furniture.

We have recognised an improvement in the staff training programme, including the introduction of specific and diverse issues. Improved National Vocation Qualification training for those staff newly employed, and encouragement for existing staff to

achieve a higher level III training. The supervision programme was seen to have been firmly established with senior staff receiving formal training to undertake supervision, and the introduction of formal supervised practice. We found that staffing levels have been increased, and the numbers of nursing staff with a Registered Mental Nursing qualification now equate with general nurses employed.

#### **What they could do better:**

We have considered that the Statement of Purpose and Service User Guide be updated to reflect change, and that consideration be given to producing the documents in larger print and audio versions, to assist people with poor eyesight to make an informed decision.

Whilst recognizing the high standards of accommodation in the new extension we have determined that the general fabric, furnishings and decor standards need to be maintained in the older wing, to provide people with a comfortable and safe living environment. To renew the fabric and furnishings of the 'Respite' rooms to present an acceptable facility for the use of people who are using the home for short periods of time. We recognize the improvements made in creating a conducive environment for people with dementia care needs, which need to be more positively followed to include provision of easy recognition, and dignified identification of bedrooms and facilities to enhance their well being. We have recommended that left over building material be removed from the garden area, and to cease the practice of recharging electrical hoists in the main corridors to maintain a safe environment for people living in the home

The achievements in establishing a good standard of care have been recognised, in meeting requirements and recommendations made at the last inspection. Areas of detail outlined through our recommendations will continue to play a part in the ongoing development and maintenance of a good service.

If you want to know what action the person responsible for this care home is taking following this report, you can contact them using the details on page 4.

The report of this inspection is available from our website [www.cqc.org.uk](http://www.cqc.org.uk). You can get printed copies from [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk) or by telephoning our order line 0870 240 7535.

## Details of our findings

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## Choice of home

**These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:**

People are confident that the care home can support them. This is because there is an accurate assessment of their needs that they, or people close to them, have been involved in. This tells the home all about them and the support they need. People who stay at the home only for intermediate care, have a clear assessment that includes a plan on what they hope for and want to achieve when they return home.

People can decide whether the care home can meet their support and accommodation needs. This is because they, or people close to them, have been able to visit the home and have got full, clear, accurate and up to date information about the home. If they decide to stay in the home they know about their rights and responsibilities because there is an easy to understand contract or statement of terms and conditions between them and the care home that includes how much they will pay and what the home provides for the money.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The needs of people are appropriately assessed before they are offered a place. They and their relatives can be confident that the service will be able to meet their needs.

Evidence:

We examined the service's recently revised Statement of Purpose and Service User Guide, and found them to provide an excellent, informative description of the home's aims, objectives, and the way it operated. We acknowledged that the documents were presented to all enquirers, and that information concerning fees payable were not included in the Service User Guide. We saw that the Statement of Purpose could be produced in large print, as and when necessary. We consider that the Service User Guide presented in an audio and pictorial version would help people to make an informed choice. It is stated in the AQAA, and we recognized, that the Statement of Purpose and Clients Charter represents the basis on which the home operates upon, offering those people who may use the service, and their relatives, the opportunity to make an informed choice about where to live.

## Evidence:

Comments we received from surveys we sent out before the inspection to people who use the service :

"Looks for the positive way forward, and helps people live their lives, respects everyone".

"Compared to other homes that we visited, Woodford House is an order of magnitude better than others. Julie, Woodford's manager, is an angel".

"We received plenty of comments and descriptions from friends".

"The information I received was very informative and helpful".

Through our case tracking of three people's care records we clearly identified that the Care Manager, or her Deputy, at the point of reference, conducted the pre-admission assessment. We found that the documentation identified a clear dependency assessment, forming a comprehensive foundation for care planning to meet needs, which included a copy of the care plan from social services, prior to admission. The objective is for this assessment to be produced with the full involvement of people who may use the service and their family, allowing them to influence the direction of care. We found this to be true, with each individual having a plan of care, which included a detailed care plan, daily care programme, risk assessments with goals and outcomes. Any special needs of the individual were discussed fully and documented, ensuring their personal needs would be met.

During the course of our inspection we had opportunities to sit and talk with people who use the service, staff and a number of visitors. We found evidence that much care had been taken in involving people, and their families in the admission process.

"When we were making inquiries we received plenty of comments and descriptions from our friends".

"On talking with the nurse, the information I received was very informative and helpful".

From our discussions it was clear that people are able to visit and assess the facilities and suitability of the Home at any reasonable time, and to meet with staff and management. Staff are aware of the special period of personal anxiety that people have under those conditions, a point well illustrated when talking to people, and

Evidence:

examining records on case tracking.

No intermediate care took place in the home.

## Health and personal care

**These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:**

People's health, personal and social care needs are met. The home has a plan of care that the person, or someone close to them, has been involved in making. If they take medicine, they manage it themselves if they can. If they cannot manage their medicine, the care home supports them with it, in a safe way. People's right to privacy is respected and the support they get from staff is given in a way that maintains their dignity.

If people are approaching the end of their life, the care home will respect their choices and help them feel comfortable and secure. They, and people close to them, are reassured that their death will be handled with sensitivity, dignity and respect, and take account of their spiritual and cultural wishes.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The health and personal care, which people receive, is based on meeting personal needs, with clear principles of respect, dignity and privacy put into practice. Medicine administration systems are safe and secure.

Evidence:

Care records and case tracking we examined provided clear evidence to show that the pre admission assessment represented the foundation for a well considered, and detailed care planning process, in association with available Social Services reports. We found that the profile of each person's social, physical and psychological status offered an individual plan of care, based upon a Person Centred Support Care (PCSP) process of dependency assessment and activities of daily living, frequently reviewed in an individual plan of care that is reviewed monthly, to reflect their changing needs and adapting care profiles, supported with a substantial and very informative daily progress report. Established monitoring systems following a process of goals, care and evaluation of high quality care plans, appreciated by those people and relatives alike. Risk assessments are carried out on an individual basis and reviewed as required, these include tissue viability, continence and nutrition. The strength of purposeful

## Evidence:

planned care lies within the frequency of the review process in monitoring and adapting care profiles.

The AQAA stated, and we confirmed that those people who use the service, families and friends are invited to participate in the care planning process, and established monitoring systems following a process of goals, care, and evaluation of quality care plans. The newly introduced PCSP care system, established with a firm understanding of dementia care needs, was found to be well maintained and accurate.

Case tracking confirmed to us that specialist support and advice are sought as needed, with each person having access to a local Doctor, Dentist, Optician, Chiropodist, and Occupational Therapist as required. Through case tracking, our discussions and inspection of records, it was recognised that the home arranges for health professionals should special health care needs be recognised. Our observations showed that generally people using the service appeared to be content, comfortable and happy with their lifestyle, complimentary regarding the quality of their lives and the care they were receiving. Comments we received during the course of inspection from people using the service, visitors and professionals:

"Always clean and smells nice. Bedrooms and bathrooms always clean and tidy. Good medical care, looked after cut on leg very well, Staff are friendly".

"My mother's health has improved since she has been in Woodford and she is content there".

"On presenting new people for assessment, and reviewing their care, I have always found the quality of care and standards to be excellent" We confirmed that the administration of medicines adhered to procedures to maximise protection for people who use the service. We found that the care manager is responsible for overseeing all matters relating to medicines. She has effected a well developed, and smooth process of ordering, receiving, storing, administering and disposing of medicines. Records were seen to be complete and easy to follow through, with no observed breaches in the system. Controlled Drug management was comprehensive. Those people we were case tracking were found to have appropriate medication regimes.

In our examination of care records, we established that a policy and procedure on care of the dying and death had been introduced to meet individual needs, and were in place with the full knowledge of those who use the service and relatives. Individual spiritual persuasions were seen to be documented and respected. It is stated in the services Statement of Purpose and the AQAA, that independence, privacy and dignity

## Evidence:

are encouraged, with the full involvement of family in all matters concerning the well being of people. This was confirmed in our discussions with people who use the service. visitors and staff, although the records need review to offer consistency. Relatives and friends have freedom of visiting, which emphasised the importance of maintaining social contact.

We looked at bedrooms presented to facilitate privacy for the individual, which included medical examinations and personal care procedures being performed in private. Our discussions with people confirmed that individual spiritual persuasions, and individual diversity was seen to be respected. There are monthly Church of England services held monthly, and a Polish priest attends on a regular basis. There were no other diverse religious persuasions in at the time of inspection.

We were impressed with the confidence and closeness within the Home and the mutual respect that prevailed. Our discussion with visitors on the day was a fruitful exchange, with all being very complimentary of care.

## Daily life and social activities

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

Each person is treated as an individual and the care home is responsive to his or her race, culture, religion, age, disability, gender and sexual orientation. They are part of their local community. The care home supports people to follow personal interests and activities. People are able to keep in touch with family, friends and representatives. They are as independent as they can be, lead their chosen lifestyle and have the opportunity to make the most of their abilities. People have nutritious and attractive meals and snacks, at a time and place to suit them.

There are no additional outcomes.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People's rights to live a meaningful life are promoted, and people are offered opportunities to exercise choice and control over their lives.

People are offered a healthy, well balanced diet.

Evidence:

We found daily life to be flexible to accommodate people's needs and capabilities, offering choices at meal times, and during personal and social activities, including recognition of varied religious needs. Our discussions with people who use the service and staff, identified a relaxed atmosphere in which people's needs were respected, with the security that there are familiar events to the day they could relate to.

We acknowledge that Woodford House employs an activity coordinator in social activities who was seen to offer 1:1 and group activities, and more diverse programme of activities and individual assessments of need since the last inspection. The work of the coordinator is recognised as an important part of the care process, as evidenced in examination of records, and discussion with staff, with two weekly programme of which activities identifying the social events, which included themes and entertainment organised by the Home. We were informed that the Home is planning extended activities to add to those already in place, including more

## Evidence:

involvement with people confined to bed. On the day of inspection the activity coordinator was seen to be reading to a lady, and was fully engaged in a busy programme of individual and group activities throughout the course of inspection. Our discussion with the coordinator identified a clear vision of care for people with dementia, and to participate in the process of change in environmental and social facilities. Some comments we received on the day from people using the service:

"Not able to participate in much".

"Would like to see more outside activities, maybe do a bit in the garden".

Families and friends are actively encouraged to participate in the daily life of the home, with no restriction being placed on visiting times. During the course of the inspection we saw staff and visitors interact with people in a positive and polite manner.

Comments from visitors, one who came every day were:

"They treat people with respect, Woodford House is leagues above other homes we have experience of".

"Woodford House is tremendous, all of its staff are so very committed to caring for their residents".

It is stated in the Statement of Purpose and AQAA, that personal choice, dignity and self determination are respected in policy and action, which we found to be true. Those individual's rooms we inspected showed a very positive influence of personalisation in the inclusion of belongings, some furniture and general decor, demonstrated a degree of expressed individuality.

We found that the high standards of catering at Woodford House continues, offering a very good service, to which all those people we spoke with being complimentary of all aspects of quality. A menu on a four weekly cycle offered a wholesome, varied and excellent choice. We confirmed that the cook knew each person using the service, and some of the relatives. We discussed diversity with the cook, who indicated an awareness in meeting individual needs; there were no special cultural needs at the time. Individual preferences were conveyed to the catering staff, who met with, and discussed their requirements. A very pleasant lunch of poached cod and scampi, or meals of choice were served during inspection, in pleasantly furnished and clean dining rooms. Staff were seen to offer discreet assistance to those who required it.

Evidence:

The choice of dining room, lounge or bedroom was at the discretion of people in the home.

## Complaints and protection

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

If people have concerns with their care, they or people close to them know how to complain. Any concern is looked into and action taken to put things right. The care home safeguards people from abuse and neglect and takes action to follow up any allegations.

People's legal rights are protected, including being able to vote in elections.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People are given opportunities to freely express any concerns, and these are quickly responded to.

People are protected from abuse, and their human rights are promoted.

Evidence:

Through the course of inspection we confirmed that people's legal rights are protected by the systems in place in the home to safeguard them, including the continual review and assessment of care planning, and policies in place, including the complaints procedure.

The complaints policy and records of complaints dealt with were examined, which evidenced handling of peoples and families concerns in a meaningful and effective manner. From our discussions with people who used the service it was evident that any small matters were handled immediately, discretely and to the satisfaction of all concerned. There were a few minor complaints, which we feel would be better dealt with through a 'record of concerns, complaints and safeguarding', to record people's, and their families' concerns in a meaningful and effective manner.

Comments we received from the surveys we sent out before the inspection, and received on the day in the course of inspection.:

"Yes, if I'm not happy, in my way I know I can ask the manager of the home, or my

Evidence:

member of staff".

"Our concerns have been sympathetically addressed, i.e. medication issues".

"No complaints to date".

No complaints had been received by us since our last inspection. The overall policy of openness and transparency was acknowledged. We were informed that all the people who used the service had received information on the procedure to complain, including reference to us. This process was evidenced on examination, and case tracking, as previously reported upon.

Discussion with the Care Manager confirmed that there continues to be a satisfactory protocol, and response to anyone who may report any form of abuse, to ensure effective handling of such an incident. There have been one Adult Protection Investigations in the previous twelve months, regarding the overall care of people, which was not substantiated. The Annual Quality Assurance Assessment completed by the service prior to the inspection confirms all staff employed in the last 12 months have undertaken a satisfactory Criminal Records Bureau (CRB) check, confirmed by examining three staff files, and it was established that all staff have had training to highlight their responsibilities under the Mental Capacity Act.

## Environment

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People stay in a safe and well-maintained home that is homely, clean, pleasant and hygienic.

People stay in a home that has enough space and facilities for them to lead the life they choose and to meet their needs. The home makes sure they have the right specialist equipment that encourages and promotes their independence. Their room feels like their own, it is comfortable and they feel safe when they use it.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

The Home provides a safe, well-maintained, clean and comfortable environment for the people who use the service, which encourages independence.

Evidence:

External access is satisfactory for visitors, with adequate parking. The grounds were found to be generally well maintained, with an attractive patio and lawned area with ornamental features; overlooked from some of the rooms and the conservatory. There still remains some building materials that need to be removed from the side of the house. There is also an enclosed roof terrace with garden furniture, although rarely used by people living in the home. The state of repair and maintenance is generally good, offering a comfortable, homely yet secure environment. A comment received from a person living in the home indicated:

"The maintenance of garden areas is poor and could be improved by cleaning patio areas and furniture, and the introduction of more flowers".

However the efforts in presenting the garden area are recognized, and most comments we received were complimentary.

On admission the Care Manager or her deputy assesses each individual persons needs for equipment and necessary adaptations. A letter confirming those arrangements was

## Evidence:

seen in each case file. Internal access was facilitated with ample fittings of hand and grab rails in well lit and airy corridors, facilitating wheelchair access throughout all areas of the home. It was noted that several corridors are in need of redecoration and fitting out to meet dementia care needs, especially in pathway and familiar recognition. We found that electrical hoists were being recharged in a corridor in the new wing, impeding corridor access, and presenting a hazard. There is a new staff call system throughout the home, there are hoists and a range of aids and adaptations for people who are dependent. The home has also 'wander alarms' that alert staff that people who are at risk of falling have got up and may need assistance. All external doors are alarmed telling staff that one has been opened, and that someone has gone outside. The Care Manager confirmed to us a willingness on the part of management to meet any reasonable demand for special needs.

All communal areas were seen to be of a high standard, providing two main lounge areas and a small room available for quiet reflection, that were pleasantly decorated, providing good quality furnishings and items to provide comfortable areas where people were able to interact with their friends, or to entertain their guests. There was a spacious dining area where people were able to dine in a pleasant environment adjacent to the kitchen. We found that this area would benefit from a review of decor, including the access to the kitchen. A smaller dining area, serviced with a kitchenette is a popular area next to the conservatory.

Our inspection of bedrooms found them well equipped and maintained to provide for people's individual needs and preferences, personalised, with most displaying the personal furniture and belongings. The standards in the older part of the building are presently undergoing refurbishment, but the amount of work required to bring the whole service to the expected high standard requires a more extensive programme. We found some rooms, in particular the Respite rooms to be poorly presented, lacking warmth, with inadequate quality of fittings and furnishings. Nevertheless we found the overall quality to remain of a good standard, presenting mainly a homely and comfortable environment.

We found those bathrooms and toilets in use are fitted with appropriate aids and adaptations to meet the needs of people who use the service, and are of a high quality, clean, uncluttered and odour free. Adequate attention has been given to ensure maximum privacy within risk assessed boundaries. Toilets and bathrooms were located on both floors and were in close proximity to bedrooms and communal areas. We tested the water temperature and found it insufficient for practical use at 30 degrees Centigrade; the Care Manager informed us that the heating system is presently receiving maintenance, and that all the bathing for that morning had gone

Evidence:

ahead unhindered.

Sluice facilities have suitable arrangements to assist in control of infection. Notices regarding chemical handling in the areas that store chemicals are displayed. The housekeeping services in the Home were seen by us to be of a high standard. The people spoken to generally remarked that they find the environment always very clean and fresh.

Comments from a survey we sent out to people using the service and staff: "Always clean and smells nice. Bedrooms and bathrooms always clean and tidy".

"The home achieves a high standard of cleanliness".

"I think that Woodford House is a good nursing home, it isn't just a house, its a home for 40 people. I like working there and its nice that the residents, relatives and staff appear to like it too".

Heating and ventilation were found to be satisfactory, and lighting was domestic in style. Aids, adaptations and equipment were available throughout the Home. Fire equipment was inspected and seen to be serviced and up to date. The laundry was well organised and equipped to a good standard, with new equipment recently installed. The kitchen presentation showed good standards of cleanliness and evidence of sound food hygiene practices. All fridges and freezers were seen to be used in the appropriate manner, and were checked daily by the kitchen staff. A cleaning schedule was in place, up to date and comprehensive. The first aid box needed upgrading, and visitors overclothes should be placed at the doorway. We spoke with the cook who confirmed to us that she actively engages with people who use the service to determine their needs and likes and dislikes. She was aware of the issues of culture, ethnicity and age diversity, having had experience in dealing with a diverse population.

The Annual Quality Assurance Assessment completed by the service prior to the inspection confirms that the building complies with the requirements of the local fire service and environmental health department, and records are kept accordingly.

## Staffing

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have safe and appropriate support as there are enough competent staff on duty at all times. They have confidence in the staff at the home because checks have been done to make sure that they are suitable to care for them. Their needs are met and they are cared for by staff who get the relevant training and support from their managers.

There are no additional outcomes.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **excellent** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

Staff in the Home are trained, skilled and in sufficient numbers to fulfill the aims of the unit and meet the changing needs of people using the service.

Evidence:

We confirmed that there were 38 people living in the home on the day of the inspection. Three weeks of staffing rotas showed to us a satisfactory balance between skills, experience and numbers to provide a good standard of care. The Registered Manager, who is supernumerary, is supported by a Deputy Manager and a satisfactory complement of Registered Nurses and care staff. We recognize that the trained nurse establishment has an equal complement of mental health and general nurses.

Discussions with staff also confirmed their commitment to providing a quality service and their awareness of the principles of good practice. At the time of the inspection there were two Registered Nurses and eight care staff on duty.

Average care staff coverage:

Morning shift 2 RNs + 8 Carers plus 4 hours care support work

Afternoon 2 RNs + 6 Carers

Night 1 RN + 3 Carers

## Evidence:

The home has an activity coordinator working 37 hours a week. There is also a satisfactory complement of housekeeping, laundry, maintenance, administrative and catering staff. Comments received from people on the day:

"They usually listen and try to meet our needs".

"They do their best unless there is any sickness making staff shortages".

We sampled three staff files, and found them to be consistent and up to date, although needing organising. Staff are employed in accordance with the Code of Conduct and practice set by the General Social Care Council. We recognise that the management have established a comprehensive procedure for interview, selection and appointment of staff, reinforcing the policy that the thoroughness of staff selection has a significant effect upon the provision of care to ensure protection of people.

We saw that all new team members receive a thorough induction programme, which meets national training standards, and an ongoing training and development plan for all staff. The records we examined showed that 70% of care staff are in receipt of National Vocational Qualification (NVQ) level II or level III, with a further 20% undertaking NVQ training at the time of inspection. Overall the evidence shows a substantial account of a meaningful schedule of training to meet mandatory and specific demand. Comments:

Members of staff offered comments:

"Staff training, lots of it, this benefits the residents, but also the staff are more experienced and confident in their roles".

"It's stressful at times, but we all work together as a team and makes it work. Its really good to work at Woodford House".

Records were available to demonstrate an on-going process of regular supervision and supervised practice, showing training sessions and appraisals to be a routine feature of staff development.

## Management and administration

These are the outcomes that people staying in care homes should experience. They reflect the things that people have said are important to them:

People have confidence in the care home because it is led and managed appropriately. People control their own money and choose how they spend it. If they or someone close to them cannot manage their money, it is managed by the care home in their best interests. The environment is safe for people and staff because appropriate health and safety practices are carried out.

People get the right support from the care home because the manager runs it appropriately with an open approach that makes them feel valued and respected. The people staying at the home are safeguarded because it follows clear financial and accounting procedures, keeps records appropriately and ensures their staff understand the way things should be done. They get the right care because the staff are supervised and supported by their managers.

**This is what people staying in this care home experience:**

Judgement:

People using this service experience **good** quality outcomes in this area. We have made this judgement using a range of evidence, including a visit to this service.

People can be assured that the home is run in their best interests. The ethos of the service is based on openness and respect.

The care team, through good working practices, promote the health, safety and welfare of people who use this service.

Evidence:

We acknowledge that the Care Manager Julie Mc Donagh has continued to demonstrate clear competence over seven years in managing Woodford House, in establishing a solid professional management style that has been implemented, to achieve good standards of set aims, objectives and care. A Registered General Nurse with a BSc (Hons) Health Studies, Diploma in Management and the Registered Manager's Award, and has actively promoted, and enhanced the Key worker and Named Nurse team concept, supporting a Person Centred Support Planning process. The Registered Provider has demonstrated a high profile and involvement in the smooth running of the home, and is prepared to delegate a wide range of management responsibility to good effect. We acknowledged the openness and

## Evidence:

confidence in the observed interactions of staff, relatives and people who live in the home. The relationships were seen to be of mutual trust and respect. Several comments made by people who live at Woodford House, and visitors we spoke with, reinforced the strong foundation of confidence they had in the management leadership.

Comments we received from surveys, and staff interviewed on the day:

"Treats the residents as individuals. Everyone who works at Woodford gets to know the residents by name, laundry staff, domestics, handyman and I feel that its good, as we are all visitors in their home".

"Would like to grant resident's requests immediately rather than asking them to wait for a few minutes, but it isn't practical or realistic, even having double the amount of staff on shifts wouldn't always guarantee this to happen. Overall I feel Wood ford House is a good home at present, cant see how it can be improved".

"I think that WH is a good nursing home, it isn't just a house, its a home for 40 people. I like working there, and its nice that the residents, relatives and staff appear to like it too".

Our examination of records showed appropriate risk assessments are in place for people, through care planning and recording, staff selection and of the general environment, these are up to date and accurate. The service's completed AQAA states that the home has quality monitoring systems in place, and they also consult the people who use the service and their relatives about the service. We examined a Quality Development Plan for 2009 and found it an accurate reflection of a commitment on behalf of the Provider to maintain and improve facilities at Woodford House.

We recognise that the Providers with the Care Manager have developed a formal approach to monitoring quality across a wide range of activities. An examination of administrative, monitoring, planning and care records showed an organised and a professional attitude to effective record keeping. They were found to be well maintained, accurate and up to date, ensuring that people's rights and best interests are safeguarded. We identified that individuals are encouraged to be independent with regard to financial affairs with the assistance of their relatives. Small amounts of cash were efficiently handled by the Care Manager and administrator, through the Provider's office.

## Evidence:

We acknowledged the outcome of a recent (October 2008) internal survey conducted with people living in the home and their relatives. The results showed a clear indication that the home is run in those people's best interests. We made a random sample examination of the procedures manual, and found it to offer a very comprehensive reference. Policies on Missing Person, Safeguarding/managing abuse and complaints were examined, and found to be accurate and informative, although several years old and needing a review. Equality and diversity issues were also discussed covering a wide range of issues, including food, religion and staffing.

We found that the health and safety of people who use the service and staff, are promoted with safe storage of hazardous substances, regular electrical Personal Appliance Testing, servicing of hoists, gas appliances, and regulation of the water system. The accident book was seen and found to be in order for staff and people using the service, with a three monthly analysis of trends and frequency undertaken by the manger. The Care Manager was advised to ensure that completed records are held in peoples care plans to facilitate audit of accidents and effectiveness of action taken.

We found the administration and management of the home is efficient, uncomplicated and sensitive to the needs of people living in the home.

Are there any outstanding requirements from the last inspection?

Yes

No

## Outstanding statutory requirements

These are requirements that were set at the previous inspection, but have still not been met. They say what the registered person had to do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards.

No.	Standard	Regulation	Requirement	Timescale for action

## Requirements and recommendations from this inspection:

### Immediate requirements:

These are immediate requirements that were set on the day we visited this care home. The registered person had to meet these within 48 hours.

No.	Standard	Regulation	Requirement	Timescale for action

### Statutory requirements

These requirements set out what the registered person must do to meet the Care Standards Act 2000, Care Homes Regulations 2001 and the National Minimum Standards. The registered person(s) must do this within the timescales we have set.

No.	Standard	Regulation	Requirement	Timescale for action

### Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations
1	1	That the Statement of Purpose and Service User Guide be updated to reflect change and that consideration be given to producing the documents in larger print and audio versions, to assist people with poor eyesight to make an informed decision.
2	16	A Concerns, Complaints and Allegation book be established to more effectively monitor incidents.
3	19	To renew the fabric and furnishings of the 'Respite' rooms to present a acceptable facility for the use of people who are using the home for short periods of time.
4	19	To ensure that the general fabric and furnishings and decor standards are maintained, to provide people with a comfortable and safe living environment.
5	19	To remove building material from garden area to maintain a safe environment for people living in the home.
6	22	To cease the practice of recharging electrical hoists in the main corridors, to ensure the health and safety of people using the home.
7	24	To consider the environmental arrangements for people

## Recommendations

These recommendations are taken from the best practice described in the National Minimum Standards and the registered person(s) should consider them as a way of improving their service.

No	Refer to Standard	Good Practice Recommendations
		with dementia, including provision of easy recognition, dignified identification of bedrooms and facilities to enhance their well being.
8	26	To limit access to the kitchen to authorised catering staff, to maintain satisfactory standards of infection control and food hygiene.
9	33	That the Provider ensures a regular review of policies and procedures in light of changing legislation and of good practice.
10	36	Regular formal staff supervision, should be consistent in order to support and guide staff and enhance outcomes for residents.

## Helpline:

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