

Hollybank Trust

Willow Court

Inspection report

Far Common Road
Mirfield
West Yorkshire
WF14 0DQ

Tel: 01924491205
Website: www.hollybanktrust.com

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Ratings

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

Summary of findings

Overall summary

About the service

The registered provider, Hollybank Trust, provides education and residential care for children, young people and adults living with complex and multiple physical disabilities and associated communication, sensory and learning difficulties. Willow Court is registered to provide nursing and personal care for people who require care and attention relating to their complex needs.

The single storey purpose built home is split into three smaller units, known as bungalows, each of which has separate adapted facilities. Access into and around the home is level providing equal access for people who mobilise using a wheelchair or other mobility aids.

The service was a large home, bigger than most domestic style properties. It was registered for the support of up to 19 people and 19 people were using the service at the time of our inspection. This is larger than current best practice guidance. However, the size of the service having a negative impact on people was mitigated by the service working hard to make sure outcomes for people reflected the principles and values of Registering the Right Support. There was a very strong focus on promoting people's choice and control, independence and inclusion. People's support very clearly focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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

People told us they were happy with the service provided at Willow Court

The service placed people at the heart of the service. There was a strong person centred, caring and responsive ethos. People told us how they were treated with kindness, compassion and respect. We saw there was a very positive atmosphere and engaging interaction during our visit. Comments from people and relatives were positive. People confirmed that staff were caring, friendly and made them laugh.

People were safeguarded from the risks of abuse. Risks associated with people's care were assessed and monitored and people and relatives told us the service was safe. People's medicines were safely managed.

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. There were enough staff to meet the needs of each person. Recruitment continued to be undertaken in a safe way. Staff were skilled, motivated and knowledgeable. They had received appropriate training and support and were encouraged to develop their individual skills and interests. People received a balanced diet which met their individual needs and took into consideration their preferences.

People were supported by staff who were very kind and caring and who maintained their dignity and privacy and treated them with respect. People received very good, personalised care and support that was specific to their needs and preferences. People's needs were considered and reviewed, and changes made where

needed. Staff knew people well and were passionate about promoting people's independence. People were respected and valued as individuals; and empowered as partners in their care.

Staff were professional and motivated to achieve the best possible outcomes for people including choice, control and independence. People were fully involved in the service and had opportunities to give feedback. Systems of governance were in place to continually monitor the quality of the service provided. Feedback about the leadership and management was very positive and staff felt very well supported. Staff felt supported and spoke positively about the registered provider and registered manager.

Rating at last inspection:

The service was rated good at the last inspection in 2016 (published December 2016).

Why we inspected:

This was a planned inspection based on the previous rating. Although, the inspection was prompted in part by concerns received about a specific incident, during which a person using the service sustained a serious injury. This incident is subject to further investigation. As a result, this inspection did not examine the circumstances of the incident. The information CQC received about the incident indicated concerns about the management of falls from moving and handling equipment overall. This inspection examined those risks. We found no evidence during this inspection that people were at risk of harm from this concern. Please see the safe section of this full report. During this inspection we found the provider had taken action to mitigate future risks.

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.

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well led.

Details are in our well led findings below.

Good ●

Willow Court

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

This inspection was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

Willow Court 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. The registered manager was not present at the time of the inspection due to annual leave.

Notice of inspection

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

During the inspection

We visited the service on 5 and 6 June 2019. We spoke with four people who used the service, using 'yes/no' questions and with the help of the support staff. People happily indicated their opinions, using a mix of verbal and physical cues, as well as assistive technology and other communication aids. We spoke with two relatives, who gave us their experience of the service provided. We spoke with five members of staff including the nursing (clinical) lead, the head of the in-house clinical therapists and an area manager.

We reviewed a range of records. This included three people's care records and records of medicines. We looked at two staff files in relation to recruitment and staff training and support. A variety of records relating to the management of the service, including complaints, meetings, policies and procedures were reviewed.

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 good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse:

- Systems in place to safeguard people from abuse were effective. People and their relatives told us they were safe at Willow Court and we saw that people were comfortable in the presence of the staff. One relative said, "[Staff] are obliging and flexible. I feel [my family member] is safe here and I am happy to talk to the manager if something is not right I have confidence in them."
- Staff received safeguarding training and were clear about their responsibility to report any concerns.
- Staff had a good understanding of whistleblowing procedures within the provider's organisation. Whistleblowing allows staff to raise concerns about their service without having to identify themselves.

Assessing risk, safety monitoring and management:

- Any risks to people's health, welfare and safety were well managed.
- Person centred risk assessments were in place. These identified the potential risks to each person and described the measures in place to manage and minimise these risks.
- The management of risk was proportionate, as it did not negatively impact on people's activities and freedom.
- People were safely supported by equipment that was serviced and checked on a regular basis. Photographs were included in people's care plans to show staff how specialist equipment should be applied and fitted. One relative said, "All the equipment is well maintained in [family member's] room and there are some very personal touches here."
- People had personal emergency evacuation plans. Regular fire checks took place to ensure people were safe in the event of a fire.

Staffing and recruitment:

- People were protected against the employment of unsuitable staff because robust recruitment procedures were followed. This included seeking up to four references and other pre-employment checks for applicants.
- There were enough suitable, qualified and consistent staff available to meet people's needs,
- Staff were visible and attentive to people's needs and people received prompt care, support and regular interaction.

Using medicines safely:

- People were provided with safe and appropriate support with their medicines, which were stored and managed safely.
- Staff were trained to handle medicines in a safe way, completed training and received annual competency

assessments.

- To ensure the safe management of people's medicines, regular medicines audits were completed. Medicines records were checked by the management team to make sure people received their medicines as prescribed. Appropriate action had been taken when any errors were found.

Preventing and controlling infection:

- Effective measures were in place to prevent and control the spread of infection. The home was very clean and well maintained.
- Staff had received training in food hygiene and infection control.
- To prevent the spread of infection hand washing facilities, gloves and aprons were readily available for staff, who used them when needed.

Learning lessons when things go wrong:

- The service learned from past incidents and accidents to enable them to support people better.
- The management team were keen to develop and learn from events and use all opportunities to improve the service for people and for staff.
- There was a culture of learning lessons and staff were encouraged to reflect after incidents, on how things could have been done differently and where improvements could be made.
- Accidents and incidents were monitored from a senior level to ensure lessons learnt could be shared and monitored from an organisational level. This enabled possible trends to be identified and, where needed, action to be taken to reduce future risk.

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 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, and care and support was delivered in line with people's needs, choices and preferences.
- People and those important to them such as their close relatives, were involved in the assessment and the planning around people's support.
- People's plans were reviewed regularly to make sure they were current and met their needs. Each person had an assigned keyworker to monitor this.
- There was a strong focus on maintaining and improving each person's skills and experiences.

Staff support: induction, training, skills and experience:

- People were supported by staff who had the skills and knowledge to support them effectively.
- New staff received an in-depth induction to the service, which included training in all core knowledge needed to care for people effectively. New starters also worked alongside other more experienced staff until they were confident to work unsupervised.
- The service had introduced a mentoring scheme to provide extra support and advice to new starters from their colleagues.
- There was an effective, ongoing programme of training for all staff. This included core training such as fire safety, first aid, food safety and moving and handling. Staff also received training in other areas important to the specialist needs of the people who used the service.
- Staff who were interested in progressing their career had access to the , 'Leaders of the future' training programme, which covered areas such as coaching and mentoring, time and budget management and report writing.
- Staff received regular supervision and appraisal to monitor their performance and support them in their roles.

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

- People received a balanced diet which took in to consideration their preferences and dietary requirements.
- People were involved with planning and preparing their meals and drinks and staff were very knowledgeable about people's likes and dislikes.
- Where people's culture included specific dietary needs, people's wishes were facilitated and respected.
- Where people were at risk of not maintaining a balanced diet, there was information in their care plans guiding staff on how this should be addressed. When needed, staff closely monitored and recorded people's

food and fluid intake. and advice was sought from relevant community healthcare professionals.

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

- Staff worked well with external professionals to ensure people were supported to access health services and had their health care needs met.
- Relatives felt confident that their family member's health needs were met at Willow Court. One relative said, "I am happy with the care [family member] receives and their medical needs. [Staff] step up to it and people are attended to very well. The staff have a good relationship with the health care professionals and if [family member] is not well they ring me and let me know."
- People's health needs were assessed and planned for, to make sure they received the care they needed. Staff also told us that the way medical appointments were planned meant people could be seen at home, by a visiting GP, so they did not have to travel and wait in an outpatient department.
- Each person had a health 'passport', which was taken with them to hospital or medical appointments. These gave clear information to other health care professionals about the abilities and needs of the person, including how to provide support where the person had difficulty communicating with others.

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

- The building was designed to suit the individual needs of the people who used the service.
- Each person's bedroom was decorated and furnished in a way that reflected their individual preferences, interests and personalities.
- Corridors and doorways were wide enough to enable people to move freely within the home and communal areas were homely. There was enough space for people to take part in group activities and for people to access quiet areas for times when they wanted their own space.
- There was ample, accessible outside garden space.

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.

- People were supported by staff who were appropriately trained and knew the principles of the MCA.
- People's mental capacity to make decisions was assumed unless there was evidence to suggest otherwise and there was a strong emphasis on involving people and enabling them to make choices wherever possible.
- Where people had been deprived of their liberty the service had requested DoLS authorisations from the local authority to ensure this to be lawful and people's rights were protected.

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 remained good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- People's views were central to how their care was planned and delivered. People told us they were supported to make choices about how they lived their lives and their choices were respected by the staff. For instance, people said they chose when they wanted to get up and go to bed.
 - People told us staff were friendly, kind and caring and looked after them well.
 - We saw staff talking to people in a sensitive way, and the atmosphere was calm and positive as staff engaged people in preparing meals in the kitchen.
- Staff told us how they had seen real improvements in people's confidence to try new things and believed this was due to staff motivating and encouraging them, which had had a positive impact on their self-esteem.
- Staff were proud of people's achievements. People had been supported to become more independent through staff encouraging and motivating them to develop and learn new skills.
 - One member of staff said, "We are one big, happy family here." This was echoed by a relative who said, "We could tell if [family member] wasn't happy, but we are like one big happy family and we work as a team."

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

- There was a strong person-centred culture, with staff ensuring people were treated equally and fairly. Staff were observed supporting people in a kind, compassionate and empowering way.
- Staff received training in equality and diversity, and people's diversity and individuality were respected and their rights were considered when their care was being planned.
- Staff showed kindness towards the people and it was clear to see there were strong relationships between people and staff. Some staff had cared for people for 16 years and had a very good understanding of people's individual care, support and communication needs.

Respecting and promoting people's privacy, dignity and independence:

- People's privacy, dignity and independence were upheld and promoted.
- Staff members spoke passionately about providing people with as many opportunities as possible and a very good quality of life for the people they supported. Staff were proud of the difference they made in people's lives.
- Staff spoke to people with warmth and respect.
- People were treated as equals and were given just the right amount of support they needed. We saw people being actively involved in all aspects of their support from choosing and cooking their meal to

choosing what activities they wanted to do and how they wanted to be involved.

- There was a relaxed and inclusive atmosphere at the service. Everyone looked to be happy and there were lots of smiling faces and people laughing and joking.
- The people and relatives we spoke with gave positive feedback about the staff.
- Staff were person centred and encouraged people to do as much for themselves as they were able to.

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 remained good. This meant people's needs were met through good organisation and delivery.

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

- People benefitted from the very person-centred culture and ethos within the service.
- People's care records were person-centred and detailed. The service had further improved people's person-centred care plans, which included information about people's daily routines, including the tasks they could do independently and where they needed support.
- People were involved in reviewing and updating their care plans. Care records were very detailed and specific to each person's individual needs.
- Staff showed a very good understanding of people's individual needs, and how best to meet them. This was praised in the feedback we received from family members.

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

- Staff told us activities were carefully selected with the person. One person told us they enjoyed cookery at college. Staff told us the person had learned to operate switches and this meant they could be more involved, for instance, operating the food mixer.
- Some people used 'eye-driven' technology, accessing their tablet communication systems using a mouse they controlled with their eyes. This helped them in making their needs and choices known.
- We saw photographs that showed that people had access to an impressive range of social activities to help ensure they lived as full a life as possible. People had very busy, individualised and variable activity plans.
- The service worked hard to overcome any barriers to ensure people lived as full a life as possible. For instance, ensuring those with mobility needs had opportunities to be involved in a very wide range of activities. People had lots of opportunities to be involved in physical activities such as wheelchair dancing, curling, archery, walking group, sensory gardening, sailing, fishing, climbing, horse riding and ice skating.
- Less physically demanding activities included messy art, music therapy, reading sessions, flower arranging, visits to the seaside, theatre and cinema and pop concerts.
- People indicated they were happy with the activities they engaged in. One person confirmed they liked to be busy and to help with the day to day running of their home. The laundry was something they really enjoyed.
- Technology was used to enhance people's care. People were able to access computers and tablets. People had various interactive devices to play their own music and play games. This gave them the opportunity to do things independently, without needing staff to assist them.

Meeting people's communication needs:

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

- Staff at Willow Court consistently ensured information was available to people in an accessible way, using combinations of pictures of reference, simple language and sign language to make information easier to understand, depending on each person's individual communication needs. This enabled effective communication with people.
- Most people who used the service did not rely on spoken language. We saw that they happily indicated their needs and choices, using a mix of verbal and physical cues, as well as assistive technology and other communication aids.
- Staff gave good account of how well they understood people's communication needs. For example, one member of staff said, "[Person] will let us know how they are feeling and we understand their emotional needs because of how their body language changes."
- One relative said, "[My family member's] communication and development has improved since living here. We have lots of examples of good practice the staff are patient with [family member]. They help him with his equipment and respond well to him."
- Notice boards provided information in an easy read format, such as the complaints procedure and summary of meeting minutes. This helped to promote meaningful engagement in their home. This also displayed pictures of activities people had engaged in.
- The service was innovative in the use of assistive technology and other communication aids to meet people's information and communication needs. People were supported to use devices to help learn and retain information, and ensuring a documentation was in an accessible format. Each person had a clear communication passport and staff were very familiar with people's bespoke methods of communication and used them effectively to interpret what people liked and wanted.

End of life care and support:

- There was a commitment to provide the best possible care for people towards the end of their life. The service had undertaken a training programme and embedded the learning within the service, enabling staff to provide the best standard of care for people and their families when people were nearing the end of life. This was supported by service having achieved Gold Standards Framework (GSF) accreditation in early 2019. The GSF is a national framework endorsed by government and professional organisations to support best practice in end of life care.
- The service was not supporting anyone at the end of their life at the time of the inspection. However, people's end of life wishes had been discussed, so there was key information in their records, for when needed.

Improving care quality in response to complaints or concerns

- People and their relatives told us they would talk to the manager or one of the staff if they had a complaint.
- The manager investigated complaints. They met with or telephoned the person making the complaint and resolved them.
- The manager kept a complaints log, which showed the actions they had taken to resolve complaints.
- We asked if people could tell staff if they were unhappy and they confirmed that they could. Staff helped one person tell us about a time when they had confidently raised an issue, which had been listened to and addressed.
- One relative said, "In the past we have made a complaint and it was resolved. The only thing I would

change is I would like more male staff .We talk with the manager every three months to raise any issues and this works well. They are good listeners and put their hands up if things don't work.

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 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:

- Relatives and staff told us there was a positive culture about the registered manager and the rest of the staff team.
- People were seen as equal and individuals and were treated with respect. A member of staff said, "I love my job and I feel very passionate about giving people the best life they can have and helping people to reach their true potential. The people who live here are just lovely and the staff team are very, very good."
- The management team made sure there was a very good use of assistive technology to support people to communicate and to enable them to be as independent as possible.
- People's support focused on them having as many opportunities as possible to engage in diverse activities and gain new skills, which had built people's independence and self-esteem.
- People's achievements were not only valued and celebrated within the service, but also within their local community. To celebrate learning disability week Hollybank Trust hosted an award evening. All services for in the local area were invited to nominate people who used their services for an outstanding achievement award. People received an Oscar style award and the stories about their personal achievements were read out.

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

- There was a positive culture in the service, with good leadership and a staff team who were very motivated to achieve the best outcomes for people.
- The members of the staff team we spoke with were professional and open when speaking with us about their role and the people they supported. Feedback about the registered manager was very positive and staff felt very well supported.
- Records CQC held about the service confirmed that for the most part, the provider sent in notifications as required to CQC. A notification is information about important events that the law requires the provider to notify us about such as safeguarding concerns, deaths, and serious incidents. However, one notification, regarding one person sustaining an injury was delayed due to the registered manager taking annual leave. We discussed the provider reviewing the systems of reporting to prevent any recurrence.

Continuous learning and improving care

- The management and staff team was committed to delivering the best service possible for people. They

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

- The provider had introduced improvements in the system of governance and audits seen at the last inspection in 2016.
- An effective programme of quality assurance and audits was in place. These checks helped to sustain quality and drive improvement.
- To enable senior managers to keep an overview and to monitor the service effectively, the registered manager submitted reports about events, and the quality and safety in the service on a weekly basis. A more detailed monthly report was also submitted to executive team.
- Where improvements were identified, action plans gave clear actions for staff to take. There was also evidence that discussion took place and further training and support provided, when necessary.
- The members of the staff team we spoke with were clear about their role and responsibilities and told us there was a focus on continuous improvement. They came across as very committed and person-centred in their approach.

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

- The feedback received from people and relatives was positive Staff confirmed that the registered manager encouraged feedback and acted on it to continuously improve the service, for example by undertaking regular reviews with people about their care and support needs. . This has a positive impact on people who were actively encouraged to live their lives to the full.
- Daily meetings and monthly team meetings took place to give the team the opportunity to reflect on what they had been doing and how they could further improve the service.

Working in partnership with others:

- People were supported by an in-house therapy team, including speech and language therapists, physiotherapists and occupational therapists. It was evident that this helped to maintain optimum wellbeing, mobility and quality of life for people.
- Staff worked holistically and in partnership with other health and social care professionals to promote and enhance people's well-being.