

# Review of compliance

<p>HC-One Limited The Willows Residential Home (Hinckley)</p>	
<p><b>Region:</b></p>	<p>East Midlands</p>
<p><b>Location address:</b></p>	<p>89 London Road Hinckley Leicestershire LE10 1HH</p>
<p><b>Type of service:</b></p>	<p>Care home service without nursing</p>
<p><b>Date of Publication:</b></p>	<p>October 2012</p>
<p><b>Overview of the service:</b></p>	<p>The Willows is close to the centre of Hinckley and provides residential care for up to 32 older people. At the time of our inspection there were 23 people resident at the home.</p>

# Summary of our findings for the essential standards of quality and safety

## Our current overall judgement

**The Willows Residential Home (Hinckley) was meeting all the essential standards of quality and safety inspected.**

The summary below describes why we carried out this review, what we found and any action required.

### Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

### How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 6 August 2012, observed how people were being cared for, looked at records of people who use services, talked to staff and talked to people who use services.

### What people told us

People told us what it was like to live at this home and described how they were treated by staff and their involvement in making choices about their care. They also told us about the quality and choice of food and drink available. This was because this inspection was part of a themed inspection programme to assess whether older people living in care homes are treated with dignity and respect and whether their nutritional needs are met.

The inspection team was led by a CQC inspector who was accompanied by an Expert by Experience (people who have experience of using services and who can provide that perspective) and a practising professional.

During our inspection visit to The Willows we met a number of people who used the service and some of their visiting relatives. We spoke in detail with seven of the people who used the service and one relative visiting at the time of our inspection and asked them for their views on the service they received.

The people we spoke with were pleased with the level of care they received at The Willows and found the staff to be attentive. One person told us, "The staff never complain and they never say no. They really are very good and they all treat me with respect." People also told us that they were satisfied with the food The Willows. One person described to us how much she enjoyed the meals, "The food is lovely, it's really good. You get a daily menu to choose from and it's cooked well."

### What we found about the standards we reviewed and how well The Willows Residential Home (Hinckley) was meeting them

**Outcome 01: People should be treated with respect, involved in discussions about their care and treatment and able to influence how the service is run**

The provider was meeting this standard. People's privacy, dignity and independence were respected.

**Outcome 05: Food and drink should meet people's individual dietary needs**

The provider was meeting this standard. People were protected from the risks of inadequate nutrition and dehydration.

**Outcome 07: People should be protected from abuse and staff should respect their human rights**

The provider was meeting this standard. People were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

**Outcome 13: There should be enough members of staff to keep people safe and meet their health and welfare needs**

The provider was meeting this standard. There were enough qualified, skilled and experienced staff to meet people's needs.

**Outcome 21: People's personal records, including medical records, should be accurate and kept safe and confidential**

The provider was meeting this standard. People were protected from the risks of unsafe or inappropriate care and treatment.

**Other information**

Please see previous reports for more information about previous reviews.

**What we found  
for each essential standard of quality  
and safety we reviewed**

The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

Compliant means that people who use services are experiencing the outcomes relating to the essential standard.

Where we judge that a provider is non-compliant with a standard, we make a judgement about whether the impact on people who use the service (or others) is minor, moderate or major:

A minor impact means that people who use the service experienced poor care that had an impact on their health, safety or welfare or there was a risk of this happening. The impact was not significant and the matter could be managed or resolved quickly.

A moderate impact means that people who use the service experienced poor care that had a significant effect on their health, safety or welfare or there was a risk of this happening. The matter may need to be resolved quickly.

A major impact means that people who use the service experienced poor care that had a serious current or long term impact on their health, safety and welfare, or there was a risk of this happening. The matter needs to be resolved quickly.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary changes are made.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*

## Outcome 01: Respecting and involving people who use services

### What the outcome says

This is what people who use services should expect.

People who use services:

- \* Understand the care, treatment and support choices available to them.
- \* Can express their views, so far as they are able to do so, and are involved in making decisions about their care, treatment and support.
- \* Have their privacy, dignity and independence respected.
- \* Have their views and experiences taken into account in the way the service is provided and delivered.

### What we found

#### Our judgement

The provider is compliant with Outcome 01: Respecting and involving people who use services

#### Our findings

##### What people who use the service experienced and told us

People we spoke with were pleased with the level of care they received at The Willows and found the staff to be attentive. One told us, "I don't think there is a home that's better than this." Another added, "I think I'm spoilt here, the staff are very good."

Those we spoke with also told us that they were treated with respect and their views were taken into account. Their comments to us included;

"The staff never complain and they never say no. They really are very good and they all treat me with respect."

"I was asked if I wanted male or female carers and my wishes have been respected."

"The management often ask how I am during the day".

##### Other evidence

Is people's privacy and dignity respected?

Staff interacted with people well when assisting them with their care needs. They were respectful and gave explanations and regular reassurance to the person they were supporting.

They also demonstrated that they were familiar with people's individual needs and preferences. They used people's preferred names when they spoke with them and

showed an understanding of people's preferred routines and specific needs by the way they spoke to them and supported them.

All the bedrooms were single occupancy. The rooms were well furnished and personal touches had been added with people's own furnishings and decorative items, such as family photos, ornaments and pot plants. This gave a homely and individual feel to each room. Each room had a lockable cupboard to enable people to store their valuable or private items securely.

A swing sign was displayed on each bedroom door which was used by staff to indicate when the person should not be disturbed (for example, when a member of staff was supporting them with their personal care). At other times the sign was turned to the alternative side, with a message to prompt staff to knock before entering. The signs were a simple and useful way of helping to support people's privacy and dignity.

Are people involved in making decisions about their care?

We selected six sets of care plan documents to review. These gave information about people's preferred routines, their likes and dislikes. This showed that the person, or their representative, had been involved in putting these plans together and their views had been taken into account.

Throughout the day staff offered people the opportunity to make decisions and express their preferences. People were invited to choose where they would like to sit and spend their time, what drinks or snacks they would like and to choose their meals for the day.

The home employed an activities co-ordinator who worked most days and occasional weekends, but was on leave on the day of our inspection visit. This person arranged group and one to one activities within the home and occasional excursions. People we spoke with appreciated this aspect of the service, particularly the trips and excursions.

There were regular Christian worship services held at the home. One of the people we spoke with told us how much they valued this opportunity to participate in a regular service of worship. There were people living at the home who observed other religions. Staff had an understanding of these people's specific needs and arrangements were in place to support these people and take their beliefs into account.

### **Our judgement**

The provider was meeting this standard. People's privacy, dignity and independence were respected.

## Outcome 05: Meeting nutritional needs

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are supported to have adequate nutrition and hydration.

### What we found

#### Our judgement

The provider is compliant with Outcome 05: Meeting nutritional needs

#### Our findings

##### What people who use the service experienced and told us

People we spoke with were very satisfied with the food they received at The Willows. One person described to us how much she enjoyed the meals, "The food is lovely, it's really good. You get a daily menu to choose from and it's cooked well." Another said, "The food is excellent, I never leave a thing and I even have a sweet now. The best part about it is that I don't even have to wash up!"

##### Other evidence

Are people given a choice of suitable food and drink to meet their nutritional needs? People's nutritional needs had been assessed using a malnutrition universal screening tool (MUST) which took into account people's weight and body mass index, and helped to identify any potential risks. A number of people using the service benefitted from the specialist support of a dietician to help manage their nutritional needs.

The cook was made aware of people's dietary needs and preferences, and these were taken into account in menu planning. At a recent residents' meeting people had shared their views about meals and discussed variations to the menu.

People were offered a wide choice of drinks and snacks at mid morning and mid afternoon. Aside from tea and coffee there were milky drinks, smoothies, fresh fruit and biscuits. Home made cake was available every afternoon.

Each morning, as part of the mid morning drinks routine, people were told about the menu options for the day and invited to make their choices. Daily menu information was also written on white boards in the dining areas.

During our inspection we observed the lunchtime arrangements, which was when the main meal of the day was served. People chose where they preferred to take their meal. Some residents chose to sit in the dining rooms whilst others preferred to take their meals in their own rooms.

Are people's religious or cultural backgrounds respected?

At the time of our inspection none of the people using the service at The Willows had expressed any specific religious or cultural dietary needs.

Are people supported to eat and drink sufficient amounts to meet their needs?

At lunchtime there were eight people having their meal in the downstairs dining room. There were two carers serving meals and assisting people where needed. The meals were hot when served and assistance was given in an unhurried, respectful manner.

People who ate in their own rooms received their food promptly, so it was still hot. Adapted crockery and cutlery was available and used by a number of people to assist them to be as independent as possible at meal times.

**Our judgement**

The provider was meeting this standard. People were protected from the risks of inadequate nutrition and dehydration.

## Outcome 07: Safeguarding people who use services from abuse

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

### What we found

#### Our judgement

The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

#### Our findings

##### What people who use the service experienced and told us

The people we spoke with felt secure and well looked after at The Willows. One told us, "I feel absolutely safe here".

People also told us they were confident about raising concerns, should they need to. One person told us, "I have no concerns, but if I had I would speak to Matron and I am confident of a swift resolution".

Two others told us they were extremely confident that staff or managers would resolve any concerns they might have with one saying "I would speak to the boss with any concerns".

##### Other evidence

Are steps taken to prevent abuse?

We spoke with four of the staff on duty at the time of our inspection. They demonstrated an understanding of the types of concerns that could constitute abuse.

Do people know how to raise concerns?

Staff we spoke with understood their personal responsibility to help protect and keep safe the people who used the service. They were clear about the steps they would take if they had any concerns.

The provider had responded appropriately to a recent allegation of abuse. A safeguarding concern had been raised and appropriate action had been taken to

address this. The manager told us there had been discussions at staff meetings about this topic and the company whistle blowing policy and staff helpline number had been promoted to all staff.

**Are Deprivation of Liberty Safeguards used appropriately?**

Staff we spoke with, including the manager, were unclear about the requirements of the Mental Capacity Act 2005 and deprivation of liberty safeguards (DoLS). The provider had not taken steps to establish whether people who used the service had sufficient mental capacity to make decisions about their care arrangements or whether further steps should be taken to ensure they were properly supported.

The provider may find it useful to ensure staff are fully familiar with the requirements for DoLS and that screening assessments are carried out for people who use the service.

**Our judgement**

The provider was meeting this standard. People were protected from the risk of abuse, because the provider had taken reasonable steps to identify the possibility of abuse and prevent abuse from happening.

## Outcome 13: Staffing

### What the outcome says

This is what people who use services should expect.

People who use services:

\* Are safe and their health and welfare needs are met by sufficient numbers of appropriate staff.

### What we found

#### Our judgement

The provider is compliant with Outcome 13: Staffing

#### Our findings

##### What people who use the service experienced and told us

All of the people we spoke to were complimentary about the staff at The Willows. They told us that when they needed support this was usually provided promptly and to a good standard. Their comments included;

"My care is unhurried they (staff) always have time for me."

"They look after me very well, they even asked what name I wanted to be known by."

"Staff are ever so good, when I came out of hospital they were in and out all the time asking if I wanted anything".

##### Other evidence

Are there sufficient numbers of staff?

There were four care staff on duty on the day of our inspection. The manager of the home had assessed that this was an adequate number, taking into account the people currently using the service and their specific support needs. During our inspection visit people's requests for help and support were responded to promptly and call bells were answered swiftly.

At lunchtime there were sufficient staff to ensure that people received their meals in a timely way and received the support they required. The catering assistant also assisted with the lunchtime routine.

On the day of our inspection, particularly in the morning, the people who used the service had limited opportunities for social interaction or recreational activities. The activities coordinator was absent for the day and care staff were fully occupied with their

care duties, so had little opportunity to sit and spend time chatting to people or joining them in an activity. There were a number of people who would have benefitted from greater social interaction and diversion. One person spent most of the morning sitting alone in the first floor dining room. A small group of people spent the morning in the downstairs lounge with little to divert or interest them, aside from the television at the far end of the room. In the afternoon a member of care staff spent time playing dominoes with a small group of people. We were told that there was often more opportunity for staff to support these activities during afternoon shifts, which were less busy than the morning.

The provider may find it useful to note that greater staffing capacity throughout the day would help to ensure that people's social and recreational needs were fully met.

Do staff have the appropriate skills, knowledge and experience?

Staff demonstrated competence in their roles. They were familiar with people's needs and conducted themselves in a professional manner.

We looked at the provider's training records which showed there were a wide range of courses that staff were required to attend to support them in their job roles. There were significant gaps in this staff training. Some staff had not completed all the essential training they should have done, or they were well overdue attending refresher training to update their knowledge.

#### **Our judgement**

The provider was meeting this standard. There were enough qualified, skilled and experienced staff to meet people's needs.

## Outcome 21: Records

### What the outcome says

This is what people who use services should expect.

People who use services can be confident that:

\* Their personal records including medical records are accurate, fit for purpose, held securely and remain confidential.

\* Other records required to be kept to protect their safety and well being are maintained and held securely where required.

### What we found

#### Our judgement

The provider is compliant with Outcome 21: Records

#### Our findings

##### What people who use the service experienced and told us

The people we spoke with did not have copies of their own care plans, nor could they recall having seen these. They were confident that if they wished to see these documents they would ask a member of staff and this would be supported.

##### Other evidence

Are accurate records of appropriate information kept?

People's personal records, including medical records, were accurate and fit for purpose. We selected six sets of care plan documents to review. These were detailed, up to date and had been reviewed by staff on a regular basis. In each case a malnutrition universal screening tool (MUST) had been completed

Regular weight recordings had been taken and weight patterns reviewed to identify any patterns of concern.

In some cases the MUST assessments had identified possible risks and arrangements had been put in place to monitor these people's nutritional intake. Where food and fluid charts were in place these were completed on a reliable basis and the information was reviewed by senior staff.

Are records stored securely?

Records could be located promptly when needed but were not always kept securely.

The main care plan documents were kept in the care office, with access to the room restricted to staff with a secure key pad.

Most daily recording sheets, for example those to monitor regular repositioning or food and fluid intake, were kept in people's own bedrooms to enable staff to keep these up to date throughout the day. When complete the charts were removed from the bedrooms and stored in the care office.

In a small number of cases people's daily recording sheets were kept in an unlocked drawer in the reception area, adjacent to the main lounge. The provider may find it useful to note that this could potentially lead to people's privacy being compromised as these records could be accessed by visitors to the home or by other people who used the service.

**Our judgement**

The provider was meeting this standard. People were protected from the risks of unsafe or inappropriate care and treatment.

# What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called *Guidance about compliance: Essential standards of quality and safety*.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

Where we judge that providers are not meeting essential standards, we may set compliance actions or take enforcement action:

**Compliance actions:** These are actions a provider must take so that they **achieve** compliance with the essential standards. We ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action:** These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.

## Information for the reader

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