

Buckland Care Limited

# Willow Bank House Residential Home

## Inspection report

Willow Bank House  
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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

Willow Bank House is a residential care home providing personal care for up to 63 people aged 65 and over and who maybe living with dementia. The service is split across two floors within one large adapted building. There was a small unit on each floor, one known as Angel Bec and the other Ray Bold. At the time of the inspection 59 people were living in the home.

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

People told us they felt safe and were supported by the staff who worked in the home. Relatives felt their family member was safe and cared for in the right way. Staff recognised different types of abuse and how to report it. The registered manager understood their safeguarding responsibilities and how to protect people from abuse. Potential risks to people's health and wellbeing had been identified and were managed safely. People, and where appropriate, their relatives, had been involved with decisions in how to reduce risk associated with people's care. There were sufficient numbers of staff on duty to keep people safe and meet their needs. People's medicines were managed and stored in a safe way. Safe practice was carried out to reduce the risk of infection.

People's care needs had been assessed and reviews took place with the person and, where appropriate, their relative. Staff had the training and support to be able to care for people in line with best practice. People were supported to have a healthy balanced diet and were given food they enjoyed. Staff worked with external healthcare professionals and followed their guidance and advice about how to support people following best practice. 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 did support this practice.

People told us staff were kind and treated them well. Relatives felt the staff cared for their family member in a caring and supportive way. Staff treated people as individuals and respected the choices they made. Staff treated people with care and respect and maintained their dignity.

People's care was delivered in a timely way, with any changes in care being communicated clearly to the staff team. We received mixed views in how people were supported to maintain their hobbies and interest. The activities co-ordinator worked with people and their relatives to learn more about people's likes and dislikes to develop individualised activities. Where people chose to join the activities, they enjoyed these. People had access to information about how to raise a complaint. People's end of life care needs were met in line with their preferences in a respectful and dignified way.

All people, relatives and staff felt the service was well run. The registered manager was visible within the home and listened to people's and staff's views about the way the service was run. The registered manager had put checks into place to monitor the quality of the service provision. The provider had additional checks in place to ensure the service provision was of a good standard.

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

#### Rating at last inspection

The last rating for this service was requires improvement (published 24 October 2018).

#### Why we inspected

The inspection was prompted in part due to some concerns received about staffing and also the previous ratings of the service. A decision was made for us to inspect and examine those risks.

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

#### Follow up

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

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

We always ask the following five questions of services.

### Is the service safe?

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 Bank House Residential Home

## **Detailed findings**

### Background to this inspection

#### The inspection

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

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

#### Inspection team

On the first day of the inspection there were two inspectors, a mental health specialist advisor and an Expert by Experience for older people who live with dementia. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service. On the second day of the inspection there were two inspectors.

#### Service and service type

Willow Bank is a 'care home'. People in care homes receive accommodation and personal care as a single package under one contractual agreement dependent on their registration with us. Willow Bank is a care home without nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

#### Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

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

#### Notice of inspection

This inspection was unannounced.

#### What we did before 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 (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

#### During the inspection

We spoke with 14 people who lived in the home and four relatives. We spoke with 17 staff, this included care staff, senior care staff, team leaders, domestic staff, catering staff, laundry staff, the activities co-ordinator and the registered manager. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us. We reviewed 14 records in relation to people's care, including medication records. We also reviewed a range of records held by the service including, staff training and rota's, recruitment records, complaints and compliments, audits and checks. After the site visit, we spoke with the nominated individual. The nominated individual is responsible for supervising the management of the service on behalf of the provider.

# Is the service safe?

## Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People we spoke with told us they continued to feel safe with the staff who supported them. One person said, "I feel safe here." While a relative told us, "Mum is totally safe and much less agitated than before."
- Staff demonstrated a good understanding of the different types of abuse people could experience and how what approach they would take in the event of any concerns.
- The registered manager understood their responsibilities regarding the action to take to protect people from harm.

Assessing risk, safety monitoring and management

- People's individual risks had been assessed and care plans had been developed with the person, and where appropriate, their family. Risk assessments were up to date and reflected people's current care and support needs.
- People told us staff understood their care and support needs. The interactions we saw between people and staff showed staff knew how to support them.
- Relatives felt staff understood their family members individual risks, and how to manage these. We saw from care records that relatives were involved where appropriate.
- There was good communication processes in place, such as daily handovers, which ensured any changes to people's care needs were known by all staff.
- People's care needs were reviewed monthly or sooner where necessary. Records contained good detail about the person's needs, however we found some further work was required to ensure all aspects of the records were updated following any change. For example, where a person's mobility had changed, the records showed the person needed to be hoisted. However, the record for their continence needs stated the person would walk to the toilet. We told the registered manager about this who confirmed this would be reviewed. We did not find that these records had a negative impact on the person's care.

Staffing and recruitment

- At the last inspection we found the deployment of staff was not effective. At this inspection we found improvements had been made to the deployment of staff.
- Staff told us that in previous months, staffing numbers had been a challenge for various reasons, such as the COVID-19 pandemic and staff sickness. Where staffing numbers were low, agency staff supported the service. At the time of the inspection, no agency staff had been required for a month. Staff told us that over recent weeks, permanent staffing levels had improved. One staff member said, "It's better now there are more permanent staff here."
- Most people we spoke with felt there was enough staff to meet their needs and keep them safe. Our

observations showed staff were attentive to people's needs and had been deployed effectively throughout the home to ensure greater oversight of all areas in the home.

- Some relatives told us they had felt staffing levels had been lower in previous months, but did not feel this had a negative impact for their family member. Relatives felt that over recent weeks staffing levels had improved and there was sufficient staff on duty to keep people safe.
- The registered manager monitored staffing levels by reviewing people's dependency needs through reviewing people's care plans, speaking to staff and undertaking observations to help determine the staffing levels required to meet people's needs. The registered manager ensured there was a good skill mix of staff on duty, where more experienced staff worked alongside newer staff which they told us worked well
- The provider carried out safe recruitment practices before employing staff to work in the home.

#### Using medicines safely

- At the last inspection we found improvements were required in relation to recording administration of prescribed creams. At this inspection we found improvements had been made in this area.
- People received their medicines as prescribed. Staff checked if people required medicine 'as required', for example pain relief, to ensure people were comfortable.
- The provider was following safe protocols for the receipt, storage and disposal of medicines.

#### Preventing and controlling infection

- People told us their bedrooms were regularly cleaned. Relatives told us the home was clean. One relative said, "It always used to smell in there. I never notice it now".
- Since our last inspection, flooring had been replaced and new furniture had been bought which was easier to clean. A domestic staff told us "the home is easier to keep cleaning now." They also told us they worked well in a team to ensure the hygiene standards were consistently met.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.
- The provider facilitated visitors into the home in a way which kept people who lived in the home safe, while maintaining people's social needs.

#### Learning lessons when things go wrong

- The management team completed daily checks to ensure staff provided care and support in line with best practice. The team leaders worked alongside staff to ensure staff maintained a good quality of care.
- Where incidents had taken place, these were reviewed so learning could take place to prevent them from happening again.

# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- People's care needs had been assessed and planned in line with best practice.
- People's protected characteristics under the Equalities Act 2010 were identified as part of their need's assessment. Staff told us about people's individual characteristics and knew how to best support them. This included, but was not limited to, people's religious beliefs, cultures and personal preferences.

Staff support: induction, training, skills and experience

- People told us staff were confident in their approach and had the knowledge and abilities to meet their individual needs.
- Relatives told us they were happy with the way their family members were cared for and were confident in the staff's abilities to care for their family member.
- Staff were confident in the care and support they provided. They told us they had received mandatory training that was appropriate for the people they cared for, such as safe manual handling and first aid training. New staff felt they had sufficient time working alongside existing staff before they begun working alone.
- There was a good mix of staff on duty who had a variety of skills. We saw the staff team worked well together to provide care and support to people.
- The registered manager was aware of their responsibility to support staff who were new to care to work towards Qualifications and Credit Framework (QCF) and the Care Certificate set out by Skills for Care. The Care Certificate supports new staff to gain confidence, so they have the same introductory skills, knowledge and behaviours to provide compassionate, safe and high-quality care and support.

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

- People told us they were given a choice of meals to eat during the day. People confirmed they had plenty to eat and were offered food they enjoyed.
- We saw staff gave people visual offerings of different food options so people could make an informed choice. Where people required assistance to eat, this was done at the person's own pace and in a respectful way.
- Staff understood people's dietary preferences and understood how to meet these.
- Staff monitored people's weight to ensure this remained stable and people remained well. Where people required support with weight management, this was monitored and where necessary discussed with the person's doctor.
- People's individual dietary needs was shared with the kitchen staff so their meals could be adapted to suit

their needs.

- We saw people were provided with drinks throughout the day, with a variety of different options.

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

- Healthcare professionals visited the service where necessary, or as part of routine medical review rounds. We saw care records which demonstrated people had appointments when they required them.
- We saw people were supported to attend health appointments, opticians, chiropodists and dental appointments, so they would remain well.
- Relatives confirmed if their family member was unwell, a doctor was promptly called, and where appropriate, they were kept up to date with the wellbeing of their family member.
- Staff were aware of people's upcoming health appointments, and so ensured people were ready and prepared to attend these appointments on time.

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

- Willow Bank House Residential Home is a purpose-built home with wide corridors and a lift to access the upper floor. There were large 'walk in' showers, and baths with hoists to support people with reduced mobility.
- People and relatives told us the home environment was homely and suitable for their needs.
- Rooms and facilities had clear signage to help support people in finding the right place.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The MCA requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- People told us staff would ask for their consent before undertaking any personal care. People felt staff respected their wishes and listened to them. We heard staff seeking consent prior to supporting people.
- Relatives told us they were involved in best interest meetings with their family member. Relatives felt where their family member lacked capacity to make certain decisions, staff supported them in the least restrictive way.
- Records demonstrated external professionals had been contacted in a timely way, and a multi-disciplinary approach had been taken to ensure the least restrictive practice was provided.
- We saw people were able to move freely around the home and the garden areas as they wished.
- Where the registered manager had deemed people were being deprived of their liberty, applications had been sent to the local authority for authorisation.

- The registered manager met their legal requirement to notify the CQC where a person had been legally deprived of their liberty.

# 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 our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- At the last inspection we saw some people looked unkempt and records did not support that staff had made attempts to support people with personal care at a time that suited people's individual preferences. At this inspection, we found improvements had been made. For example, where a person had refused personal care in the morning, this was offered at a different time, to which the person agreed.
- At the last inspection we found the temperature of the water in some bathrooms was cold, and the doors were not lockable. At this inspection the water was warm, and the locks had been fixed, so people could maintain their privacy.
- At the last inspection we saw times when people living with dementia were left alone in the corridors in the upstairs of the home, with no staff present to support, reassure and re-direct them. At this inspection people were better supported, and staff invited people outside for walks in the fresh air.
- People told us how kind the staff were towards them. One person said, "Staff are lovely, generous in what they do." We saw staff were kind and caring towards people. Where people had become upset or distressed, staff provided reassurance and hugs, which we saw people felt comforted by. We also saw that staff knew people's individual preferences, and when people wanted their own space, staff respected this.
- Relative's told us their family member was treated well and cared for by staff. One relative said, "Lovely staff, friendly and helpful."

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

- People were able to speak with staff about their care and felt listened to and involved with these decisions.
- Relatives were involved and felt their views were listened to and respected where appropriate.
- Staff recognised what was important to people and ensured they supported them to express their views and maintain their independence as much as possible.

Respecting and promoting people's privacy, dignity and independence

- People told us they were treated in a dignified and respectful way.
- We saw staff were respectful towards people at all times and worked with the person at their own pace and respected their decision making.
- Some relatives told us their family member may not always be wearing their own clothes, or that they have seen their family members clothes on another person. We checked the laundry system was well organised and clothes were labelled when the person came into the home. Where clothes were not labelled, the laundry staff member advised relatives were invited to check the unlabelled clothes. We discussed this

with the registered manager, who confirmed they tried hard to get this right for people, and would remind staff to check labels when supporting people to get dressed.

- Staff told us they respected people's privacy by ensuring information about their care and support was only shared with their consent. We saw staff respected people's privacy and knocked on doors and waited for a reply before entering.

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At our last inspection we rated this key question good. The rating for 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's care needs were assessed prior to them moving into the home. Thereafter, their care needs were reviewed regularly and any changes in care were identified promptly through assessments and monitoring. One relative told us that the staff "sort things out immediately" and kept them updated with their changing needs.
- People, where able, along with their relative confirmed they were involved in the planning of their care and their needs were met. People told us staff respected their wishes, such as when they would like to get up in the morning and when they would like to go to bed.
- Staff knew people well and recognised when they were 'not themselves' so that prompt action could be taken.
- Staff told us, and we saw, there was a good level of information about people's care needs and preferences.
- Where people's needs had changed, these were reviewed in a timely way, and external healthcare professionals were contacted so that appropriate support, for example, advice or specialist equipment, could be sought.

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- There were communication tools and aids in place to better support communication with people. For example, there were pictorial cards for people to use, where they could express their mood, if they were in pain, or to choose a drink as an example.

Supporting people to develop and maintain relationships to avoid social isolation

- People were supported to go out for a walk around the grounds and nearby country. The activities co-ordinator said, "Going for a walk in the lanes really lifts their mood."
- People told us their family and friends were welcome to visit at any time. Relatives confirmed they were always welcomed into the home by staff.

Support to follow interests and to take part in activities that are socially and culturally relevant to them

- People spent their day according to their preferences. Some people preferred to spend their time in their own rooms, while some preferred to spend time in the communal areas.
- We received mixed reviews from people about the activities in the home. One person said, "I can join in or just sit and listen, it suites me fine." While another person said, "We sit around for ages waiting for something to happen" and another said, "Not much to do, it's a bit boring."
- We saw people were given a choice as to whether they joined in the planned activities. Those who did join in, appeared to enjoy these.
- The activities co-ordinator spoke passionately about their work in the home and showed us activities they had provided to people in groups and on an individual basis such as cream tea events and a 50's themed ice cream parlour gatherings.
- It was recognised that some activities to support people with dementia were not being used in the home, as we had seen in previous inspections, such as rummage boxes, dolls and different items of interest. The registered manager explained due to risk of cross infection through the pandemic this had stopped but they were working on re-introducing these items in a safe way.
- The registered manager told us they wanted to support people to go out more within the community, such as visiting the local pub, or garden centre. However, had found it challenging to get suitable transport, but advised in the meantime, they would bring the pub setting into the home. People told us they were looking forward to going out when they were able.

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

- Where complaints had been received, these had been responded to in line with the providers complaint policy and procedure. The registered manager had used these opportunities to drive forward improvement by sharing lessons learnt with the staff team.
- People and relatives told us they knew how to raise a complaint if they needed to but were very happy with the service provided.

#### End of life care and support

- Records showed discussions had been held with people, and where appropriate their relatives about their end of life care wishes. These were detailed and gave a good view of the person's wishes.
- Prayers for different faiths were available, along with communication cards and a select of different music, should people request this.
- We read many compliments from relatives where their family members had passed away, expressing their thanks for the support, care and attention during this time.

# Is the service well-led?

## Our findings

Well-led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question requires improvement. At this inspection the rating has changed to good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

### Continuous learning and improving care

- At the last inspection we found concerns around staff deployment and staff's practice for dementia care required improvement to ensure the provision of care was consistently good, embedded and sustainable.
- At this inspection improvements had been made. The registered manager and nominated individual had reflected on the improvements required and worked with their staff team to improve in these areas. The registered manager said, "We have worked really hard these past couple of years. I'm proud of my team for all that they've done. There's always room for improvement, we can never be perfect, but we will keep on improving."

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

- People and their relatives were happy with the care and support people received. One relative said, "Since [the registered manager] took over there's been such a difference."
- Compliment cards from relatives expressed gratitude to the staff at Willow Bank House Residential Home. One card said, 'Willow Bank is a fantastic environment. [Person's name] is well cared for.'
- Staff felt well supported and valued by the registered manager telling us, "I feel supported as any questions I have they get answered." While another staff member said, "I'm happy that we have the time to spend with people, I do get to do that and have a joke with [people]."
- The registered manager was proud of their team and said, "I have a brilliant team and a good skill mix of staff." The registered manager told us they felt supported by the provider and the nominated individual.

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

- People and relatives felt the service was well run. They felt the registered manager was approachable and understood what was important to them. All relatives felt confident that should they have any concerns these would be addressed promptly. One relative told us, "They do a real good job, I'm pleased with how it's going, its well run, staff are friendly and helpful."
- There was a good approach to teamwork within the home. The management team had good oversight of the care and support people needed. Staff told us they worked with the management team to help meet people's needs. Staff told us they worked well together in a joined-up approach. Communication was effective between each staff group and each shift to ensure people received a consistent and co-ordinated service.

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

- Staff were clear about their roles, and the values upheld by the registered manager, who ensured they continued to promote a culture that delivered good quality care.
- The registered manager monitored performance of staff through supervisions, spot checks of staff practice and sharing information in team meetings to ensure all staff were consistent in their approach to the care and support provided.
- Checks of care records and medicines took place to ensure the records reflected people's care.
- The registered manager was continually looking at ways to improve the service and kept up to date with best practice through training and updates through websites such as Skills for Care and Outstanding registered managers.
- The registered manager understood their responsibilities to be open and transparent with people, where events had happened in the home, we saw this was communicated with the appropriate people and external agencies.
- The provider understood their responsibilities for reporting events and incidents that were legal required to the CQC. The legal requirement to display the CQC ratings of the last inspection was also displayed in the home.

Working in partnership with others

- The registered manager and their staff team worked with people, relatives and healthcare professionals to provide the best outcomes for people.
- The registered manager worked in partnership with external agencies to ensure people received a holistic service.