

Richmond Villages Operations Limited

Richmond Village Willaston

Inspection report

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Date of inspection visit:
09 January 2023
12 January 2023

Date of publication:
24 February 2023

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

Richmond Village Willaston is a residential care home providing personal and nursing care to up to 71 people. The service provides support to older people, some of whom live with dementia. At the time of our inspection there were 41 people using the service.

Richmond Village Willaston accommodates people across 7 households, each of which has separate adapted facilities. 6 of the households are located on the ground floor and can accommodate a maximum of 6 people in each. The household on the upper floor is larger and accommodates people who require nursing care. The service also offers garden and woodland areas for walks, a beauty, hair and nail salon and a café style communal space for relaxation and socialising.

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

People received an excellent level of care service and support at Richmond Village Willaston. The service offered a warm welcoming environment as you entered the building, which continued as you moved throughout the service.

People told us they enjoyed living at the service. People felt well supported by staff who they described as caring and kind, who worked hard to provide support to them.

People felt the service provided a warm friendly environment to live in, which was also welcoming to friends and families when they visited.

Relatives felt their loved ones were safe living at the service and were confident people's needs would be met. People described positive relationships with staff and the management team at the service, with good communication.

Systems were in place to manage and mitigate risk and support people's health and well-being. Medicines were managed safely.

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.

The service was well-led, staff felt well supported and well informed within their roles and were passionate about the support they provided.

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

Rating at last inspection

This service was registered on 10 April 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 ●

Richmond Village Willaston

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

This inspection was carried out by 2 inspectors.

Service and service type

Richmond Village Willaston is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Richmond Village Willaston is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

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. We sought feedback from the local authority and professionals who work with the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 6 people who lived at the service and 6 relatives about their experience of the care provided.

We spoke to 18 staff who worked across the service in different roles.

We reviewed a variety of records relating to the management of the service. We reviewed 7 care plan records and sampled medication records. We reviewed 11 staff files in relation to recruitment and staff supervision.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were protected from abuse. Allegations of abuse were reported appropriately to other agencies.
- Staff received training appropriate to their role, on-going refresher training was available. Yearly competency checks were completed to ensure that skills were continually refreshed.
- People told us they felt safe living at Richmond Village Willaston. Comments from relatives included, "[Name living here] gives me peace of mind, Richmond ticks all the boxes" and, "[Name] is somewhere where she is safe and looked after." One relative described the care a person received following an accident and said, "The care is great, good communication. Staff rang and kept me up to date."

Assessing risk, safety monitoring and management

- People needs were appropriately assessed. Care plans, risk assessments, daily recording and monitoring systems were in place. This provided staff with guidance on how to keep people safe from harm.
- Appropriate systems were in place to reduce risks with regard to health and safety. This included ensuring the safe use of equipment and mitigating fire risks. Regular checks were made on the environment.

Staffing and recruitment

- Recruitment procedures were safe. Checks were carried out on all staff prior to starting their employment, including Disclosure and Barring Service (DBS) checks. This provides information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.
- Records demonstrated safe staffing levels. Staff and people we spoke with told us there were enough staff to meet people's needs. One person who lived at the service told us, "It's brilliant. The staff are great, they work really hard."

Using medicines safely

- Medicines were safely managed. People received their medication as prescribed and staff kept accurate up to date records.
- Controlled drugs were appropriately managed and stored.
- Staff administering medication were suitably trained and had their competency to do so assessed on an annual basis.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of

infection.

- 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 responding effectively to risks and signs of infection.
- 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.

Visiting in care homes

- In line with current government guidance the service had no restrictions on visitors. We observed visitors receiving a warm welcome when visiting the service.
- Relatives confirmed they were free to come and go as they wished.

Learning lessons when things go wrong

- Systems were in place to record, monitor and review accidents and incidents when things went wrong.
- Robust monitoring and auditing systems were in place to support improvements.
- Regular meetings were held within the service. This gave staff an opportunity to review and reflect when things go wrong to avoid a possible reoccurrence.

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.

This is the first inspection for this newly registered service. This key question has been rated 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 prior to moving into the service. Suitable care plans and risk assessments were then developed and regularly reviewed by staff.
- Care plans were personalised with a wealth of information, this included subjects that were important to the person. Such as interests, personal history, likes and dislikes and support managing conditions.
- Plans reflected a good understanding of people's physical and emotional needs.

Staff support: induction, training, skills and experience

- Staff received training appropriate to the needs of people living at the service. One new member of staff told us, "The training was very good, induction very good."
- The service provided on-going refresher training to support staff developing in their role. One staff member told us, "If I want to do more its available, it's important to keep up to date."
- The registered manager had oversight of training compliance. This supported them to ensure mandatory training was completed and staff skills were up to date.

Supporting people to eat and drink enough to maintain a balanced diet; Staff working with other agencies to provide consistent, effective, timely care; supporting people to live healthier lives access healthcare services and support.

- People had access to appropriate healthcare services when required.
- Staff were able to access appropriate information around people's dietary needs. Care plans also included likes and dislikes choices of the person.
- People were able to make choices about and access additional foods as they wished. Within the smaller households, people were encouraged to maintain their independence through being encouraged to participate in the preparation and cooking of meals.
- Appropriate risk assessments and monitoring tools were in place where people require additional support.

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

- Bedrooms were decorated to the person's style and preference.
- The service presented itself as a clean, homely environment, with communal spaces accessible throughout for people to utilise as they wished throughout the day.

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.

- We found the service was working within the principles of the MCA and if needed, appropriate legal authorisations were in place, or an application had been applied to deprive a person of their liberty. Any conditions related to DoLS authorisations were being met.
- People's ability to make decisions was assessed when required and appropriate documentation was in place to support this.
- Where assessments were completed around decision making, there was a record of how this was considered following best interest principles and included involvement from people relatives, when appropriate.

Is the service caring?

Our findings

This is the first inspection for this newly registered service. This key question has been rated Good. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

Ensuring people are well treated and supported; respecting equality and diversity; Respecting and promoting people's privacy, dignity and independence

- There was a strong, visible personal-centred culture at the service. People were observed to be treated with dignity, respect and kindness during interactions with staff. People living at the service told us, "It is wonderful here, really is. Every one of the ladies working all the same wouldn't say carers, so nice like daughters lovely every last one" and, "Very, very good they are here. They look after me like I'm Henry 8th."
- People were supported respectfully by staff. One person said, "They are great people. Would recommend here to anyone."
- There was a strong sense of care and passion staff felt for the people living the in the service. One staff described the service as, "It's a person first place, marvellous here."
- Staff were particularly sensitive to times when people needed caring and compassionate support. During the inspection it was observed staff demonstrating sensitively with people and how best to engage and support.
- Relatives spoke highly of the standard of care at the service. Comments included, "I cannot rate it highly enough, It's well run, safe, clean and caring, there isn't a lot more you could ask for" and, "Exceptional – incredible – hub of excellence for dementia."
- One relative described observing staff while visiting one day. They told us, "You can tell it's a really nice place the affection staff give him. They (staff) didn't know we were there; they were so compassionate to him. Staff are all happy and there is a good vibe in the place, gives me peace of mind."

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

- People felt involved and informed regarding the care and support they received.
- Staff ensured that people received the support they needed and wanted. Staff demonstrated a warm, compassionate and personal centred approach when engaging with people.
- Staff created a warm positive environment for people to live in to express the views. One person said, "Its brilliant, the staff are great, would recommend it to anyone."

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated 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; 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

- People and those important to them participated in making decisions and the planning of their own care. People told us they had control over what they wished to do with their day. One person told us, "like it, happy. I go for walks, my family all come, I always enjoy my time. I've no concerns. I also like to spend time doing my knitting."
- People's care plans contained person-centred information about their lives. Plans also included do's and don'ts of how people liked to receive their care and support.
- Throughout our inspection we observed positive interactions between people and staff. One relative told us, "People are treated with love, they [staff] go the extra mile."
- There was a weekly timetable of activities for people to engage with. One relative described a recent dance event and said, "When they did a 50's themed event the set up for it was like going back in time."
- Staff regularly organised personalised events for people living at the service. One staff member told us, "A resident who used to work on a farm, he has a love for tractors, loves talking about how he used to repair them, he has many tractor models/ornaments on display in his room, that he has collected over the years. We arranged for two life size tractors to be in the Woodland Walk area so that he could spend time enjoying them."

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.

- The provider ensured people's communication needs were met.

Improving care quality in response to complaints or concerns

- There was a complaints policy in place. People, relatives and staff had access to this.
- People and relatives informed us they felt confident they would be listened to if they had a concern. One relative said, "Any issues we know we can call, email, communication is good. They have meetings for relatives, very open."

End of life care and support

- Where appropriate plans were in place and agreed to support people for end of life care.

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.

This is the first inspection for this newly registered service. This key question has been rated 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. Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People, relatives and staff spoke positively about the approach from the management team. One relative told us, "There is good communication. They ring with updates and I am involved in decisions when needs change or things need updating."
- Staff we spoke with enjoyed working at the service and described a positive working culture. Comments included, "We have more chance to promote independence (here) and have time to sit and chat to people" and, "Residents are the centre of everything."
- One person living the service told us 'They are great people, would recommend to anyone.'
- Staff felt supported well by the management team. We were told, "[The registered manager] is really approachable, a good leader and always available," "You just knock on the office and someone always on hand" and, "Management are fine, approachable, fair, helpful, if there is room for improvement, they get it done."
- Regular meetings and surveys took place to gather feedback from people who used the service, their relatives and also staff. Action plans were developed to demonstrated how the management team responded to feedback received. The registered manager told us they were looking at new ways to improve the opportunities for people to feedback.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager understood their requirements of the duty of candour. There was a clear system in place for reporting and recording events which occurred in the service.
- Throughout the inspection the registered manager, management team and staff were open and transparent to feedback given, addressing any queries throughout.

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

- There was a provider led governance system underpinning assurance within the service. The registered manager and senior management team had oversight to ensure no actions were missed. Information was readily accessible to review.

Continuous learning and improving care

- There was a culture of continuous learning and improvement. Staff spoke positively regarding feedback to management if something went wrong. Staff told us they were confident to speak up if they thought they needed to. One staff member commented, "Something goes wrong it is managed correctly."

Working in partnership with others

- The service worked with local community teams to support the health and wellbeing of people who lived at Richmond Village Willaston. Appropriate support plans and monitoring records were in place to meet these requirements.
- Overall relatives gave positive feedback on the service around communication and engagement with themselves as advocates to their loved ones. One relative shared with us, "Communication is good. We have meetings and access to care plans if we wanted."