

Quality Monitoring Audit Form

Westvilla

Home Name:	Westvilla		
Manager: (Are they registered with the CQC?)	Julie Spurr – currently completing their registration with CQC		
Provider:	Westvilla MPS Limited		
Type of Service:	Care home with nursing		
Home Address:	Westfield Road Retford Notts DN22 7BT		
Email Address:	juliewestvilla@live.co.uk		
Date of Audit:	15 th November 2019		
Band:	5	Previous Band / Score:	5
Score:	54	Action Plan Required?	No

Key:	Excellent	Good
	Improvement Required	Does Not Meet

Standard One: People who use the service experience outcome focussed person centred care: People who receive a care service receives outcome focussed person-centred care, which considers their choices and preferences. Care is provided in a positive risk-taking environment, which supports people to make decisions regarding their care.

1.1 Each service user has a personalised support plan which identifies patterns of daily living. Service users and / or families / advocates are involved in the process and are able to contribute their views.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We looked at the care planning documentation for three residents and found they were person centred, considering peoples abilities, preferences and how to respect their dignity. For example, a 'personal care plan' had details about how the staff were to get the towels, clothes, creams, flannels all ready before supporting the resident to wash or bathe to avoid the resident having to wait unnecessarily.</p> <p>We found plans considered the residents previous medical history and current health needs. Plans were put in place to support this. For example, we looked at a detailed plan for a resident requiring oxygen support and another which had good information about PEG support following current good practice guidelines.</p> <p>We saw behaviours were being monitored and where necessary 'positive behaviour support plans' were in place. The one we looked at included consideration of the triggers, interventions and how to support the resident by sitting them in their favourite place which makes them feel happier.</p> <p>We spoke with staff and found their knowledge of residents and their needs was very good, it matched what was in their care planning. They also had a</p>

1.1 Each service user has a personalised support plan which identifies patterns of daily living. Service users and / or families / advocates are involved in the process and are able to contribute their views.

good insight into their life history. We found life history information was recorded in the care planning.

1.2 Care / support plans include identified areas of risk and details how these will be managed and are reviewed, supporting service users to make informed choices.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We looked at a sample of care plans and found where a risk was identified a corresponding risk assessment was in place. For example, we identified a resident using a specialist mattress. Their risk assessing documentation about this was robust, including good practice guidelines for the use, maintenance and safety checks of the mattress.</p> <p>We looked at the care plan for one resident who was identified as needing support to prevent falls. We looked at the daily records and found the risk assessment was working as expected. We saw changes in needs were used to update the risk assessment. Where actions had been identified to minimise the risk, these actions were put in place.</p>

1.2 Care / support plans include identified areas of risk and details how these will be managed and are reviewed, supporting service users to make informed choices.

We spoke with staff and found they were skilled in how to enable residents to make choices whilst balancing their safety. For example, one said “we would never stop anyone from doing things, we just make sure it is safe for them”

1.3 Accurate records relating to service users are completed in a timely way and stored in a safe place.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We looked at care records and found a live record of significant events were being documented and this included where residents had refused aspects of care. We found professional visits were recorded and any information was transferred to the plan of care.</p> <p>We looked at the storage of residents’ records and found they were kept securely and confidentially. Records were kept in a manner which staff could access quickly.</p> <p>We spoke with staff who had a good understanding of confidentiality and were aware of GDPR. We looked at the training matrix which said all staff had completed ‘record keeping’ training.</p> <p>We saw staff completing records at different periods throughout our visit. We spoke with them about this and one said, “I do it as I go along, at the quieter times”. Staff said they had enough time to complete records.</p>

1.4. Service users are afforded a choice of suitable nutritious food and in sufficient amounts in accordance with their identified needs and wishes.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We spoke with the cook and found they were knowledgeable about altered diets. For example, how and why SALT would be contacted.</p> <p>We completed some observations during lunchtime and found staff were skilled in supporting people to eat. They went at a pace that suited the residents. They were seen frequently prompting people to eat, this was done discreetly and sensitively.</p> <p>The cook told us that they consult with residents about their preferences daily as they serve lunch. During our observations we saw residents eating things that weren't on the menu for that day. The cook said, "they can have what they want, and if we haven't got it we will certainly try and get it".</p> <p>We looked at a handover document which said that a resident had not had much to eat that day and suggested the following shift encourage them to eat. The subsequent handover had details about what they had eaten.</p> <p>We saw that care planning had consideration of people's food and drink preferences and the kitchen/cook had details of this too.</p>

1.5. Service users are supported with dignity through individual stages of life, by staff respecting their choices and preferences.

Score	Recommendations:	Observed Evidence
Good	Consideration needs to be given to having further discussions with health care professionals about how Respect tools are completed.	<p>The home admits people specifically on an 'fast track' palliative care requirement basis.</p> <p>Prior to our visit we spoke with other health professionals, they told us that they had confidence in the skills and experience of the staff specifically around the 'end of life' care they provide for residents.</p> <p>We looked at the training matrix and found that some staff have had 'verification of death' and 'end of life' training. We spoke with staff and found them to have a good knowledge of end of life care. For example, how their pain should be managed, where the person should die and how important it is to include relatives and make them feel welcome to visit whenever and given the chance to speak about their loved one.</p> <p>The care plans we looked at had 'last wishes' and 'end of life' plans in place which had details about the resident's preferences including where they wish to die and the treatment they would like. They also referred to DNACPR's and Respect tools. We looked at a completed Respect tool and found this was not in line with MCA requirements as the resident had not been consulted about it. The manager told us that residents are admitted with these already in place having been completed by a third party and it is not in their gift to get them changed.</p>

Standard Two: Keeping People Safe: People are protected from abuse or the risk of abuse, including financial abuse and the safe handling of their medication. People are supported and needs are met in line with MCA and DoLs / DoLiC requirements.

2.1 Service users are protected from abuse or risk of abuse. Their human rights are upheld through the effective operation of safeguarding arrangements. These identify and prevent abuse and are responded to appropriately.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We spoke with residents who told us they felt safe and felt confident to speak to any of the staff if they had a concern.</p> <p>We spoke with staff and found they were knowledgeable about what constitutes abuse and what they would do if they suspected it. For example, report their concerns to MASH, the Police and CQC. One staff member said, "I wouldn't hesitate".</p> <p>We looked at the training matrix and saw that staff are trained in safeguarding.</p> <p>We looked at the 'safeguarding' file and found it had a summary sheet which was completed each month. The sheet included details of the actions taken and the lessons learnt.</p>

2.2 Where the service user lacks capacity to make decisions, the requirements of the Mental Capacity Act 2005 are met.

Score	Recommendations:	Observed Evidence
Good	Ensure the recorded detail on capacity assessments is robust.	<p>We saw evidence of MCA assessments in place for a range of issues in all the three care files we looked at. MCA assessments were decision specific, best practice would be for these to be more detailed. For example, the ones we viewed didn't fully consider the environment, communication methods, questions asked, and the responses given.</p> <p>Best interest decisions were documented for the MCA assessments and they linked to the associated care plans.</p> <p>We spoke with senior staff and found they had a good understanding of the MCA and its principals.</p>

2.3 Service users are protected and supported to live with the least restrictions to their liberties. Where the service user is subject to restrictions and restraint, they must be authorised under the Deprivation of Liberty Safeguards (DoLS) and Deprivation of Liberty in Community referred to in Nottinghamshire as (DoLiC).

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>During our observation's residents were able to freely move around the home.</p> <p>The staff we spoke with were aware of what would constitute a restriction of freedom and what actions to take to apply for a DoLS. We looked at the training matrix and found all staff have completed training in DoLS.</p> <p>The manager showed us their DoLS records, we found records are kept separate for current, holding and deceased applications.</p> <p>We found that audits are taking place each month to ensure that the homes DoLS records are up to date.</p>

2.4 Service users are protected from financial or material abuse.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>The home maintains clear and accurate records of resident's finances, each resident has a 'sheet' which includes incomes and outgoings. We looked at a sample of records and found they were clearly recorded and balanced alongside receipts for each transaction.</p> <p>Regular checks and audits were carried out for all residents</p>

2.5 There are systems in place to ensure medication is obtained, stored, and administered, reviewed documented and disposed of effectively and safely.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We looked at the care plans for residents and found that these included considerations of their medication. For example, they described how residents preferred to receive their medication, PRN protocols and some good practice guidelines (completing MAR charts)</p> <p>We looked at the storage of medicines and found that this was in line with best practice guidelines. We saw that medication trolleys were secured to a wall when not in use. There was a daily record of fridge and treatment room temperatures, and these were in line with best practice guidelines or responded to correct as appropriate.</p> <p>We looked at the medication administration records (MAR) for residents. Where residents had been identified as requiring their medicines PRN, we found protocols were in place. Our discussions with staff assured us they worked within best practice guidelines in this area. We looked at the MAR charts and found the records were correct. Where medicines were not administered, the records indicated the reasons for these.</p> <p>We looked at the records of medicines controlled by the Misuse of Drugs Act (1971). We found that the records were accurate and reflected the quantities of medicines held. We found consideration had been given to the placing of patches (body maps) to ensure residents did not receive double doses.</p> <p>We found systems in place for the safe disposal of controlled drugs. We spoke with staff regarding their understanding of how to administer and safely dispose of controlled drugs. Their description assured us they were ensuring residents were being administered to safely.</p>

2.5 There are systems in place to ensure medication is obtained, stored, and administered, reviewed documented and disposed of effectively and safely.

We looked at the provider's records of training and found that all relevant staff had received recent training in the safe handling of medicines.

Standard Three: People who use services are supported by competent staff: People are supported and cared for by sufficient numbers of staff who are suitably recruited and sufficiently inducted and trained to provide them with the knowledge, skills and experience to be competent and professional.

3.1 Robust recruitment processes are completed with structured probation, supervision and appraisal arrangements in place for staff in line with Policies and Procedures

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We looked at a sample of staff files and found robust recruitment procedures in place. For example, we found application forms had been completed giving a full employment history, all relevant checks been completed – DBS.</p> <p>We saw that questions were being asked and documented during interview that were relevant.</p> <p>We saw adequate references had been obtained in advance of start date and had been verified. We found there was a contact of employment in place.</p> <p>We found staff had received supervision on a regular basis that included opportunities for them to discuss professional and personal development. We found staff were having annual appraisals.</p> <p>Staff told us they can speak with the management team at any time as they have an open-door policy. We saw staff frequently speaking with managers throughout our visit and found interactions were relaxed.</p>

3.2 Staff have the knowledge, experience, qualifications and skills to support the service users.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We observed staff supporting residents to remain independent and maintained their dignity. For example, knocking on bedroom doors before entering.</p> <p>Our observations of staff interactions with residents showed us that staff were confident and competent, friendly and respectful.</p> <p>We observed staff with their moving and handling techniques and found they were using safe practices.</p> <p>We observed staff spending time sitting, talking and interacting with residents when not providing specific care or support. Interactions between residents, relatives and staff were comfortable and natural and demonstrated that staff recognised the importance of building relationships with them. When staff greeted residents, they waited for a response and showed interest in the resident and what they were saying.</p>

3.3 Staffing levels for the service are determined and deployed according to people's assessed needs.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We spoke with the home manager regarding how they determined the number of staff required. They told us they use dependency assessments. We looked at the dependency assessments for residents and found these to be an accurate assessment of the needs of the person, based upon our observations.</p> <p>We looked at the staff rota and found the staff planned to be working on the day of our visit matched those who were at work.</p> <p>We looked at how staff were deployed around the care home and found staff were well distributed. Staff rotas documented the same staffing levels at weekends.</p> <p>We looked at how meaningful group and individual activities were planned. We found activities were planned and the staff were available to facilitate these activities.</p> <p>We spoke with a relative who said, "I've never felt there wasn't enough staff here" and "there may be times when they are really busy but they still make time to speak with me".</p>

Standard Four: Services are managed effectively: People receive high quality care through an effectively managed service. The provider/manager takes responsibility, is accountable for their actions, and has an effective system for identifying, assessing and monitoring the quality of the service provision.

4.1 People receive high quality care through an effectively managed service.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We spoke with residents who told us they knew who the manager was and that they spent time with them whenever they were at work.</p> <p>We spoke with staff and visitors who also said how approachable and competent they thought the manager was.</p> <p>We looked at the provider's CQC registration and found that care was delivered in line with the registered regulated activities.</p> <p>We found that the home manager was currently registering with the CQC.</p> <p>Our observations of the home manager and the management team found they lead the team well.</p>

4.2 There is an effective system for identifying, assessing, monitoring the quality of service delivery.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We asked the manager to comment on their auditing processes. They told us there is an extensive system for audits, covering all aspects of service delivery and found it covered many different subjects. We looked at a sample of completed audits and found them robust. For example, we looked at a weekly 'medication' audit and found this is completed by the Nurse, it included a wide range of checks alongside comments made this is then 'signed off' by the manager on their monthly audit.</p> <p>We asked the manager to comment on the frequency at which audits are undertaken, and what they do with the findings. They told us all audits are action planned with realistic timescales and followed-up on a rolling basis. We found audits were completed in line with the provider's timetable, and identified issues, as applicable.</p>

4.3 There is an effective system for identifying, receiving, handling and responding to and learning from complaints and concerns raised.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We saw the provider's complaints procedure displayed in the home.</p> <p>We looked at residents, relatives and staff minutes of meetings and found there were opportunities to raise concerns.</p> <p>We looked at the outcomes of a 'you said, we did' exercise. One of the questions was 'how could we make Westvilla more homely' a resident had said that the corridors were dimly lit. The home purchased new lighting. A relative had asked for a wall in a lounge to be decorated. The manager arranged for new wallpaper to be put on, giving residents a choice of papers.</p> <p>We looked at the homes complaints records and found each complaint is logged with details of the issues raised, the follow up actions taken, this is then evaluated and then 'signed off' by another member of the management team.</p> <p>We also saw that complaints are being audited every month, this ensures the right 'actions' have been taken. For example, it checks if CQC need informing or if there are any safeguarding issues.</p>

4.4 How is technology used to enhance the delivery of effective care and support?

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We found that on the day of the visit we evidenced that this criterion was fully met. An example of what we found to corroborate this judgement was:</p> <p>We spoke with the manager about the use of technology. We found they had a good understanding.</p> <p>The home has an electronic system in place for all care records.</p> <p>Some residents have sensor mats in their rooms.</p> <p>Bedrooms have a call bell system, these are maintained frequently to ensure they are in good working order.</p>

Standard Five: Environment is safe and homely: People live in an environment which is clean, safe and personalised.

5.1 The accommodation is safe, comfortable, and suitable for the service delivery and promotes well-being. There are effective cleaning and maintenance schedules in place which ensure suitable standards of living are maintained.

Score	Recommendations:	Observed Evidence
Good	Continue with the ongoing updates around the home.	<p>We looked around the care home, at communal spaces, residents' rooms, bathrooms and toilets. We found the premises to be maintained to a good standard. Some bathrooms have been refurbished, others do need updating. The manager told us this work has been agreed.</p> <p>The premises were appropriately laid out for the care and support being carried out.</p> <p>The exterior and grounds of the care home were well maintained. We saw there were enough bathrooms, toilets and communal space for the residents. The care home smelt pleasant.</p> <p>We looked at the maintenance records and found adequate checks of equipment were in place to ensure the safety of residents. We saw that minor maintenance issues were dealt with in a timely manner. We looked at a sample of recently identified issues and found that appropriate action had been taken.</p> <p>The home is getting 'dated' in areas. For example, the kitchen requires updating. The manager told us this has been booked in.</p>

5.2 Infection Prevention Control, risks to health, welfare and safety of service users including fire safety and management.

Score	Recommendations:	Observed Evidence
Excellent	None	<p>We did not audit this section on the day due to a separate full environmental audit being carried out by Sophia Johnson Infection Prevention and Control Nurse practitioners on the 7th August 2019.</p> <p>The overall score during that audit was 97%</p> <p>On the back of these findings, we have based the outcome for this criterion to be – excellent.</p>