

Weavers Care Home Ltd

# Weavers Care Home

## Inspection report

66-68  
St. Nicholas Street  
Coventry  
CV1 4BP

Tel: 02476222467

Date of inspection visit:  
09 December 2019

Date of publication:  
21 May 2020

### 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?	Outstanding ☆
Is the service well-led?	Good ●

# Summary of findings

## Overall summary

### About the service

Weavers Care Home is a residential care home that provides personal care and accommodation for up to 33 people. At the time of our inspection there were 25 people living at the home. The home is a large, residential building which has been adapted to meet the needs of the people living there.

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

The registered manager and staff were very responsive and creative in finding ways to improve the quality of life for people living at the service. People were supported to maintain and develop new interests and people were supported to be involved in the local community. There was an excellent range of activities and opportunities available to people inside and outside the home.

The service provided a consistently high standard of compassionate end of life care and took into consideration the needs of relatives and friends

The provider had safeguarding systems to protect people from the risk of abuse or unsafe care. Staff were aware of the procedures, had received training on it and knew what action to take. The provider had policies and procedures for safe staff recruitment and the registered manager made sure sufficient numbers of appropriately trained and skilled staff were on duty to give people the support they needed.

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.

Risks to people's health and safety were assessed and mitigated and equipment maintained for safe use. Staff assessed and reviewed people's health and social needs and were supported with the proper and safe use of medicines.

Care plans had been developed with the close involvement of the person and where appropriate their families to give a clear picture of them and their needs. People received support to maintain good nutrition and hydration in line with their personal choice.

Staff were kind and caring towards people and had developed trusting and mutually respectful relationships with them. Staff knew people well, including their personal histories, interests, and preferences. We saw that staff treated them with kindness and compassion and made sure their dignity was maintained.

Staff felt valued by the management team and enjoyed working at the service. The registered manager and the provider completed a range of quality assurance checks to promote continuous improvement of the service. The registered manager displayed a strong knowledge and understanding around the importance of working closely with other agencies and healthcare professionals to make sure people had good care.

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 Good (published 01 October 2016). Since this rating was awarded the provider has altered its legal entity. We have used the previous rating to inform our planning and decisions about the rating at this inspection.

#### Why we inspected

This was a planned inspection based on the previous rating.

#### Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

## 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 exceptionally responsive.

Details are in our responsive findings below.

Outstanding ☆

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

# Weavers Care 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 Care Act 2014.

#### Inspection team

The inspection team consisted of two inspectors.

#### Service and service type

Weavers Care Home is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

Our planning considered information we held about the service. We reviewed information we had received from the provider such as notifications of events they are required to send us by law. We sought feedback from the local authority who worked with the service. A representative of the local authority spoke positively of the service and reported no concerns. We had not asked the provider to send us a provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

#### During the inspection

We spoke with seven people who lived at Weavers Care Home and six relatives. We spoke with the provider, the registered manager, four members of care staff and the chef.

We spent time observing the care people received, staff interactions and activities. We reviewed records relevant to the running and quality monitoring of the service, staff training, a selection of policies and procedures and recruitment records. We looked at three peoples care and medicine records. We also checked the building to ensure it was clean, hygienic and a safe place for people to live.

After the inspection

We continued to seek clarification from the provider to validate evidence found including quality assurance records.

# 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 for 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 and their relatives told us the home was a safe place to live. They told us, "I feel very safe here, there is always someone about if I need help" and "It is a weight off my mind now that [Name] lives here. I was always worried they would fall at home but now I know they are happy and are looked after well."
- Staff knew how to recognise, and report abuse to help protect people. They had received safeguarding training relevant to their roles. Staff we spoke with were confident the registered manager would act quickly to keep people safe if they reported any concerns.
- The provider had effective safeguarding policies and procedures to protect people from harm and abuse. The registered manager understood their responsibilities and reported any concerns to the local safeguarding team for further investigation.

Assessing risk, safety monitoring and management

- Staff completed and reviewed risk assessments to identify risks to people's health, welfare and safety. This included, people's medicines, any dietary, nutritional or swallowing risks, falls, mobility and risks in the home environment.
- Each person had an individual personal emergency evacuation plan (PEEP) to show how they should be helped from the building in the case of an evacuation being necessary.
- Records showed that systems and equipment had been serviced in accordance with manufacture's recommendations. Staff completed a range of checks to ensure equipment was fit for use prior to using it.
- The provider had systems to identify foreseeable risks and protect people from avoidable harm. Accidents and incidents were recorded by the registered manager. These were analysed for trends and themes, so they could reduce risks to people.

Staffing and recruitment

- People told us there were enough staff available to assist them when needed. They told us, "Yes, there are definitely enough staff" and, "Even at night or weekends, there is always someone here, I never have to wait long."
- The registered manager used a recognised assessment tool to highlight the needs of the service users and help determine staffing levels. They made sure sufficient appropriately trained staff were on duty throughout the day and night to make sure people received the support they required. There was an on-call system to access management support during the night and outside normal working hours.
- The provider had policies and procedures in place to support safe recruitment. The registered manager had completed relevant pre-employment checks to make sure staff had the appropriate skills and character to work with people living at the service.

### Using medicines safely

- People told us they always received their medicines on time.
- Medicines were administered safely. Staff had undertaken training in medicines administration and their competency was regularly checked by the registered manager to ensure they continued to follow national guidance.
- We looked at the handling of medicines liable to misuse, called controlled drugs, and found these to be safely managed and stored. Regular checks and audits took place of the medicines system to make sure it continued to be managed in a safe way.

### Preventing and controlling infection

- The environment was well maintained, clean and hygienic throughout. People and their relatives commented positively on the cleanliness. One comment was, "There are never bad smells here, the cleaners work hard, and it is always a fresh environment to walk in to."
- Staff completed training about infection control practices and told us they always wore gloves and aprons when providing personal care. Audits were carried out on infection control procedures and hand washing techniques.

### Learning lessons when things go wrong

- The registered manager knew how to investigate any issues and to learn from them. For example, they recorded and monitored incidents and accidents, medicines and infection control. The registered manager explained they reviewed this information to see what could be done, to prevent further reoccurrence if a poor outcome was found.



# 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

- Senior staff assessed people's needs before they came to live at Weavers Care Home to make sure they could provide appropriate care. Protected characteristics were incorporated into people's overall assessments and where appropriate acted upon.
- Appropriate, clinically accepted tools were used to make the assessments of need and risk, for example to identify if a person was at risk of developing sore skin. Staff reviewed and updated these to reflect people's ongoing health and social care needs.
- The registered manager had implemented the NICE guidance on 'Oral health for adults to make sure people's oral health was promoted. Information was recorded for staff on how to support people to maintain good oral health and people told us they received this support.

Staff support: induction, training, skills and experience

- People and their relatives made positive comments about staff skills and knowledge. People commented, "I've never had reason to think they [staff] didn't know what they are doing" and "They [staff] have a lot of training and are very knowledgeable."
- Staff were well supported to develop and maintain the required skills and expertise to support people effectively and safely. They told us they had received an induction, had regular supervision and ongoing training to carry out their different roles.
- If staff were new to care, their induction included completing the Care Certificate. The care certificate is a nationally recognised set of standards that define the knowledge, skills and behaviours of specific job roles in the health and care sectors.
- The registered manager explained that they had implemented "buddy system" for all new staff to support the learning and confidence of new employees.
- Dedicated dementia care trained facilitators delivered 'living well with dementia' training which raised staff awareness to improve understanding of what it may be like living with dementia.
- The registered manager explained that the home employed two members of staff who were able to provide other staff with manual handling training. This supported staff to receive prompt training if a resident's needs or equipment changed which allowed them to support residents safely.

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

- People were very complimentary about the meals provided. We were told, "I couldn't ask for better! We have a chef and he makes everything himself." Another person told us "I've never eaten as well as I have here." A third person said "There are always different options available and if you don't want what's on the menu, they will make you anything you want. The chef knows I like garlic mushrooms and he will make me

them whenever I want."

- Staff supported people to have a nutritious and varied diet in keeping with their health needs, personal and their cultural preferences.
- People had their weight monitored for changes and referrals had been made promptly for advice and support from the GP and dieticians when needed. Difficulties in swallowing had been assessed and staff followed the advice of speech and language therapists to maintain effective nutrition.

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

- The registered manager and staff worked collaboratively with other agencies and professionals and made referrals appropriately so people could access the healthcare and treatment they needed.
- Information about visits was recorded in people's care plans, including the mental health team, speech and language therapists, chiropodists, specialist and district nurses. This information was shared with all staff supporting a person to ensure any guidance provided was followed.

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

- The environment supported the different physical needs of people living with dementia and promoted their independence. For example, there was appropriate signage to support people to orientate themselves.
- The provider was in the process of making environmental changes to the building to improve the facilities available. At the time of our inspection a new passenger lift was being installed and new fire doors had been installed.

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

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

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. 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, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- We saw evidence of MCA assessments taking place and where a person was found to lack capacity to make a decision the best interest's decision-making processes were followed. Relevant family, representatives and professionals were involved in the process.
- The registered manager completed DoLS applications when required and kept a record of those awaiting authorisation. Conditions applied to authorisations were included in how care was planned and delivered.

# 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.

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

- People and their relatives spoke very positively about the staff and their care. They told us, "All the staff here are wonderful, nothing is too much trouble" "They [staff] feel like family" and, "They are very caring, they are always there to cheer you up or have a giggle. I wouldn't want to be anywhere else."
- We saw staff speak to people politely and with patience, allowing them time to respond. People were clearly comfortable with the presence of staff members and we noted a lot of warm and friendly interactions.
- The registered manager followed equality and diversity policies and procedures. They made sure people's human rights, life style choices, religious and cultural diversity were respected and reflected in the care they received.

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

- People told us staff are always polite and were willing to listen. We were told, "I am always asked how I want things done and they [staff] always listen to what I want."
- People were treated very much as individuals and made their own choices about how they wanted to spend their time. Staff respected people's individual choices and care plans contained information about their preferred daily routines and lifestyle choices. Staff had training in protecting and promoting individual rights.
- When necessary, independent advocacy could be arranged for those who needed assistance expressing their wishes. An advocate is a person who is independent of the service and who can support a person to share their views and wishes.

Respecting and promoting people's privacy, dignity and independence

- People were encouraged to be as independent as they could be. Staff understood the importance of making sure people retained their independence and attended to their own care where possible. One person explained that when they had moved to Weavers Care Home they had very little mobility, however this had improved following support from staff and external health professionals. The registered manager told us about a resident who had regained their mobility and independence during the time they lived at the home which had allowed the person to move to sheltered accommodation with their spouse.
- Staff supported people to maintain their independence. Care records included information about the tasks people could carry out themselves as well as detailing the level of support they required.
- Staff took appropriate actions to maintain people's privacy and dignity. People told us staff respected their privacy and maintained their dignity during personal care. Doors to bedrooms and toilets were kept

closed when people were receiving personal care and staff knocked on people's bedroom doors and waited for a response before entering.

# 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 Outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- Considerable work had been done to establish people's interests, preferences and goals and incorporate these into planning care and support. Consistent effort had gone into establishing the home as a part of the local community through involvement in social groups, schools and community activities.
- One initiative to develop relationships with the local community was with a local nursery. It was arranged for children from the nursery to regularly visit the service. People spoke very favourably about these visits. One person had developed a strong relationship with a child and told us they looked forward to the visits. They told us, "It is wonderful, we sit together, and I tell [child] stories or we sing songs, it keeps me young!" A member of staff explained that one person usually preferred to spend time on their own, however enjoyed the visits from children and always took part.
- One person told us that when they moved into the service, they were reunited with a friend who they used to work with. The person explained that staff had supported them to find and reach out to another colleague and following this the third person moved to live in the service. The person went on to say, "I never thought I would have met my friends again but now it's like old times and we spend our time together having all sorts of fun!"
- A person explained to us that prior to moving to Weavers Care Home they did not enjoy their life due to health problems and isolation and had looked into travelling to another country to access an assisted dying service. They went on to explain that they had moved to the service with little expectation of improvement and it was a "Last try." The person told us "They (staff) exceeded my expectations, my life has changed completely. I am happy now, I am supported to have a good life and I love the opportunities offered to me. I would never have believed things could change so much."
- Staff worked with people to empower them to continue past interests and develop new ones. One person living at the service used to train racing pigeons, staff told us they discussed this hobby with the person and had supported the person to buy pet birds which the person cared for each day. Staff told us the person loved their birds and caring for them brought them a lot of enjoyment.
- People were supported to partake in a wide range of activities based on their interests. People told us they enjoyed activities in the home such as card games, dominoes and arts and crafts and were also supported to do activities outside the home such as going to the theatre, meals at local restaurants and canal trips.
- People spoke very positively about entertainers who regularly visited the home. We were told about a carol service that was held before our inspection, visits from singers, dancers and exercise classes. A person told us "There is always something going on here. I have more of a social life now than I ever did!"
- Relatives spoke positively about the activities available to people and social involvement. One person told us "They do so much here, and families are included to. They have just had their Christmas party which was

fantastic, everyone was involved and had their relatives here. This week the staff are taking everyone out to [Name of restaurant] for a Christmas dinner, it is always a special event. They do events throughout the year and always have a big garden party in the summer. No matter when I come here people seem to be happy and are able to do activities they enjoy."

- One person who was living with dementia had recently moved to the home and required additional support as they became accustomed to the new environment. We saw that staff supported this person to move around the home which reduced any feelings of distress. Staff gave this person an animatronic animal which responded to touch and noise and responded in similar ways to a pet. We saw the person enjoyed sitting with the animal which provided them with comfort and reassurance.
- The registered manager told us about a person who initially had difficulty adjusting to living in a care home. The registered manager told us that staff spent time to get to know the person and learnt that the person had an interest in theatre. By supporting the person to visit the theatre it has benefitted the person's well-being and mental health. This interest has benefitted other residents who now also visit the theatre and theatre productions have been put on in the home so that all residents could enjoy the shows.

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

- The registered manager and staff created a very person-centred culture to make a relaxed and supportive home for people and provided support tailored to people's individual needs, abilities and choices.
- The service had made good use of technology to improve people's lives and reduce risk. Call systems alerted staff if people at risk of falls were trying to mobilise unaided, which meant staff could respond promptly, to support people. This had resulted in a low level of falls within the 12 months prior to our inspection.

Meeting people's communication needs

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

- Staff assessed people's communication needs and supported them to communicate in the way they preferred.
- Information was available in different formats that people could understand, this included different languages, large print or easy read format. Format is a style of presenting information using short sentences and images.

End of life care and support

- People were supported to have a peaceful and dignified death and relatives were supported with their loss and the bereavement process when needed.
- Staff had completed training about delivering end of life care and advanced care planning which included the importance of supporting people's emotional and spiritual wellbeing.
- The registered manager and staff worked with local GPs and district nurses to make sure appropriate care and symptom control was provided as a person approached the end of life.
- Staff had received several compliments about the quality of the end of life care they provided. If people were approaching the end of life their families were supported to stay for as long as they wanted and be with their loved ones which included providing them with meals and drinks.

Improving care quality in response to complaints or concerns

- People told us they had good relationships with staff and had spoken with them if they had any concerns.

People and relatives said they knew how to make a complaint, but they had not had any reason to make a complaint.

- Complaints and concerns were well managed. The provider had a clear complaints procedure and a process for the recording and monitoring of complaints or concerns raised. There had not been any complaints in the 12 months prior to our inspection visit.

# 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

- There was a positive culture within the service that was person-centred and inclusive. Staff told us they had confidence in the registered manager and provider. One member of staff told us "[Registered manager] is always approachable and will always listen to you. Right from the start you are told that everything we do here is for the people who live here."
- The registered manager provided strong leadership. People, relatives, and staff told us the service was well managed. A relative told us, "[Registered manager] is fantastic, she knows the people here and us really well and makes sure everything is done properly."

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 understood the importance of reporting accidents, incidents and changes in people's mental and physical health and keeping families informed. This indicated that the principles behind a duty of candour were recognised and valued within the service's culture. Relatives confirmed they were kept informed about any changes affecting their family member and had their questions answered.
- The registered manager understood their role and legal responsibilities in relation to the duty of candour. They notified CQC of significant events and displayed the previous CQC rating prominently.
- The registered manager was open and transparent throughout our inspection and made clear their position was to promote an open and transparent approach in all they did.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- During the 12 months prior to our inspection the management structure of the service changed to include a deputy manager, a lead senior carer, a lead for infection control and team leaders. This change increased the ability for meetings to be held and staff to be supported to give feedback and suggest new ways of working.
- The registered manager had worked with the local authority to provide training to staff to improve staff knowledge about infection control and preventing skin damage. The registered manager created "Skin care Champions" and "Infection control champions" in the home to lead continuous improvement and share knowledge about this.
- The registered manager was also involved in a scheme with the local authority which improved communication between hospitals and care homes. The registered manager explained that this scheme



was piloted at Weavers Care Home and has since been extended to all care homes in the local area. The registered manager explained that this scheme had supported a person who did not communicate verbally when they were admitted to hospital. Information provided helped hospital staff to understand how to communicate with the person and to help the person to remain calm in the different environment.

- The registered manager monitored service provision and quality and sought peoples, relatives and staff's views formally and informally to make changes. The management and staff understood their responsibilities and accountability for their actions.
- The registered manager kept themselves up to date with current best practice and the latest developments in care for both older people and people who were living with dementia. The registered manager was keen to ensure that the care delivered was on evidence based best practice.
- The registered manager explained that they had plans for an interactive, touch screen table to be available in the home. This will enable people living with dementia to express their feelings, play games and complete quizzes.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics; Working in partnership with others

- The registered manager was responsive to people's diverse needs and wishes. People, relatives and professionals were given the opportunity to give their feedback on the service on an informal daily basis, at home meetings, during care reviews and using formal surveys.
- The registered manager had developed strong and effective relationships with health and social care professionals to ensure coordinated care and support.
- The provider and registered manager supported staff and people to be involved in local projects such as fundraising for a local theatre, work experience for students studying Health and Social Care and volunteering opportunities for Police Cadets.
- The registered manager explained that the home had created social media accounts to share information about activities and events that occurred at the home. The registered manager went on to explain that this benefited relatives of people to be able to see activities and that residents had taken an interest in the new technology. The registered manager explained that they also supported residents to use electronic tablets to make videocalls to their relatives or friends.
- The registered manager explained that they work closely with the local commissioners to support other care homes. The registered manager stated that this work allowed them to share ideas and expand their develop relationships with them.