

# Somerset Care Limited

# Halcon House

## Inspection report

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## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

### About the service

Halcon House is a residential care home registered to provide personal care to 18 people at any time. The service specialises in providing long term and respite care to people with complex physical disabilities. The home is a single storey building with level access to all areas.

At the time of the inspection 11 people were living at the home and 7 people were receiving respite care. Throughout the year approximately 50 people used the service for respite breaks.

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

Since the last inspection the provider had maintained the high standards of care and support people received and constantly looked for ways to introduce further improvements. This had included embracing technology to promote people's independence and addressing issues raised by people and staff.

People's feedback about the service and the way it was managed was, without exception, extremely positive. Comments included; "In eight years I've never lived anywhere like it. They don't just do personal care, it's so much more than that. I love it," "It's still as outstanding as it always was, probably even better" and "I wouldn't go anywhere else. [Registered manager's name] makes it special."

Visitors also unanimously praised the service provided. One visitor said, "You couldn't find better care anywhere. Staff don't just come here to do a job, it's a diamond service." Another visitor told us, "It's opened a whole new life for [person's name]. If they can do it, they will. [Registered manager's name] can't do enough for us all, day or night. His passion is totally inspiring."

Although people using the service were living with complex physical health needs and disabilities staff had a 'can do' attitude which enabled people to have a good quality of life. People were able to continue to take part in hobbies and had access to a wide range of leisure pursuits. This included holidays in Britain and abroad.

Staff were happy in their jobs which created a happy atmosphere for people. Throughout the inspection there was laughter and good-humoured banter. People's friends and families were considered a large and important part of people's lives. Friends and family were always included in events and day to day care if they chose to be. People who used Halcon House for respite and family members said they thought of it as their 'Second home.'

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.

People remained in control of the care and support they received and were consulted on all aspects of their lives. People told us that staff respected them as individuals and always respected their wishes.

People received their care from staff who had an excellent knowledge of their needs and had the skills required to effectively support them. Staffing levels and training were responsive to people's changing and complex needs.

People were cared for by a consistent staff team who they had built trusting relationships with. One person told us, "I don't feel I am being looked after, I just feel at home." Another person told us, "Their kindness and empathy is beyond anything I could have expected. The staff have become friends."

People could be confident at the end of their lives they would be cared for with compassion and their wishes and values would be respected. People's families and friends were fully supported by staff at times of bereavement.

The registered manager and senior staff team led by example to ensure high standards of care were provided to people. Staff worked in a way that was non-judgemental and respected people as individuals. Staff valued people's opinions and took action to put people's suggestions into practice.

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 Outstanding (published 25 July 2017).

#### Why we inspected

This was a planned inspection based on the previous rating.

## 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 exceptionally caring.

Details are in our caring findings below.

Outstanding ☆

### 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 exceptionally well-led.

Details are in our well-Led findings below.

Outstanding ☆

# Halcon House

## 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

This inspection was carried out by one inspector

#### Service and service type

Halcon House 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 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. 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 of this information to plan our inspection.

During the inspection

We spoke with eight people who used the service and four visitors about their experience of the care provided. We spoke with seven members of care staff. The registered manager and operations manager for the company were available throughout the inspection.

Two health and social care professionals provided written positive feedback about the service and the commitment of the registered manager.

We reviewed a range of records. This included three people's care records and medication records. We looked at three staff files in relation to recruitment and training. A variety of records relating to the management of the service, including minutes of meetings and records of complaints.

# Is the service safe?

## Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People felt safe at the home and with the staff who supported them. One person told us, "I always feel totally safe with the staff." A visitor said, "I never have to worry. I know they are so well looked after."
- The provider had measures in place to minimise the risk of abuse to people and fully investigated any concerns identified. Where concerns had been raised, they had worked with relevant authorities to make sure people were protected.
- A number of people using the service were being provided with respite care. The registered manager told us they wanted the home to be a safe place for people to raise concerns about their home situation if they needed to. One person had raised concerns and the staff had taken action to address the issues they raised. We saw a card from a relative who thanked the staff for listening to the person's concerns and liaising with other professionals to make sure they were kept safe.

Assessing risk, safety monitoring and management

- People were supported by staff who used risk assessments to promote independence and choice. For example, the staff carried out risk assessments to enable people to meet with friends and attend sports matches without staff support. They did this by ensuring appropriate transport was booked and the places people were attending had suitable facilities.
- People were provided with suitable equipment to enable them to summon help when required. All rooms were fitted with a call bell system, however some people did not have the manual dexterity or movement to use these. Alternatives such as pillow switches and sound monitors had been made available to ensure everyone was able to ask for help when needed.
- The environment was well maintained and provided a safe environment for people. There were regular health and safety checks, and equipment was regularly serviced by outside contractors.

Staffing and recruitment

- Staffing levels were adapted to meet people's needs. As Halcon was a respite centre for people with very complex physical needs the dependency levels could change weekly. Staffing was adjusted to ensure there were always sufficient staff.
- There was a robust recruitment process which minimised the risks of abuse to people. The provider carried out pre employment checks on all prospective employees to make sure they had the appropriate skills, values and character to safely support people.

### Using medicines safely

- People received their medicines safely from staff who had received training and had their competency assessed.
- People received their medicines at the correct time and in accordance with their wishes. One person told us, "Medication always the right time. Never missed."
- The dispensing pharmacist carried out a medicines audit on the second day of the inspection and found no areas of major concern.

### Preventing and controlling infection

- People lived in a clean and fresh environment which helped to minimise the spread of infection.
- Staff had access to, and used, personal protective equipment to minimise risks of infection. There were adequate handwashing facilities for staff and people.

### Learning lessons when things go wrong

- The staff team acknowledged when things had gone wrong and took steps to make sure any untoward incidents led to improvements. For example, one incident had led to a person bringing in their own equipment when they stayed for respite.
- People were supported by a staff team who discussed incidents at staff meetings. This enabled them to identify where improvements could be made and ensure learning was put in to practice.

# 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 the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Since the last inspection a number of areas of the home had been refurbished and up graded. This made sure the building was able to meet people's needs and provide a homely and enabling environment. One person said, "The new wet rooms are fantastic."
- People's assessments took account of external factors to promote their well-being. For example, during the hot weather it was apparent that a number of people's disabilities were negatively impacted by the heat. In response air conditioning was installed in a communal area to promote people's comfort.
- Each room was equipped to meet the needs of the occupant. As several rooms were used for respite care. Staff ensured each room was fully equipped to meet the individual's needs before they arrived for their stay.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff support: induction, training, skills and experience

- People had their needs assessed before they began to use the service. This made sure the staff had the skills required to meet their individual needs and expectations. One person told us the registered manager had visited them in hospital, and they and their family had been able to visit Halcon House to help them to make their decision.
- People had their needs reviewed every time they stayed at the home. This helped to ensure they received appropriate care on each respite stay. One person told us, "Every time I come in, without fail, they do the care plan with me."
- People received care in accordance with good practice guidelines and current legislation because staff received regular training to help keep their practice up to date.
- People were supported by staff who were highly skilled and experienced. Since the last inspection staff have continued to receive training in specialist areas of care and support according to people's needs. This has included some areas of intimate support which meant people received these interventions from staff they know well and felt comfortable and relaxed with.
- People had confidence in the staff who supported them. One person told us, "I have total confidence in the staff. They are well trained and know what they are doing. Lots of them have been here years. That's a good thing."

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

- At people's request an accessible drinks station had been created providing a coffee machine and water

cooler. Throughout the inspection we saw staff made people drinks whenever they requested them. Where people could help themselves, they did so.

- People had their nutritional needs assessed and met. Some people had been assessed by a speech and language therapist. Appropriate meals were provided where people required meals to be served at a specific consistency to minimise the risk of choking. One person said, "I get special meals. The cook knows how to do it."
- People received the support they required to eat and drink. A high number of people were unable to feed themselves and staff physically assisted them. We observed people being assisted and noted they were not hurried, and people were assisted at their own pace.
- People were happy with the food they received. One person said, "Food is amazing. Always wonderful. Always a choice." Another person who required a specialist diet, told us, "Food still tastes like it should. Lovely food."

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

- People's physical health and comfort was supported by staff. A number of people expressed discomfort to staff as they were continually sat in wheelchairs. In response to this the provider arranged physiotherapy initial assessments and a six-week course of treatment for people. Although this service had now ceased the registered manager was actively looking for a new provider.
- There were systems to make sure people received medical care whilst staying at Halcon House. District nursing teams were provided with a list of people staying at the home a week in advance. This enabled them to organise visits to people to make sure they received appropriate care and treatment during their respite stay.
- Staff helped people to monitor long term conditions and responded appropriately to periods of acute illness. All senior staff had undertaken National Early Warning Signs (NEWS) training with the ambulance service. This was to help them to recognise when people were becoming unwell and to make the right treatment decision. One relative had written to the staff team thanking them for their quick response to a situation. They wrote, "Your quick action we believe saved his life. Words cannot thank you enough."

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.

- Everyone using the service at the time of the inspection had the capacity to make decisions for themselves and their decisions were respected. One relative told us, "Everything is [person's name] decision. The staff are very clear about that."
- Staff had received training and knew how to support people who lacked capacity to make decisions. One member of staff told us, "If someone did not have capacity for a certain decision we would work with them, their family and other professionals to make a best interests decision."
- No one receiving a service was subject to DoLS. The registered manager had made contact with the local authority to discuss issues around people staying for respite. The staff worked in accordance with the local authorities' advice.

## 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 the last inspection this key question was rated as Outstanding. At this inspection this key question has remained the same. 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

- Since the last inspection the staff team have continued to provide an exceptionally caring service to people. During a period of extreme bad weather, the service had more staff turn in for work than were rostered to be on shift. Staff went in voluntarily to ensure the smooth running of the service. This highlighted their commitment to people.
- Person centred care and respect for people was totally embedded into the culture of the home. People were cared for as individuals in a non-discriminatory way. One person commented, "When I first came I was instantly at ease. Everyone has been so nice. There's no judgement. I've been to the cinema and the pub which I wouldn't have done before. Their approach breaks down any stigma you feel." Another person said, "They treat everything as normal. It just couldn't be any better."
- The atmosphere was happy and welcoming. During the inspection visitors came and went and there was laughter and fun throughout the time we were in the home.
- People benefitted from a stable staff team who they had built trusting relationships with. One person told us, "I don't feel I am being looked after, I just feel at home." Another person told us, "Their kindness and empathy is beyond anything I could have expected. The staff have become friends."
- People gave numerous examples of when they felt staff had gone over and above their role to support them. One person told us they felt unable to attend a family wedding, but when a member of staff heard about this they took them on their day off. A relative told us, "It was so fantastic. They really did go out of their way."
- A professional had written to the home following a crisis situation in the community. They said, "Your response on that evening was outstanding. The situation had reached crisis point and your intervention was invaluable and without hesitation." They went on to say that the kindness shown in a difficult situation had been 'First class.'
- People's friends and family were respected as being a large part of their lives and were involved in activities and care where they wished to be. We heard how families had celebrated Christmas with people. This included one spouse, child and dog staying at the home on Christmas eve to enable them to all open presents together as a family. Other family members spent the day in the home to celebrate with their loved ones.

Respecting and promoting people's privacy, dignity and independence

- Since the last inspection the staff have continued to explore ways to promote people's dignity and independence. For example, one person asked for their TV, air conditioning and music to be added to a voice-controlled device. Staff adapted various devices to make this happen. This enabled them to control their own environment without having to ask for help. This person told us the immense difference this had made to their life. They said it had enabled them to carry out tasks which they previously would have asked staff to do. They said, "Before, even if I wanted to turn the television over or dim the lights, I had to ask staff. Now I feel I have a bit of independence back."
- The provider had embraced technology to assist people to be independent. They had created a 'Smart room' which could be used by people staying for respite. This has meant tasks that people may have had to ask staff to assist them with, such as opening curtains and changing lighting could be controlled by an electronic tablet. Staff had also made adaptations to devices to personalise them to people's specific needs and wishes. Other people using the service were also benefiting from technology as items were purchased and trialled.
- People felt staff encouraged them to maintain their independence. One person told us although they had no independent mobility or movement staff respected their choices in every way. They said, "I need staff to do everything for me but whatever I ask for they sort. I feel totally valued as a person not just an income. They support me to meet with friends and know that once I'm with them I don't need staff. They don't patronise me by hanging around." A visitor told us, "Coming to live here was [person's name] choice. They are totally independent in their choices and staff go out of their way to accommodate their wishes."

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

- People continued to be fully involved in all decisions about their care and support. One person said, "They discuss absolutely everything with you." Another person said, "I've never considered that things weren't my choice. That's just not how it's done here. We talk about everything."
- Staff supported people to express their views outside the home. For example, they had helped one person to raise a complaint with another organisation. The person did not have the manual dexterity to write a complaint, but was able to instruct staff and be part of organised telephone conversations with staff support.
- Where people were unable to verbalise their views, the staff used alternative methods to seek people's views. This included tablet computers and specialist communication equipment.
- People were consulted on their care and the service on a regular basis and there were also residents' meetings for people to share their views on the day to day running of the home. Minutes of meetings showed that where suggestions were made these were usually put into practice. For example, several suggestions had been made about menus and some people were involved in menu planning with the registered manager and cook.
- People had a say in who worked at the home. People were involved in the interview process for new staff either by setting questions or being part of an interview panel. This helped to make sure only staff who people felt comfortable and confident with worked at the home.

# Is the service responsive?

## Our findings

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

At the last inspection this key question was rated as Outstanding. At this inspection this key question has remained the same. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- Since the last inspection the staff team have sustained and built on how personalised care was provided to people. Everyone we spoke with told us the service they received was totally focussed on them. One person said, "Everything is about what I want. There are no routines to fit in with." Another person said, "I couldn't contemplate being anywhere else. This is where I can be myself."
- Staff respected people as individuals and encouraged them to remain in control of their lives. One visitor said, "Since being here they have been able to live their life as they want to. Nothing is ever too much trouble." One health and social care professional told us, "There is a real feel that staff and managers know the people that they support and work with them to give them the best self-directed support that they can."
- People told us staff knew them well and understood their complex needs. One person said, "Staff are really good. They know me so well." Another person told us, "The staff just get me. There's never a fuss about anything they know exactly what to do."
- Staff supported people to realise their aspirations. Staff liaised with other professionals to help people to fulfil their wishes. For example, the home had supported some people to move on to more independent living. One person had been in hospital for a long period of time. They moved to Halcon House and staff worked with them for two years before alternative accommodation and support was found. The staff assisted the person to look at properties and helped them to choose furniture and fixings to move to independent living with 24 hour care support.

End of life care and support

- People could be confident that at the end of their lives they would receive compassionate care in accordance with their particular wishes and values. Staff had a real commitment to people and went the extra mile to make sure wishes were respected. This had included the registered manager driving to a hospital at midnight when a person receiving end of life care needed a specific piece of equipment to maintain their comfort.
- One person had recently chosen to be discharged from hospital to enable them to die at Halcon House which had been their home. Their relative told us as soon as the person made the request, "They did everything to make it happen. The support was second to none. I can never thank them enough or put into words how amazing they all were." The person's family were able to stay at the home and care for the person until they died. The relative told us they had been able to care for their loved one because of the support they received from the whole staff team. The family had requested that the registered manager be a

coffin bearer at the funeral which showed the high regard they were held in.

- People's friends and family were supported by staff at times of bereavement. People who used the service had formed close bonds and friendships and staff acknowledged and respected these by offering support and helping them to attend funerals. A relative said, after a person had died, a number of staff came into the home to pay their respects and support them and their child.

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 were able to keep in touch with friends and family to ensure they continued to be part of their social circles. Since the last inspection WiFi coverage in the home had been increased to enable people to stay connected and use their social media accounts.
- People's friends and family were always made welcome and continued to be part of people's lives. Some people had formed close relationships with other people who used the service and arranged respite stays to coincide with each other. One relative had written to the staff saying the service helped them to still be a family and they considered Halcon House their 'Second home.'
- The provider responded to people's changing and increasing needs. As people's needs became more complex the provider had increased the level of organised activity to ensure people had opportunities to continue to pursue their hobbies and interests. People we spoke with said there were always things going on if they chose to take part. One person staying for respite told us, "I never expected to go out, but I have. It's wonderful they are really keen to make your stay as good and interesting as possible."
- The staff had a 'can do' attitude which meant they supported people to take part in any activities they wanted to. For example, one person had watched the Glastonbury festival and decided they wanted to go to experience the whole festival. The registered manager had helped the person to prepare for this by camping with them in the garden. A number of staff had gone into work early on the day tickets were released to try to secure tickets for them to attend. This had been unsuccessful, but the person told us they were still confident that staff would be able to get tickets and they would be able to attend.
- People who wanted to go away on holidays were supported to do so. Taking people on holiday required a huge amount of planning and research to make sure there would be suitable facilities to meet people's needs. A group had requested to go away to London. Staff had found a hotel with enough rooms with ceiling tracking for people to be hoisted and liaised with travel companies to make this happen. One person said, "It was such fun, we had a right laugh." Two people told us they were going on a cruise later in the year.
- People were supported to be active members of their community. One person and a member of staff had made links with a local primary school and people were enjoying some shared activities. Some people were hoping to take a more active role in supporting the children and appropriate checks were being undertaken to enable them to volunteer at the school.

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.

- People's care plans contained information about their communication needs and people used various equipment to communicate.
- Staff made sure everyone had the equipment and support they required to effectively communicate their needs and express themselves. Staff liaised with other professionals such as speech and language therapists and occupational therapists to make sure people's communication needs were supported.

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

- The provider used complaints as way of monitoring standards and continually improving the quality of the service offered. The registered manager carried out full investigations into any complaints made and where shortfalls were identified they apologised and ensured the investigation led to improved standards.
- People told us they would be happy to make a complaint if they needed to. One member of staff said, "People here aren't backward in coming forward. They tell you when you get it right and they certainly say if you get it wrong."

## 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 the last inspection this key question was rated as Outstanding. At this inspection this key question has remained the same. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

#### Continuous learning and improving care

- Since the last inspection the management team have sustained their high standards and continually looked at ways to improve the service people received. This had been achieved by continually seeking people's views, listening to suggestions and working with other professionals.
- People benefited from a registered manager and staff team who liaised with other professionals to make sure they had the skills required to meet people's increasingly complex needs. Training was arranged to meet individual clinical needs and staff were assessed for their competency. This enabled people to receive their support from staff who knew and understood their specific needs and wishes.
- The provider and staff were keen to promote people's independence by the use of technology. People and visitors told us how much simple adaptations, such as voice activated devices, had improved people's quality of life.
- The service took account of accidents and incidents to learn lessons and improve standards. For example, following an allergic reaction to a certain food type a new policy and procedure was drawn up and shared with staff and people to make sure this did not re-occur.
- The registered manager used feedback from people to make improvements. Following resident's meetings, the staff team always looked for how suggestions could be put into practice. This had included changing menu's and increasing opportunities for social activities.

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

- The registered manager led by example to create a positive and empowering environment for people who used the service. Following a sad time at the home the registered manager had created a video of the years' good times to motivate people and staff. One member of staff said, "We have had a bit of a rough time but seeing what we, and people, had achieved was a real boost." The video had also been played at an award ceremony and Halcon House won a 'Special' award in recognition of their work and commitment.
- People's feedback about the service and the way it was managed was, without exception, extremely positive. Comments included; "In eight years I've never lived anywhere like it. They don't just do personal care, it's so much more than that. I love it," "It's still as outstanding as it always was, probably even better" and "I wouldn't go anywhere else. [Registered manager's name] makes it special."
- Visitors also unanimously praised the service provided. One visitor said, "You couldn't find better care anywhere. Staff don't just come here to do a job, it's a diamond service." Another visitor told us, "It's opened

a whole new life for [person's name]. If they can do it, they will. [Registered manager's name] can't do enough for us all, day or night. His passion is totally inspiring."

- In 2018 the staff team won the provider's 'care team of the year' award. They were nominated by people who used the service showing how satisfied people were with the care and support they received.
- The registered manager and staff team made sure people were at the centre of all decisions. A commissioner told us the registered manager always put people before company or financial considerations.
- The provider of the service had recently implemented a new set of values which had been devised after consultation with staff. The new values; Connecting with people, making a difference, doing the right thing and embracing change reflected the commitment of the provider of putting people at the heart of the service.
- People felt consulted and in control of all decisions about their care and support. One person said, "Everything is discussed with you." Another person told us, "They never just do things they always ask your advice and talk to you about things."

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 and provider were open and approachable. When incidents had occurred, they had fully investigated and where necessary apologies were given. These were used as a way of making improvements.
- The registered manager was very visible in the home and we saw people were extremely relaxed with them. The registered manager had an excellent knowledge of people and where necessary acted as an advocate and challenged discrimination.

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

- The registered manager worked alongside other staff to set standards and ensure people received high quality care. One person said, "[Registered manager's name] sets the standard high and he knows exactly what's going on all the time." A visitor told us there was nothing they could not discuss with the registered manager because of his knowledge and experience.
- The staff identified risks and used risk assessments to promote people's quality of life not to restrict them. This included making sure people had access to a range of experiences and access to social activities. One member of staff said, "Our job is to make things happen for people not to stop them. We are a tool for people's aspirations and wishes."
- People used a service where the provider was committed to maintaining standards. They did this by regular visits and audits of the service. The operations manager knew people well and took an interest in their care and well-being. One visitor praised the operations manager for their support of people and the service. They told us, "[Operations manager's name] is amazing."
- The registered manager put people at the centre of quality monitoring to make sure changes or improvements made were in accordance with people's wishes. They carried out themed conversations with people, their representatives and staff, to seek their views on specific subjects. They also undertook monthly telephone satisfaction surveys. Changes made at the home in response to feedback had included; enhancing the activity programme, working with a local school and changing staffing rotas to make sure staff were always available at people's chosen times.
- The registered manager and provider were fully aware of legal requirements and liaised with other professionals where necessary. Commissioners who provided feedback about the service said they had very

positive relationships with the registered manager and provider.

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

- People living and staying at the home were fully involved in all aspects of the service. People who used the service for respite stays were kept up to date with events by a quarterly newsletter.. They were also consulted about all aspects of the service at regular meetings and individual reviews.
- The service responded to the changing needs of the community it served. They had done this by continually reviewing people's needs and discussing county wide needs with commissioners. This had in some cases led to staff being upskilled to support people with more complex needs and in other instances helping people to move to more independent living environments.
- The diversity of the staff group was celebrated. In the summer people and staff hosted an international food festival where people experienced food from different cultures. Friends, family and visiting professionals were able to attend the event to share the experience with people.
- People held events to raise money for charity which helped them to remain valued members of the community. People had made cakes for coffee mornings to raise money for charities. They had also taken part in a shoe box appeal and other fundraising.
- People felt at home and their families were also made to feel welcomed. Visitors and people staying for respite described it as 'second home.' ' Events held at the home were often open to the local community. There had been a race night held and local businesses who were connected with the home and people, such as a nearby public house, had donated prizes.