

Shaw Healthcare (Group) Limited

The Hawthorns (Evesham)

Inspection report

Church Street Evesham Worcestershire WR11 1EP

Tel: 01386444330

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Ratings

Overall rating for this service	Outstanding ☆
Is the service safe?	Good
Is the service effective?	Outstanding 🌣
Is the service caring?	Outstanding 🌣
Is the service responsive?	Outstanding 🌣
Is the service well-led?	Outstanding 🌣

Summary of findings

Overall summary

About the service: The Hawthorns (Evesham) is a care home that provides accommodation and support for up to 47 people who require either nursing or personal care. Personal and nursing care is provided to people living with dementia or an acquired brain injury. At the time of the inspection 46 people were using the service. Six people with an acquired brain injury were living on the top floor and 40 people living with dementia were on the first and ground floor. The first and ground floor had been separated into four areas so only ten people living with dementia were together with their own lounges and kitchens.

People's experience of using this service: People using the service benefitted from an extremely well led and caring service. People and their relatives were placed at the heart of the service and involved at every level. Assessments to support staff to mitigate risks were in place and people were activity encouraged to take positive risks. Staffing levels were high. Medicines were administered safely, and the service was piloting an electronic Medicine Administration System (eMAR) that had been developed by Shaw Healthcare Ltd. The registered manager had worked hard to reduce or discontinue when required (PRN) anti-psychotic medicines, using techniques to identify any triggers and put distraction technique's into place rather than administer medicines.

Staff had received a high level of training. Staff were fully supported to gain extra qualifications. If English was not the staff members first language another staff member would support them. The support staff received, generated a highly motivated staff team. People were very happy with the food provided and the cook had thought of innovative ways to support people to eat who preferred food on the move.

Staff demonstrated an exceptionally high level of kind and supportive care. Staff continuously smiled as they went about their work. Staff collaborated with people and their relatives to make sure they knew about the person's interests and needs so they could have a positive impact on the person's life. Where people had equality and diversity needs these were managed sensitively.

There was a truly holistic approach to planning, and delivering care and support. Each person's care plan was linked to how they wanted to be cared for, their preferences and their needs. People were at the heart of a service that was organised to suit their individual needs. Every person had their own activity timetable that covered all their needs such as intellectual, social, sensory, spiritual and emotional needs. Although they had an activity coordinator, who was extremely dedicated and cheerful, all staff provided continuous short snappy activities throughout the day.

The atmosphere within the service was exceedingly friendly, comfortable, inviting and open. Positive and innovative ways to support people had been and were continuously being developed. The registered manager had recently won the Hennell Aware for Innovation and Excellence in Dementia Care. This award is to celebrate the achievements of someone who have shown their ability to implement positive change for people with dementia.

Rating at last inspection: The rating at the last inspection was good, (published in March 2016.)

Why we inspected: The inspection was a scheduled inspection based on the previous rating.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, 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?	Good •
The service was safe.	
Details are in our Safe findings below.	
Is the service effective?	Outstanding 🌣
The service was exceptionally effective.	
Details are in our Effective findings below.	
Is the service caring?	Outstanding 🌣
The service was exceptionally caring.	
Details are in our Caring findings below.	
Is the service responsive?	Outstanding 🌣
The service was exceptionally responsive.	
Details are in our Responsive findings below.	
Is the service well-led?	Outstanding 🌣
The service was exceptionally well-led.	
Details are in our Well-Led findings below.	



The Hawthorns (Evesham)

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

The inspection team consisted of one adult social care inspector, one specialist professional (nurse) advisor (SPA) and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type:

The Hawthorns (Evesham) is a care home. People in care homes receive accommodation and nursing or personal care under one contractual agreement. The Care Quality Commission (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:

The inspection took place on 5 February 2019 and was unannounced. This meant the provider and staff did not know we would be visiting.

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.

The provider had completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. The information provided by the provider was used to plan our inspection and was taken into account when we made judgements in this report.

During the inspection: We spoke with 16 people who used the service and ten relatives. We also spoke to the registered manager, the quality manager, the activity coordinator, the cook, the administrator, a member of laundry staff, three nurses and three support workers.

We looked at five care files, three staff files to review recruitment, training and supervision records. We looked at records of accidents, incidents, complaints and compliments and reviewed audits, quality assurance reports and surveys.



Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Assessing risk, safety monitoring and management

- The service was safe because people were supported by a motivated team. Safety was seen as a result of knowing people really well, along with what each person was capable of and how staff could support them to remain safe. Staff showed empathy and had time to develop relationships with people built on trust.
- Safety was maintained and managed in a holistic manner, people were seen as individuals with varied needs and their wellbeing was truly taken to heart. The registered manager and staff were passionate about reducing anxiety, agitation and stress, enabling people to be the best they could be. They challenged discrimination and worked to support people and their diverse needs. For example, one person had an extreme diverse need and staff supported this person to live how they wanted to live.
- Safety was monitored due to the registered manager completing a comprehensive monthly vulnerability risk assessment which enabled them to act on any changes to people's health quickly.
- People's changing needs were acted upon straight away, due to a monthly adverse incident summary report. Information gathered determined if the person's needs had changed, if they were still meeting this person's needs, and if not, what needed to be put in place to meet them.
- People benefitted from living in an environment which supported and empowered them to have independence, choice and control of their lives and positive risk taking was encouraged and lifestyle choices were respected. For example, it was important for a person to move furniture about as this made them feel useful, staff supported them with this. Another person had a percutaneous endoscopic gastronomy (PEG). A PEG is a way of introducing food directly into the stomach by passing a thin tube through the skin into the stomach. The person had full capacity and staff supported them when they made the decision to still eat orally. Physiotherapy and Speech and Language Therapists (SALT) were also involved and offered advice and risk assessments were in place.
- People's relatives felt their loved ones were safe, saying "Here they [people] are safe day and night, they have a pressure pad by their bed and the girls have a list of things they can do if they are restless at night [Twilight list, see responsive section]. They don't have any bruises now (since moving to The Hawthorns (Evesham))", "[Named person's] safety couldn't be any better, I know they are looked after, there is always somebody here, so they are safe", "My [named person] is absolutely safe" and "The staff team are brilliant, they know the foibles and positives of every resident, I have no worries about safety, [named person] can stand but is at risk of falling but they have one to one care from staff, so no issues, I have always been happy"
- The registered manager had put a risk assessment in place for Brexit. They had a full assessment with action plan ready. The provider had supported those staff already employed to complete the correct residency paperwork in advance of Brexit.

Staffing and recruitment

• We saw staff continued to be recruited safely and appropriate checks were completed.

- The registered manager said, "We might interview someone with a lot of qualifications but, if they don't share our values especially around person centred care, they don't get the job. I can train the right person. At The Hawthorns we look at how we work, how we interact with people, knowing your residents and knowing their triggers. We have done a lot of work with staff who have English as a second language, the more you invest in your staff the better the care is."
- The registered manager proactively anticipated risks to people and increased staff levels when needed. The dependency level of each person who used the service was assessed to ensure the correct levels of staff were on duty. If a person needed extra support due to not sleeping well for example, extra one to one hours were put in place.

Using medicines safely

- We saw medicines were administered and stored safely. The service was piloting an electronic Medicine Administration System (eMAR) that had been developed by Shaw Healthcare Ltd.
- The registered manager had worked closely with local GPs and healthcare professionals to reduce the amount of when required (PRN) antipsychotic medicines people were prescribed. The registered manager and staff had worked well to find out why people were displaying behaviours that challenge and/or agitated behaviours. One relative said, "My [person's name] was given [tablet name which was a sedative with anxiety relieving and muscle relaxing effects], every day at their former nursing home, and was always falling, now they have only had it twice in three weeks." We saw the management of this person's agitation had enabled this medicine to be reduced.

Preventing and controlling infection

• The service was well-maintained, clean and tidy throughout. Staff followed infection prevention and control procedures to ensure people were protected from the risk of infection.

Learning lessons when things go wrong

- We saw there was an open and honest culture in the home, if things didn't work out or were not always successful staff sought to learn and improve them. Incidents that happened at The Hawthorns (Evesham) were thoroughly analysed and investigated, to see if it could be prevented or if they could work differently.
- An incident with a wheelchair prompted a root cause analysis, a full assessment of all wheelchairs and a checklist was now in place before every wheelchair was used.

Systems and processes to safeguard people from the risk of abuse

- Policies in relation to safeguarding and whistleblowing reflected local procedures and relevant contact information.
- Staff had received appropriate training, along with excellent support. Staff demonstrated a high level of awareness of safeguarding procedures. They knew who to inform if they witnessed or had an allegation of abuse reported to them.
- The registered manager was aware of their responsibility to liaise with the local authority if safeguarding concerns were raised and previous incidents had been managed well.

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

People's outcomes were consistently better than expected compared to similar services. People's feedback described it as exceptional and distinctive

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

- The services layout was dementia friendly, corridors were straight and wide enough to accommodate, wheelchairs, walking frames and people walking with staff support. On the acquired brain injury unit, people had their own self-contained flat which was decorated the way they wanted it.
- We saw people who were becoming distressed or agitated, were soon soothed from the many tactile objects on the walls along with soft toys and activity boxes with items of interest.
- •The staff used innovative ways to engage people in their surroundings. A part of one corridor had been made into an indoor shed. People could go and use the pots, trowels and gardening tools. There was also an indoor beach.
- If people were becoming anxious and wanted to go home, staff could take them to the indoor bus stop and talk about what but they could catch, they could sit at the bus stop and have a meaningful conversation with them. Once the person became engaged in this conversation they would relax and walk away calmly.
- The handyman had set up some old table top telephone boxes and wired them to the local radio. If a person was becoming anxious and wanted to talk to someone for example their mother, they were encouraged to pick up the telephone, so they could hear voices on the other side. The registered manager said, "We have evidenced that this has a powerful effect and will create peace."

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

- Relatives told us the staff contacted them straight away if anything happened to their loved one.
- Relatives confirmed that if a person goes to hospital, staff always accompany them and stay with them until they were settled on a ward. Staff would contact the hospital every day to check on the person.
- Staff worked closely with all external healthcare professionals.
- The registered manager had links with a 'Neighbourhood Team' who provided a holistic approach to care. They act as a triage service for the GP surgeries. The registered manager said, "We, as a team develop the holistic assessment and implementation of the treatment provided and monitor the effectiveness of the treatment and review the plan as required. This ensures all the preparation for the person's care is in place, with the right people supporting their care. This also helps families to feel confident about the health services provided. It helps my team to know they always have other people they can ask for advice and this instils confidence in the team. It is a team approach to decision making and choices available for the individual." The outcome for the person was a person-centred approach to care. The physical and psychological interventions kept people pain free and promoted healthy living to enable them to have a good quality of life. For example, one person recently needed medical care, they did not want to go into hospital. The neighbourhood team and the registered manager set up a plan that enabled the person to

have their treatment at The Hawthorns (Evesham). This respected the person's wishes to stay with people who knew them well and within their own environment.

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

- There was a holistic approach to assessing, planning and delivering care and support. People had a comprehensive assessment prior to and on admission and a person-centred care plan was developed
- The registered manager had worked hard to reduce or discontinue when required (PRN) anti psychotic medicines, using techniques to identify any triggers and put distraction techniques into place rather than administer medicines. One distraction technique was the services 'magic table.' Research had shown that the use of the 'magic table' is a proactive approach in reducing PRN medicines. The magic table is a fun way to stimulate people with dementia to move more and interact socially. It was developed for and with people in the moderate to severe stages of dementia. The interactive games break through apathy by stimulating both physical and cognitive activity and encouraging social interaction. One external healthcare professional said, "Whenever I've met with [Registered managers name] she has been extremely enthusiastic about improving services for people living with dementia. I've seen some great interventions in action such as "The Magic Table" which residents clearly really value and enjoy."
- An external health care professional said, "The home on a whole is evidently pro-active with reducing reliance on sedative and anti-psychotic medication," and "They are pro-active with working in a genuinely person-centred way to reduce distress and restriction one person I knew of was assessed as 'requiring' 5 carers for personal care while at another care home, they were soon moved to The Hawthorns who knew they could do better! Uppermost in their mind was that it would feel terrible for them to have five carers so they completely re-thought the whole issue from there. Excellent."

Staff support: induction, training, skills and experience

- People received extremely effective care from well trained and well supported staff. Staff had skills and knowledge to perform their roles and responsibilities effectively. Management and staff knew people extremely well and this helped ensure people's needs were met. Training was tailored to individual needs and learning styles.
- The registered manager made sure staff knew they were well supported. On the day of the inspection a staff member was awarded a certificate for recognition of employee of the month and for achieving an National Vocational Qualification (NVQ) level 3 in activities, they also received a bottle of wine and a box of chocolates, the latter which they opened and shared with every person on that unit. The registered manager said, "They were really apprehensive about doing this course as English is their second language, but they have done brilliantly. I made sure they had a buddy who supported [named staff member] through it, I am over the moon for them."
- People benefitted from staff who valued and understood them as individuals. Staff took time to find out about people, their preferences and their personalities. Staff were trained to see how people viewed the world whilst living with dementia. For example, staff would role play during training, one person would take over the role of the person living with dementia which included being fed blindfolded. This had made staff realise how important it was to provide explanations of what was happening and gain an understanding of the world the person with dementia was living in. One staff member said, "It helped me gain an understanding that it is not only the physical side for the person moving into a home, they also need the feeling of love and security."
- Staff communicated effectively within the team, sharing information during regular daily handovers.
- Staff received supervisions and a yearly appraisal. Staff confirmed they had opportunities to discuss any issues during supervision or when needed.

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

• Food we observed was of really good quality and had flexible options, for example people could choose

what time they ate and where they preferred to eat.

- People and relatives were happy with the food provided. Comments included, "That was marvellous (after finishing their lunch) the food is always perfect, and very good here", "The food is very good, it is all home cooked and there is a choice" and "The food is very good, faggots are their favourite."
- One relative said, "We were not happy at the previous place, they [named person] lost 5.5kg in weight, but since being here, [person's name] is eating all the food, the food is great, I can tell they are happier and we, the family are happier."
- The cook prepared creative finger food options for people who preferred to walk around. For example, courgettes scooped out and filled with cheese. A vegetarian option was available at each meal time.
- Staff were permanently on hand to support people if needed. However, they allowed people to eat undisturbed and unaided unless the person indicated they needed assistance.
- Drinks were continuously available all day. We saw one person asked for a cup of tea, even though they had a fresh one beside them, the staff member made them a new one. Throughout the day we saw nothing was too much trouble for staff.
- Families were invited to meals on special occasions such as Christmas Day, New Year and Valentines as well as personal special occasions such as birthdays and anniversaries.

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

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met. We checked whether the service was working within the principles of the MCA.

- People's mental capacity was assessed. Best interest decisions were taken where necessary in consultation with relevant professionals and relatives.
- Staff were aware of the outcome of best interest meetings which meant care being provided by staff was in line with people's best interest.

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

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; equality and diversity

- We saw there was a strong culture for person centred care. Staff demonstrated an exceptionally kind and compassionate, can-do attitude.
- People and their relatives were exceptionally positive about the quality of care and support people received. This was confirmed through our observations. Visitors stayed for long periods and enjoyed spending meaningful time with their loved ones.
- Comments from relatives included, "Oh the staff really like [named person] they make them laugh, if a resident is unhappy staff distract and reassure them", "The staff are lovely, really understanding" and "This place is outstanding, gold stars all round. Our experience for my Dad is so different here. He had problems with taking medication, but they have put our minds at rest and have overcome the problems. They are just so friendly, like a family really. The actual relief of my Dad being here brought me to tears."
- People were valued and included in assisting staff with tasks or joining in with a staff members daily work life. The Hawthorns (Evesham) was people's home and as such, they had free access to all areas of the service, except where there may be a specific risk. For example, the office door was always open, and one person especially would enter and sit in the office. The administrator would make a cup of tea for them and give them some papers to work with. Another time staff were training, and someone walked in, instead of asking them to leave, the person was provided with training materials and stayed for the training.
- Staff supported people to feel valued and useful. One person was pulling radiators off the wall, dismantling toilets and moving furniture. Staff support this person to channel these behaviours on the 'dementia car.' The dementia car is an old car that people can sit in, work on the engine and continue their skills from previous employments, such as a mechanic, auto electrician or have an interest in cars. This person worked on the car, checking the water and oil for example. They still moved furniture around, but staff supported them to do this in a safe way. The person also carried a clip board and helped the maintenance staff to complete water checks.
- Staff demonstrated a good understanding of equality and diversity and respected people's differences.
- When a person with a specific diverse need was coming to live at the service the registered manager held one to one sessions with all the staff to discuss and talk through this person's needs. All the staff worked really hard to make this person welcome, relaxed and totally accepted.

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

- People and their relatives were actively supported to express their views and were fully involved with the running of the service and attended monthly meetings.
- During the meetings the registered manager also brought in external speakers or conducted a presentation themselves, to support people and relatives to understand certain topics. For example, the registered

manager recently worked with the Clinical Commissioning Group (CCG) to deliver a presentation on advanced care planning as well as a talk on respect and the dementia strategy. The feedback from these meetings was favourable and had the desired effect.

- A staff member did a full evaluation of meetings for people and their relatives. They looked at what worked well and where improvements could be made. For example, a bigger room and inviting other staff such as the cook or laundry worker. An action plan was put in place and addressed.
- Where people struggled with communication aids had been introduced. For example, a light writer. The light writer is a dedicated device for those who cannot communicate through speech, it allowed the person to converse and express their views, needs and wants. The service also had playing cards which had topics of conversation on, which enabled the staff member to really get to know the person and their wishes and preferences.
- A booklet had been put in the bedroom of each person, who had a diagnosis of dementia. The booklet was written by someone who had been diagnosed with dementia and it was there to support the person, their families and visitors to have a greater understanding of dementia.

Respecting and promoting people's privacy, dignity and independence

- Peoples privacy, dignity and respect was at the heart of the services culture and values, and staff were motivated to deliver a high level of respectful support and care.
- Relatives we spoke with said staff were extremely respectful to people and were exceptional at putting the person first. Comments included, "The staff are lovely, they are really understanding, they help every person keep their last bit of dignity they have left. People's clothes are always immaculate, they are always being changed" and, "[Named person] is respected, loved and well looked after"
- Staff respected people's privacy and dignity, we saw staff knocking on doors and waiting for a response before entering.
- The lounges had settees which enabled family members to sit next to each other and it was evident people enjoyed this level of closeness.
- Whilst the registered manager was showing us round the home, they noticed someone was looking distressed. They immediately went up to them and quietly took them to the toilet. The registered manager did not go and find a member of staff to do this they supported the person making it much more dignified. One relative said, "The manager joins in, she does not leave anyone whilst she gets staff to do anything"
- People's anxiety and stress was minimised by the support they received from staff. Staff anticipated people's needs and recognised signs of distress at the earliest stage. One person who used the service was very distressed about having a catheter in place, they would often pull it out, causing complications and were anxious when staff had to support them with the catheter. Staff were looking at ideas on how best to support this person, to reduce their anxiety and stress.

Is the service responsive?

Our findings

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

Services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- Extensive person-centred activities took place every day. One relative said, "There has been an exponential improvement since [activity coordinator's name] arrived. She is so good, she reached the final of the Shaw Group Activity Person of the month for being creative and person centred."
- The activity coordinator's role was to organise activities for each person but not necessarily playing a hands-on part. 14 members of staff were trained to NVQ level 3 in activities. The activity coordinator said, "Each unit has its own activity boxes which has craft items, newspapers, building materials, books plus loads more, but nothing too childish, we have one resident who loves colouring but many others wouldn't appreciate that, so I tailor it to their needs" and "It is also important that activities are within the capabilities of residents, I will not have people set up to fail, such as carpet skittles would not be suitable for most residents because of their levels of physical and cognitive impairment. So, the magic table, music sessions, therapy pets and sensory stimulation is much more popular"
- People were supported to maintain relationships with family and friends. One relative said, "We took [named person] out to another family members house for Sunday lunch, and [name of care assistant] came too, we can request a particular member of staff and the home will fit with us. We had a lovely time and the care assistant was able to take photos of us all as a family. After lunch they [named person] asked to come back to the Hawthorns, so we know they are happy here and we are happy"
- The activity coordinator also set up a list of one to one twilight activities for people who were struggling to sleep, feeling restless or could become anxious at night. These activities including tidying cupboards, creating pictures for the hallway or rooms, puzzles or going through memory boxes.
- Staff took time to find out what people had done in the past and tailor activities to the person's needs. Each person had their own personalised activity timetable. We saw for one person who used to be a nurse in their working life, that an activity they enjoyed was 'sorting' the first aid box.
- Other activities included armchair travel, staff from a different country would talk about life in that country and share food that was native to that country. There was 'Thirsty Thursdays' and 'Sundown Festivals,' where people could enjoy early evening drinks and mocktails.
- At Christmas time the activity coordinator organised a Christmas carol service at the local church for every person and their family members. With support from families they managed to get everyone to church, the registered manager said, "It took us over an hour and a half to get everyone there, but it was worth it, great fun."
- One person was becoming socially isolated, because they were refusing to leave their room. To overcome this and support the person a staff member brought their Harley Davidson bike to the persons window, knowing the person loved these bikes. This encouraged the person to go outside and look at the bike. The staff member continued to bring the bike parking it in different spots to encourage the person to venture

further. This person now sits with everyone else on their unit and enjoys the social time. On the day of the inspection they were singing Abba songs at the top of their voice.

- We saw evidence of outstanding personalised care throughout the day. One person had come to live at the home after a bad experience at another service. They felt very uncomfortable with male care workers and had requested only female care workers. The other service had not done this and the person was very unhappy. They were moved to The Hawthorns (Evesham) and brought in a taxi with a male care worker. The person was so distressed they refused to leave the taxi, the registered manager went and sat in the taxi with them, spent time reassuring them and after what took a while, they eventually came into the home. Family members said the improvement within a few days of coming to live at The Hawthorns (Evesham) was immense and felt really lucky.
- Another person was served notice from a previous home due to their behaviours that challenged. The registered manager and staff team worked hard to assess the person and gained an understanding as to what triggered them and consequently reduced the person's antipsychotic medicines. The person loved music, so staff wrote out the lyrics to songs the person liked and posted them all over The Hawthorns (Evesham), so the staff who worked one to one with this person could engage with them by singing the lyrics, they eventually joined in with the singing. Staff said the magic table really helped this person to reduce their anxieties. The registered manager said, "The person's behaviour reduced dramatically and the pivotal moment in this person's care was when their old barber shop group visited, and the person sang with them. This sense of achievement enabled them to feel confident and still part of his community.
- The registered manager explained how they were lucky enough to go on the 'Tonight' programme about their project 'playlist for life' technology. iPods were used with individualised music on for each person. One person with advanced dementia had not recognised their wife for two years and during this project they recognised some songs especially his wedding song, when that song came on he looked directly at her and said, "It's you." The registered manager said, "This was very emotional."

Improving care quality in response to complaints or concerns

- People and their relatives were provided with information on how to make a complaint.
- The service had received two complaints since the last inspection, we saw these had been fully investigated with learning outcomes identified which were discussed with staff.

End of life care and support

- At the time of our inspection no one was receiving end of life care.
- The registered manager had worked closely with people and families to develop extremely detailed advanced care plans. The registered manager had provided a presentation on advanced care planning at meetings for people and their relatives. The registered manager said, "We found the care plans needed to be addressed early not when someone was in crisis."
- The care plans ensured people received the care they wanted at the end of their life. Care plans covered people's emotional needs, for example they would not like to be alone. A person who had been receiving end of life care was never left alone. All staff covered shifts so that three members of staff could continuously sit with the person and be with them at the end of their life.
- The advanced care plan also contained a 'bucket list' of any dreams they would like to fulfil.
- One person's relative said they would love to go out for a drive, however they did not think it was possible due to the person's behaviours that challenged. The registered manager said, "We asked where he would like to go, and it was decided that they would visit the cathedral where they had been a verger. We risk assessed every aspect of the journey. We have a lovely photo of him and his wife entering the cathedral both with smiles on their faces. It is a lovely moment to cherish and gave him a sense of wellbeing and involvement in his local community."
- Another person's bucket list wish was to go home one more time. The registered manager said, "The challenge was how to get him there due to physical condition. We adapted a chair, so it was safe for him to

the nurses came in on her day off to drive the bus. We managed to get him home for one last visit where he had a meal with his wife and family and a glass of prosecco. He passed away a week later."		

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

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.

- There was a strong emphasis on monitoring performance leading to the delivery of improvements to the home. A full audit system took place and the information was analysed by the registered manager and the provider to look for any trends or patterns. Incidents and accidents, falls, weight loss and complaints were discussed during team meetings and group supervisions to reduce the likelihood of these incidents reoccurring
- The registered manager was passionate about providing the best care for people living with dementia. The registered manager had recently won the Hennell Award for Innovation and Excellence in Dementia Care. This award from Worcester University is to celebrate the achievements of someone who have shown their ability to implement positive change for people with dementia.
- The registered manager had also won Shaw Healthcare National Awards twice, they were the winner of the dementia care award for continence care and runner up for home manager in the Caring Times Award.
- The maintenance operative was runner up in Caring Times Awards for dignity champion.
- Nine staff were recognised for wellness, happiness and kindness, one staff member won administrator of the year and another staff member was recognised for their cooking.
- The Hawthorns (Evesham) was an excellent role model to other services and was currently being assessed as a serenity home. Shaw serenity was launched in 2017 as the new way to improve activity in Shaw. It includes training for activity champions who plan, co-ordinate and evaluate activity provision within the service. It included standardised paperwork to help the service meet the benchmark set out by the National Activities Provider Association (NAPA) and the Royal Collage of Occupational Therapists. NAPA supports care teams to enable people to live life the way they choose, with life, love and laughter. Serenity is about providing outstanding, meaningful person-centred activities to enrich the lives of our residents.
- The registered manager led an inspection of 12 West Midland homes and achieved the Investors in People Award.
- The Hawthorns have expressed an interest in participating in a research project with the Dementia Research team in Worcester University and the Alzheimer's Society.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility.

- Relatives found the registered manager to be extremely supportive and found the service to be exceptionally well-led. Comments included, "I can't say enough about the registered manager, she is so good to us, she takes [named person] for lots of one to ones and they do things like folding serviettes."
- Nurses from overseas were supported to understand person centred care and person centred care plans. The registered manager had compiled a document called Enriched Care Planning for Qualified Nurses. One

nurse we spoke with said, "I needed help writing dementia care plans and the manager personally helped me, the Care Planning Guide the manager prepared was a great help. I feel valued and trusted."

• The registered manager showed how they adhered to company policy and analysed incidents to reduce the risk of any further incidents happening.

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

- The registered manager was extremely passionate and exceptionally motivated about the work that they do. The culture they created was one of person centred care, kindness, fun and care that was outstanding.
- Staff were proud of the service and all shared the same values and commitment. All staff we spoke with agreed that the registered manager was very approachable and always gave time to them and made them feel appreciated in their day to day working lives. Comments included, "The manager does not micro manage, she allows you to follow your own ability, she is a really good person to work for and throw ideas at. She gives backs us 100% and she has a natural ability to explain things, so you can understand", "The care here is excellent, I can't think of how to improve anything, the support is wonderful for us as nurses, they [registered manager] are confident in my abilities, that makes me want to stay"
- An external healthcare professional said "Whenever I have met [registered managers name] she has been extremely enthusiastic about improving services for people living with dementia. I have seen some great interventions in actions such as The Magic Table, which residents clearly really value and enjoy. Relatives I have spoken to have always been really positive about the care and support their loved one receives" and "I know [registered managers name] has been involved in some work with Worcester University Association of Dementia Care, looking at improving the care and support residents receive. My impression of The Hawthorns is very positive. They are person centred in their approach to care and will always try to problem solve if a resident is distressed or experiencing difficulties."
- Services that provide health and social care to people are required to inform the Care Quality Commission, (CQC) of important events that happen in the service. The manager of the service had informed the CQC of significant events in a timely way. This meant we could check that appropriate action had been taken.

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

- There was a strong emphasis on involving people in the continuous improvement of the service.
- One relative we spoke with said, "I come to the relative's meetings, and do some fund raising"
- The registered manager provided in house training for the diocese (church) group to aid communication for individuals with advanced dementia. They also provided in house training for relatives and friends on advanced care planning.
- Relatives were part of a focus group to support development of the Shaw Healthcare's dementia strategy.
- The Hawthorns (Evesham) was chosen to host the Brightown Chinese delegations of nurses to showcase person centred care for the organisation. They were presented with a hand painted picture of a bird which was painted by one of their residents diagnosed with dementia.

Working in partnership with others.

- The registered manager has been working closely with Worcester University to adopt the Focussed Intervention Training and Support (FITS) programme into The Hawthorns. The aim of FITS is to train, support and develop dementia care coaches in nursing homes. This in turn improved well-being and helps to decrease inappropriate prescribing of anti-psychotic medicines and replace them with positive therapies.
- The registered manager said, "By adopting this approach my goal is to provide a place where a person's experience, feelings and values are unique and an understanding that an individual dealing with dementia can feel a range of emotion that are personally challenging to them. My team by using the FITS approach seek to make our home into a haven of belonging to enable individuals to feel secure, happy and contented

to ensure their quality of life is not compromised by their dementia, but their skills are maintained through occupation and activity and the ability to make their own choices."

- The registered manager was also expanding this approach by supporting staff from three other care homes within Shaw Healthcare. They completed a business plan to move the programme forward to embed the ethos of the organisation which was wellness, happiness and kindness."
- The local Brownie group visited The Hawthorns and they became junior purple angels. Purple Angels was formed by Norm McNamara who was diagnosed with dementia at the age of 50. It was formed to raise awareness around the world of dementia. As well as adult Purple Angels there are junior ones. Grandchildren of some people living at The Hawthorns fund raised for the home and became junior Purple Angels.