

## Approach Lodge Rehabilitation LLP

# Approach Lodge

### Inspection report

2 Approach Road  
London  
E2 9LY

Tel: 02089812210

Date of inspection visit:  
23 July 2019  
24 July 2019

Date of publication:  
13 August 2019

### Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Outstanding ☆

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

# Summary of findings

## Overall summary

### About the service

Approach Lodge is a small residential care home providing personal care for up to seven adults with mental health needs. At the time of our inspection seven people were living in the service.

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

People received outstanding support to help manage their mental health conditions and this had an extremely positive impact on their health and wellbeing. Relatives and health and social care professionals praised the support from the staff team and how it had made a difference in improving people's lives.

People were supported to a range of healthcare appointments and staff followed up any issues or concerns. Health and social care professionals were confident with the knowledge and experience of the staff team.

People were supported by staff who had a good understanding of their needs and behaviours and knew how to keep them safe.

We observed positive interactions between people and staff throughout the inspection, with staff creating a kind and caring environment.

People were encouraged to be part of their local community and were supported to attend day centres and local activities to improve their wellbeing. People were supported to maintain relationships with their family and friends.

People's language and cultural needs were accommodated and staff had a good understanding of how people liked to be supported. People were fully involved in how they received their care.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible. The policies and systems in the service supported this practice.

People were cared for by a dedicated staff team who felt appreciated and valued in their role. Staff spoke positively about the strength of teamwork and the supportive environment that had helped people to manage their mental health effectively.

The Secretary of State has asked the Care Quality Commission (CQC) to conduct a thematic review and to make recommendations about the use of restrictive interventions in settings that provide care for people with or who might have mental health problems, learning disabilities and/or autism. Thematic reviews look in-depth at specific issues concerning quality of care across the health and social care sectors. They expand our understanding of both good and poor practice and of the potential drivers of improvement.

As part of thematic review, we carried out a survey with the registered manager at this inspection. This considered whether the service used any restrictive intervention practices (restraint, seclusion and segregation) when supporting people.

The service used positive behaviour support principles to support people in the least restrictive way. No restrictive intervention practices were used.

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 23 March 2017). Since this rating was awarded, the registered 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?

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?

Good ●

The service was caring.

Details are in our caring findings below.

### Is the service responsive?

Good ●

The service was responsive.

Details are in our responsive findings below.

### Is the service well-led?

Good ●

The service was well-led.

Details are in our well-led findings below.

# Approach Lodge

## 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 consisted of one inspector.

### Service and service type

Approach Lodge 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

We gave the provider less than 24 hours' notice of our inspection as we needed to be sure that people living at the service would be available to speak with us and that the registered manager could give them notice, as not to cause any distress or disruption to their routines.

### What we did before the inspection

We reviewed information we had received about the service since the last inspection. This included any significant incidents that occurred at the service. The provider was not asked to complete a provider information return prior to this inspection. This is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We also reviewed the last inspection report. We used all of this information to plan our inspection.

#### During the inspection

We met with all seven people who used the service and spoke with three of them. As some people were not fully able to communicate with us, we carried out observations throughout the inspection to help us understand the experiences of people who could not talk with us in more detail. We spoke with six members of staff. This included the registered manager, the deputy manager, two senior support workers and two support workers.

We reviewed a range of records. This included three people's care and medicines records and five staff files in relation to recruitment, training and supervision. We also reviewed records related to the management of the service, which included handover records, quality assurance checks and minutes of team meetings.

#### After the inspection

We contacted five relatives of people who used the service and spoke with four of them. We also spoke with three health and social care professionals who had experience of working with the service.

# 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

- Safeguarding policies were in place and staff completed safeguarding training to ensure people were protected from avoidable harm. There were clear guidelines in place for staff to follow if they suspected any form of abuse.
- Staff had a good understanding of their safeguarding responsibilities and were confident any concerns raised would be dealt with immediately. One staff member said, "When it comes to safeguarding, we take everything seriously. The training helps us understand what to do and we discuss any issues in meetings. People's safety is our priority."
- People and their relatives told us they felt safe with the support they received. One relative said, "They have been there a long time and there has never been an incident." Health and social care professionals also felt people were safe with the support they received at the home.

Assessing risk, safety monitoring and management

- Risks to people's health and wellbeing had been assessed and were reviewed if there were any changes. Staff were aware of risks to people and explained how they managed them to keep people safe. Health and social care professionals felt staff had a good understanding of people's behaviours and could manage any concerns.
- Guidance was in place for risks related to behaviour that challenged the service so staff could support people safely. People had detailed background assessments with an overview of possible behaviours, symptoms of clinical diagnosis and factors of possible deterioration with their mental health.
- People had Personal Emergency Evacuation Plans (PEEP) which had information about the procedures in place in the event of an emergency. A fire risk assessment was in place and there were weekly fire alarm tests and monthly fire drills.
- Missing person profiles were also in place with guidelines for staff to follow if people had not returned after a specific period of time. One relative said, "[Family member] does receive a safe service. Staff are aware of their conditions and know how to reduce any possible risks."

Using medicines safely

- There were robust procedures in place to ensure people received their medicines safely. Staff told us they shadowed senior staff and were observed before supporting people. One support worker said, "There was internal and external training which was really good. It helped to give me the confidence to support people take their medicines."
- Details about people's medicines were included in their care records, including information about possible side effects. One person had detailed guidelines in place for managing their medicines when they spent time with their family over the weekend. A relative said, "They even call to check about their medicines

and we are very happy with how it is managed."

- Samples of medicine administration records (MARs) we reviewed had been completed correctly and daily checks were in place at each handover to minimise any errors.

#### Staffing and recruitment

- Sufficient levels of staff were deployed across the service to ensure people's needs were met. Samples of weekly rotas showed staffing levels were consistent with what we saw throughout the inspection.
- Staff were regularly scheduled to support people to visit family and ensure they arrived and returned home safely. Staffing levels also took into account some people needing to be escorted to healthcare appointments.
- The registered manager and deputy manager were on call in the event of any emergencies and staff who worked waking night shifts told us they felt fully supported. One support worker added, "I feel reassured with this and they do answer if I need to call."
- The provider followed safer recruitment procedures to ensure staff were suitable to work with people who used the service. Disclosure and Barring Service (DBS) checks for staff had been completed at the time of recruitment and reviewed every three years. The DBS helps employers make safer recruitment decisions and helps prevent unsuitable people from working with people who use care and support services.

#### Learning lessons when things go wrong

- There were procedures in place for the reporting of incidents and accidents across the service. Incident forms were completed and staff recorded information in communication books so all staff were aware.
- We saw the staff team had discussed a recent fire at a care home which had caused a death. Staff carried out extra fire checks and discussed the importance of fire safety to raise awareness.
- The provider had introduced a new information sharing folder for staff with information and guidance for staff to share best practice. There was information from the Care Quality Commission (CQC) about learning from risks and good practice for better outcomes in relation to medicines in social care. Staff confirmed any issues they had were discussed at meetings as a learning point.

#### Preventing and controlling infection

- There were cleaning schedules in place for staff to follow and these were discussed at each staff handover. The staff team were supported by a cleaner who visited three times a week and the home was observed to be clean and tidy with staff following safe infection control procedures.
- Daily cleaning rotas also involved people and they were encouraged to carry out cleaning and laundry tasks. We saw photos of people being involved with this and one person told us they enjoyed being responsible for helping with cleaning tasks.
- Monthly checks looked at hygiene and cleanliness in people's rooms and cleaning responsibilities of staff were discussed at monthly meetings. A health and social care professional commented the home was always clean when they visited.



# 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 improved to outstanding. This meant people's outcomes were consistently better than expected compared to similar services. Relatives and health and social care professionals feedback described it as exceptional and distinctive.

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

- The support that people received from the staff team to manage their mental health and wellbeing had an extremely positive impact on them and significant improvements were highlighted by relatives and health and social care professionals. One health and social care professional praised how they worked collaboratively with the provider and arranged regular visits to ensure any issues were immediately addressed. They added, "They do such a great job, that in a way, it takes away part of our job which is a good sign. With the interventions they make, they support people with their recovery."
- People had regular meetings with the Community Mental Health Team (CMHT) as part of their Care Programme Approach (CPA) involvement. This is the system used to organise people's community mental health services, involving people, their friends and relatives if applicable, and health and social care professionals. These meetings assess and review the needs of people to check they are being met.
- We saw four people had been recently discharged from their CPA due to how well they were managing their mental health. As the same seven people were being supported at the last inspection, we were able to notice significant improvements in people's appearance and engagement with us. One health and social care professional told us it was the best service they had worked with and the staff were excellent in managing people's needs. They added, "For [person], without the support they are receiving, they wouldn't be doing as well as they are. I know they are very happy there."
- We spoke with this person's relative who confirmed they were extremely happy with the care and support their family member received and had a positive impact on their health. They added, "It has really improved, staff do their job very well and [family member] is very happy."
- Another relative praised the support their family member received and how this had a positive impact on the whole family. They explained that their family member had never fully communicated with them before they moved into the home. However, they were now really improving and engaging with the family during home visits. They added, "The staff have really helped with this and this has made a huge difference to the family. I didn't know what their voice sounded like, now I can have a conversation. It is amazing."
- People told us staff supported them if they became unwell. The registered manager said, "We are all very proud of the service users. None of them have relapsed or gone back to hospital since the last inspection. As a rehabilitation home, this is a great success for us." A staff member said, "With the support we give and encouraging them to take their medicines, surround them in a positive environment and support them in the community, we can see the improvements in people's mental health."

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

- People had been assessed before they used the service or when their health needs changed. There was information in place and detailed assessments from the CMHT and other health and social care professionals.
- Health and social care professionals told us staff were proactive and would always contact them for advice and guidance if they had any concerns about people's health.
- The provider had used best practice guidance from a recent CQC thematic review about oral care in care homes. We saw new care plans had been introduced to ensure oral care policies were being followed. Staff confirmed this had been discussed and had looked at further ways of encouraging people to have better oral hygiene.

Staff support: induction, training, skills and experience

- People were supported by staff who had a comprehensive induction and shadowed senior staff when they first started. One support worker said, "I was put with a senior and went through all the fire safety procedures and then introduced to people. I observed handovers, looked through people's files and learnt about all the shift processes."
- Mandatory training covered a wide range of topics which included first aid, fire safety, food hygiene and infection control. Staff also completed training that was specific to people's needs, which included mental health awareness, diabetes awareness and managing challenging behaviour. One relative praised the experience of the staff team. They added, "They are skilled and experienced, they have spent a lot of time with [family member] and know how to approach them and meet their needs." Observations throughout the inspection showed staff had a good understanding of people and engaged with each person in different ways to ensure they met their needs.
- Staff were positive about the training they received and we saw it was refreshed regularly. Health and social care professionals were confident in the knowledge and experience of staff in meeting people's needs. One health and social care professional added, "I've never seen any issues during my visits and staff can manage any challenging situations very well."
- Staff received regular supervision every six to eight weeks and their performance was appraised annually. Supervision records were detailed and staff praised the support they received. One senior support worker said, "The supervision is good and we can express and reflect on our work and what areas we can improve on. Plus, we can discuss our own personal wellbeing."

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

- People were supported to eat and drink and staff were aware of their nutritional, medical and cultural needs. People's preferred foods were recorded in their care plans, including any nutritional risks and guidelines to reduce any possible risks of choking.
- We were invited to sit and have lunch with people and sampled the food on both days of the inspection. It was fresh, of good quality and met people's cultural requirements. We received positive feedback from people and their relatives about the food and the support they received.
- People were given choice and staff made sure they were involved in decisions during daily meetings. We saw staff encouraged people to eat healthily and discussed with people the benefits of a healthy diet.
- We saw people enjoyed their cultural foods. One person told us he really enjoyed having Somali dishes cooked by a Somali member of staff. People also enjoyed cultural food for religious celebrations, such as Eid. A relative said, "The staff know that they eat halal food and we are happy with the support they get."

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.

- The registered manager and staff team had a good understanding of the MCA and followed best practice to ensure people consented to the care and support they received. All of the people at the service had capacity and staff supported them to make decisions about their daily events.
- There were no DoLS in place and we saw people were free to leave the home as they pleased with no restrictions in place.
- Staff completed MCA and DoLS training and the importance of getting people's consent before undertaking tasks was discussed during supervision. The deputy manager said, "The staff team have a good understanding of consent and this is drummed into us. We can try other techniques or have another member of staff try if somebody refuses something, but we accept this and make sure we always seek their consent and make sure they are involved."

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

- The home was accessible to people who used the service and they had their own en-suite bathrooms with a communal lounge and kitchen. We saw people had been involved in the decoration of their rooms. Satisfaction surveys highlighted people were involved in choosing their preferred colours. One person had been supported to have a framed photo in their room of a relative who had recently passed away. They showed it to us during the inspection, including pictures of other relatives and their favourite musicians and sports team.
- There was a designated smoking area within a secure courtyard where people were encouraged to use to reduce any fire risks. We saw people accessing this throughout the inspection.

# 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 good. At this inspection this key question has remained the same. 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 were positive about the kind and caring attitude of the staff team. One person said, "I am very happy here and I like all the staff." Comments from relatives included, "They get along very well with staff. They have a good attitude and are thoughtful to all the people in the home" and "They have built up a great rapport with [staff member]. They are engaging with them really well and enjoy spending time together."
- Throughout the inspection we observed positive interactions between people and the staff team. There was a relaxed and homely atmosphere and staff involved people and interacted with them in a respectful way.
- Health and social care professionals complimented the staff team and how they created a calm and welcoming environment that helped people to improve their health. One health and social care professional added, "You can see that the staff really care about the residents and know them well."
- Staff understood the importance of building positive relationships to help support people. One support worker said, "I love coming to work for the people here. It is a lovely feeling when you can make people happy." We saw the staff team understood and respected people's equality and diversity and knew what was important about people's backgrounds and cultures.

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

- People and their relatives confirmed they were involved in making decisions about their care and support. Records showed staff regularly discussed day to day events and information about healthcare appointments with people.
- One relative told us the staff team had been instrumental in supporting them address some issues and had helped with getting an advocate involved. Advocates are trained professionals who support, enable and empower people to speak up.
- We saw examples where staff supported people on their behalf with queries and applications for welfare benefits, public transport passes and identity documents.
- The registered manager, a senior support worker and two support workers had been able to interpret on behalf of people at a range of healthcare appointments when translators were not available. Staff told us health and social care professionals appreciated this support as it ensured people were always fully involved.

Respecting and promoting people's privacy, dignity and independence

- We observed positive interactions during the inspection. Staff knocked on people's doors to announce

their presence and asked people if they wanted to speak with us. Staff respected people's privacy if they wanted to stay in their rooms. Staff were aware if people did not want to be checked on at night. One support worker added, "We know not to disturb them and want to respect their privacy."

- One person told us staff were respectful to them. Comments from relatives included, "[Family member] has become much more independent and staff have helped with managing intimate personal care. I can't praise them enough for this" and "The most positive point about the service is how they promote their independence."

- We saw workplace supervisions and team meetings focused on the culture of the service and discussed with staff the importance of promoting independence and encouraging people to do what they can for themselves. Staff also discussed examples of how they respected people's privacy and dignity.

# 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 good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

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

- An established staff team had worked with people for a long time and knew how people liked to be supported. Staff that had started in the last year had spent time with people and shadowed senior staff to better understand people's needs. A senior support worker said, "New staff have settled in well and have certainly engaged with people. I can see they get on very well."
- People had regular opportunities to discuss with staff how they wanted to be supported. Monthly keyworker meetings discussed any changes in health, their medicines and what people were currently focused on. We saw people also had the opportunity to discuss what they wanted to do during a daily meeting.
- Staff were familiar with people's routines and we observed people's choices being respected throughout the inspection. People were also allocated time each week to go through the provider's 'MY L.I.F.E' programme, which was designed to help people build confidence and gain skills to live independently. Although not all people were actively participating, staff encouraged people to get involved each month.
- Relatives spoke positively about the flexible nature of the support provided and felt the service provided personalised care. One health and social care professional said, "The staff have a good rapport with people and know what works best for them. It is really supportive."

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 regularly supported to spend time with their relatives and we saw two people regularly return home to see their families. One relative said, "They bring [family member] back every weekend and we are happy with how it works."
- People were supported to be part of their local community and were encouraged to take part in activities to improve their health and wellbeing. We saw people attended the gym, went to local day centres, went to the cinema and had house picnics in the local park.
- The provider supported people's religious and cultural needs. One person was supported to the mosque every Friday and staff had bought them a prayer mat to use at home. We also saw people enjoyed their cultural foods.
- People's birthdays and cultural events were also celebrated across the service and people were encouraged to get involved. The registered manager had introduced a significant events folder where they had photographs of house events. One person was supported to buy cultural clothes for a birthday party.

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 communication needs were assessed and staff had a good understanding of how to meet their needs. Easy read documents were made available to people to aid their understanding when completing satisfaction surveys to get feedback about the service.
- Staff were able to speak with people in their own language and we saw examples throughout the inspection where people became more vocal and engaged when speaking with staff who could communicate with them.

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

- There was an accessible complaints policy in place. There had been no complaints received since the last inspection. This was discussed in team meetings and staff checked if people had any concerns during keywork sessions.
- People we spoke with told us they did not have any concerns. Relatives told us they knew how to make a complaint and would feel comfortable raising any issues if they had any. One health and social care professional said, "I've never had any complaints from any of the residents. They have flourished whilst there to live independently."
- The registered manager had shared a CQC campaign with the staff team, called 'Declare your care.' This campaign encouraged people and their relatives to give feedback about their care and support and raised awareness about their rights to raise concerns.

#### End of life care and support

- People were not being supported with end of life care at the time of the inspection. The registered manager confirmed it was an area that would be discussed with people if it was something they wanted to address. They were also aware of what support they could access if people's health deteriorated.

# 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 good. At this inspection this key question has remained the same. 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

- People told us they were happy living at the home. Relatives spoke positively about the management of the service and how it had a positive impact on their family member's. Comments included, "I have to say they are all very good. They are open and honest and do everything they can for [family member]" and "They are professional and relaxed. It is a very welcoming environment."
- The provider's vision was to be a leading rehabilitation service preparing people recovering from a mental health diagnosis to have a sustainable and independent life. Their vision was regularly discussed at meetings and supervisions reminding staff to be committed and accountable. The registered manager said, "We must put people at the centre of their care and support them with what they want to do."
- Staff complimented the management of the service and felt the support they received contributed to people's positive outcomes. One senior support worker said, "I love working here. It is a wonderful place with a very open environment. I can't ask for anything more."

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

- The registered manager was committed to ensuring the staff team were fully aware of their responsibilities. CQC regulations were regularly discussed across the service at team meetings and supervisions.
- Senior staff had clinical and management support and CQC requirements had been discussed, including reviewing case studies of poor practice that had resulted in legal action.
- Key policies and procedures were displayed in the office, including specific procedures for people related to their medicines and finances. Clear and detailed information was also outlined for keyworker, senior staff and night shift responsibilities for staff to follow.

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 was aware of their responsibilities of making sure they were open and honest with people and their relatives. The importance of honesty and integrity was regularly discussed with the staff team.
- Relatives and health and social care professionals were confident with the management of the service and had a good level of trust with the staff team.



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

- The provider sought people's and their relative's views about the care and support received through satisfaction surveys twice a year. People were encouraged to give feedback and all responses were positive. A comment from one relative said, 'It is a very happy environment. You look after my [family member] to the best of your ability and I'm happy with everything.'
- Staff also spoke with people and their relatives on a monthly basis for feedback as part of their keyworking responsibilities. People also had opportunities to be involved in the service through daily house meetings. We sat in on both meetings during the inspection and people were encouraged to chair the meeting and what they wanted to discuss.
- Staff were positive about the support they received and commented on the strong sense of teamwork and working environment. One staff member added, "They are there for us and we are respected. It is like a family here."
- Staff also completed feedback forms twice a year. All feedback forms were positive and staff praised the teamwork and the personalised support people received.

Continuous learning and improving care

- There were robust systems in place to monitor the service and ensure people were receiving a good standard of care. Regular team meetings and weekly senior staff meetings discussed areas of the service, weekly health and safety checks, training and staff responsibilities.
- A range of daily, weekly and monthly audits across the service were in place to help identify any issues. For example, people's finance records were checked three times a day at each handover and then audited weekly. A support worker said, "We also have a keyworker checklist in place which we review every month to ensure everything is being done."
- The provider also recruited an external consultant to carry out a range of unannounced visits to check the home was following CQC requirements. We saw there had been five visits since the last inspection in October 2017 and recommendations had been followed up. There were themed visits which covered areas including infection control, medicines, people being involved in their care and good governance.
- A health and social care professional told us staff would get in touch for advice and were always receptive to any feedback. A member of staff said, "The [healthcare professional] told me that we are helping people to improve people's health. It is great to know we are learning and doing a good job."

Working in partnership with others

- The provider worked closely with a range of health and social care professionals, including the Community Mental Health Team, to seek advice and guidance related to people's health concerns. One health and social care professional said, "It is a very positive place and I have never had any concerns."
- We saw people were encouraged to be part of their local community. The home had links with local day centres, cultural groups and when they supported people to the nearby gym.