

The Orders Of St. John Care Trust

OSJCT Gregory House

Inspection report

Welby Gardens
Grantham
Lincolnshire
NG31 8BN

Tel: 01476562192
Website: www.osjct.co.uk

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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

This unannounced inspection took place on 1 September 2017. This residential care service is registered to provide accommodation and personal care support for up to 32 people. At the time of the inspection there were 30 people living at the home.

At the last inspection in December 2014 this service was rated as good.

At this inspection the service was rated overall outstanding.

There was a registered manager in post at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The service demonstrated an excellent commitment to providing outstanding care which was embedded into the practices of the staff and the management team. The service put people's views at the forefront of the service and designed the service around their needs. Staff were encouraged and enabled to work creatively which achieved consistently outstanding outcomes for the people receiving care and support. There was a strong system of quality assurance led by the provider and manager that ensured people consistently received exceptional care and support.

The registered manager was inspiring and dedicated to providing care which met the highest of standards. They strived for excellence through consultation, research and reflective practice. They were passionate and dedicated to providing an outstanding service to people. They led with a dynamic approach and continually reflected on how to improve the service further. They demonstrated a strong and supportive leadership style, seeking feedback in order to further improve what was offered. The provider's vision and values were understood and shared across the staff team.

The service was exemplary in responding to people's needs and preferences. People were supported by a service that was devoted to getting to know the people they supported. Relatives told us the service was responsive and well managed. The service sought people's views and opinions and acted upon them.

People were supported with care and compassion and there was an ethos of care which was person centred and valued people as individuals. People received a personalised service which was responsive to their individual needs and there was an emphasis on each person's identity and what was important to them from the moment they moved into the service.

There were sufficient staff to meet people's needs. Staff were not rushed in their duties and had time to chat with people. Throughout the inspection there was a calm atmosphere and staff responded promptly to people who needed support. The service had robust recruitment procedures and conducted background

checks to ensure staff were suitable for their role.

Care records contained risk assessments and risk management plans to protect people from identified risks and helped to keep them safe. They gave information for staff on the identified risk and informed staff on the measures to take to minimise any risks. People were supported to take their medicines as prescribed and medicines were obtained, stored, administered and disposed of safely. People received care from staff that were supported to carry out their roles to meet the assessed needs of people living at the home. Staff received training in areas that enabled them to understand and meet the care needs of each person and people were actively involved in decisions about their care and support needs.

Staff had received training in the Mental Capacity Act 2005 (MCA) to make sure they understood how to protect people's rights. There was guidance in relation to the MCA and people were asked for their consent before staff carried out any care or treatment. CQC monitors the operation of the Deprivation of Liberty Safeguards (DoLS) which applies to care homes. The registered manager, registered provider and staff ensured that people were supported in ways that did not restrict their freedom and were supported appropriately to uphold their rights.

A variety of choices of food and drinks were offered at the home. Staff supported people to eat and drink with patience and dignity. People told us they had good access to their GP, dentist and optician. Staff at the service had good links with healthcare services and people told us they were involved in decisions about their healthcare. People who used the service were supported to obtain the appropriate health and social care that they needed.

Care plans were written in a person centred manner and focussed on giving people choices and opportunities to receive their care how they liked it to be. They detailed how people wished to be supported and people were fully involved in making decisions about their care. People participated in a range of activities and received the support they needed to help them do this. People were able to raise complaints and there was an easy read guide to support people through the process.

Robust quality assurance reports had been developed, incorporating all elements of requirements relating to legislation, Care Quality Commission guidance, best practice guidelines, along with evidence of how each area was being met. Continual auditing was carried out to ensure the safety and quality of care that was provided, using information from the audits to drive continual improvement.

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 remains good.

Is the service effective?

Good ●

The service remains good.

Is the service caring?

Outstanding ☆

The service was extremely caring.

Staff provided kind, dignified and respectful care to people.

Staff knew people very well, and acknowledged people's individual needs and preferences.

People's rights to independence, privacy and dignity were valued and respected.

People were supported to express their views using a range of methods and people were encouraged to influence how the service was run.

People were at the centre of their care and they were consistently involved in planning and reviewing their own care. Relatives and friends were encouraged to contribute to care planning.

Is the service responsive?

Outstanding ☆

The service was very responsive.

The service was outstanding in responding to people's needs and preferences.

The service was devoted to getting to know the people they supported.

There was a clear focus on the importance of knowing peoples histories and involving relatives at every point of peoples care.

The service delivered a high standard of personalised care that

was embedded within staff practice.

People had access to a wide range of meaningful activities which were tailored to individual needs.

Is the service well-led?

Outstanding 

The service was exceptionally well-led.

The service had a positive, person-centred and open culture.

The registered manager and the provider were dynamic and led by example, continually seeking to improve what the service offered to people.

Robust quality assurance processes ensured continual monitoring of safety, quality and effectiveness of the service.

OSJCT Gregory House

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This inspection took place on 1 September 2017. The inspection was unannounced and was undertaken by one inspector.

Before our inspection, the provider 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.

We reviewed the information we held about the service, including statutory notifications that the provider had sent us. A statutory notification is information about important events which the provider is required to send us by law.

During our inspection we spoke with 12 people who lived at the home, four relatives, six care staff, the activities coordinator, the cook, a kitchen assistant and the registered manager.

We looked at care plan documentation relating to six people and four staff files. We also looked at other information related to the running of and the quality of the service. This included quality assurance audits, maintenance schedules, training information for care staff, staff duty rotas, meeting minutes and compliments and complaints

We spent some time observing care to help us understand the experience of people who lived in the home.

Is the service safe?

Our findings

People felt safe where they lived. One person said "I love living here; I am really happy; I should have moved here sooner." It was clear through observation and general interaction that people felt safe and comfortable in the home. The provider had procedures for ensuring that any concerns about people's safety were appropriately reported. All of the staff we spoke with demonstrated an understanding of the type of harm that could occur and the signs they would look for. Staff were clear what they would do if they thought someone was at risk of abuse including who they would report any safeguarding concerns to. Staff said they had not needed to report any concerns but would not hesitate to report abuse if they saw or heard anything that put people at risk. One care staff said "If I thought no-body was listening to my concerns I would report it; we are here to make sure people are safe; no hesitations." Staff had received training on protecting people from abuse and records we saw confirmed this.

People had individual risk assessments to enable them to be as independent as possible whilst keeping safe. They covered a variety of subjects including, moving and handling and pressure care. Risk assessments were used to promote and protect people's safety in a positive way. We also saw a range of risk assessments in relation to the activities people took part in. Staff told us, and records showed they were reviewed on a regular basis and updated when required.

We saw that the provider regularly reviewed environmental risks and the registered manager told us that they carried out regular safety checks. We noticed that the environment supported safe movement around the building and that there were no obstructions.

There was enough staff to keep people safe and to meet their needs. People told us there were staff available when they needed them. One person said, "If I need someone they [Staff] are always there. If I press my buzzer [Call bell] they are there in a flash!" One relative told us "Never any issues with staffing, always enough staff and they are always pleasant." Staff told us they felt there was enough staff available to meet people's needs and to ensure people received good support throughout the day and night. The registered manager spent some time around the home to help support people whenever they could and to observe staff's practice. We observed that the levels of staffing allowed each person to receive appropriate support from staff.

Staff were recruited following a thorough procedure. One staff member told us, "The whole process was very thorough. I had to wait until they had all my references and checks before I could start work." Records showed that recruitment checks had been completed for staff before they commenced work at the service which included references and background checks.

People told us they always received their medicines as prescribed. One person said, "I could set my clock by them; always on time." We observed medication being administered. This was carried out correctly and records were fully completed. We saw that the medicines management systems in place were clear and consistently followed.

Is the service effective?

Our findings

People received care from staff who had the knowledge and skills needed to carry out their roles and responsibilities effectively. People who used the service and their relatives we spoke with consistently praised the skills of staff working in the service. One person said "The staff are very well trained; they are always having a different training course to go to." A relative told us "I don't know what exact training the staff have but whatever they have, it works! I have never known such dedicated and competent staff." A staff member told us, "training is really good; we have all the basic training and refreshers but we also do scenario based training; it is really effective and makes you think" This training was based on 'real life' scenario's for example; communication with a person who is admitted to the home in an emergency and English is not their preferred language. There was a list of resources that staff could refer to ensure they could meet people's needs.

New staff received a thorough induction which included classroom based learning and shadowing experienced members of the staff team. The induction was comprehensive and included key topics on manual handling, dementia awareness and health and safety. The induction was focussed on the whole team approach to support people to achieve the best outcomes for them. One staff member told us "I am currently on induction; it is really comprehensive; what I love about this home is everything is about the residents; I absolutely love it here." The provider was following good practice guidelines for newly recruited staff and all new staff who didn't have a care qualification undertook the Care Certificate. The Care Certificate is a nationally recognised set of standards that health and social care workers should adhere to in order to deliver caring, compassionate and quality care.

The provider's mandatory training and service specific training was refreshed annually. Staff spoke positively about the training they received; one care staff said "The training I completed on dementia awareness was brilliant; it made me think about how to approach someone and why it is so important to be more patient." Staff were provided with the opportunity to obtain a recognised care qualification through the Qualifications and Credit Framework (QCF).

People's needs were met by staff that received regular supervision and received an annual appraisal. We saw that supervision meetings were available to all staff employed at the home, including permanent and 'bank' members of staff. The meetings were used to assess staff performance and identify on-going support and training needs. One care staff said "I have regular supervision, although I don't need to wait for supervision to talk about anything [with the manager/team leader] I can just bring concerns up."

People who lack mental capacity to consent to arrangements for necessary care or treatment can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS). We observed staff gaining consent throughout the inspection. For example people were asked if they wanted assistance, were ready for their medication or where they wanted to eat their meal and choices at meal times. We saw that when people needed to be deprived of their liberty appropriate applications had been submitted to the local authority.

People told us they enjoyed the food. One person said, "I like the food. Its lovely just like home made. We get plenty of it." A relative told us, "I know [relative] enjoys the meals. [Relative] always tells me what she has eaten and how much they have enjoyed it." We saw that there was always choices available at every meal but people could also choose any meal that wasn't on the menu. One person told us "The service here is like a hotel, only the food is outstanding! We have a starter at every lunch time meal and six choices for dessert, all home cooked and fresh." Another person told us "I have a cooked breakfast every morning; what a great start to the day!" Records showed that when people who were at risk of not eating and drinking, professional advice had been sought and acted upon. For example; people who were at risk of choking had the correct consistency of their food and drink.

People confirmed they were supported to maintain good health and have access to relevant healthcare services. One person told us, "I never have to worry; they will call the doctor straight away if I need one." Staff told us if they were worried about someone's health they would report it straight away. Records demonstrated that referrals were made to relevant health services when people's needs changed, and a log of visits to and from external health care professionals was maintained in people's care records so there was a clear audit trail of healthcare intervention.

Is the service caring?

Our findings

People were treated with care, compassion and great kindness. People, their relatives and professionals involved in the service consistently commented on the exceptionally caring approach the staff at the service provided. One person said, "The care here is very good, very good indeed; in fact that doesn't do it justice; it is the best anyone could get anywhere!" Another person said, "I cannot fault them; honestly, I thought coming to live in a care home was the end of the road for me; if only I knew it was the beginning of a new chapter." One person's relative complimented the whole staffing team. They said, "Not only does [Person] get the best care but we feel cared for as a family; the whole team look after us superbly."

The registered manager was passionate about ensuring all of the staff understood how to meet people's needs in relation to their diverse cultures and backgrounds. Staff were provided with information on people's individual religious beliefs; which detailed what was important to the person and how to support them specifically in relation to their cultural wishes. The service accessed interpreters for people whose preferred language wasn't English. The registered manager told us, "It is so important we meet people's diverse needs and straight away as soon as they come in to the home or before if we can." An example given was an emergency respite place was required for a person who did not speak or read English. By the end of the first day of the person being in the home an interpreter had been sourced through the good relationship the service had with the local community centre and the person's preferences and care needs, menu choices, fire procedure and assessment of need had been written and translated to the person's preferred language.

People were supported by a staff team who knew their preferences and showed an enthusiastic interest about their previous lives before they came to live at Gregory House. Each person had a life story document which was completed with them and their relatives and helped staff to deliver person centred care. Each person also had an 'all about me' information section in their plans of care which focussed on key pieces of information about a person. For example; one person's 'all about me' plan explained the person liked fresh air and enjoyed sitting in the garden, including in the colder months with a coat on and blanket around their legs, they enjoyed watching animal documentaries, liked to read the daily paper. Another person's plan explained where a person was most comfortable sitting and they liked reflexology on their hands. All of the staff we spoke with were able to tell us about people's individual needs, how they ensured they delivered person centred care and about each person's preferences. Photographs in the home evidenced that people enjoyed these experiences regularly.

People and their relatives told us the registered manager and staff team went the 'extra mile' for people. One person who used to live on a farm before they moved to Gregory House told the staff she missed the farm. The staff team along with a group of volunteers transformed an area of the garden into a farm yard with true to life sized ornamental farm animals and associated farming objects. On the day of our inspection this person was sitting in the garden next to the farm area; this person told us, "Isn't it wonderful; I sit out here often next to my animals." This person went on to tell us what a difference the farm area had made to her life and commented that the staff team were "Wonderful caring people who had made an old lady happy."

The team of staff at Gregory House also went the extra mile when people who lived at the home passed away. The activities coordinator told us "We feel it is so important for relatives and residents to be able to have some sort of closure when a person dies and also to celebrate the life of the person." They went on to tell us that when a person dies the people living at the home and staff put together a memorial speech which, with relatives permission is read out at the person's funeral. The feedback the home had received on this gesture evidenced how much it was valued by relatives. Feedback included "We were humbled by the kind words read out at [Person] funeral" and "We wanted to say a massive thank you, not just for caring for [Person] in the last few years but for creating more memories and sharing them with every one of the day of the funeral; we will be forever grateful." We were also told that Gregory House offers families to opportunity to have the wake at the home. When a person died who lived in the home the people were told in a caring and thoughtful manner and inclusively. One person told us, "It is always sad when one of us goes [dies] but we are all informed and then we have get together and have a sort of remembrance session where we laugh and cry and talk about the person; it makes me feel like when it's my time I won't just be another number, I will be remembered and celebrated as well; it is comforting." The staff team at Gregory House all benefitted from end of life care training and knew how to support people and their families and how to access medical support from other health care professionals.

The staff at Gregory House made every interaction with people a positive experience. We observed people who chose to eat in their rooms had their food on trays with a mini vase of flowers, a condiment set and napkins. We observed on many occasions the staff team informing someone who was sight impaired what was happening around them, who else was in the room, what food the person was eating when they were being supported to eat and who else was sitting at the table with them. These interactions were continuous throughout the day and done with sensitivity and dignity. This person told us "The staff are my eyes and they know I like to know everything."

Without exception there was a person centred approach to everything the service offered and people were treated with dignity and respect. One person said, "I feel respected here. I'm treated as an important person and my decisions and choices are respected." Care records for people repeatedly referred to maintaining people's dignity and respect. People told us about 'do not disturb' signs that they had in their rooms which they were able to hang outside of their bedroom doors. The registered manager told us "People have a right to privacy and if someone doesn't want to be disturbed we should absolutely respect that so we came up with signs and people use them." Feedback from people evidenced that all staff respected their privacy and dignity. One person told us "They [Staff] don't just treat us well because it's written down; it's in their nature. I've never had anyone help me who hasn't shown me the utmost respect."

Relatives and visitors told us they were welcomed at any time at the home. One person told us, "I have lots of visitors and they come at all different times of the day; they don't have to telephone first." One relative told us "It is always a pleasure coming here; the staff are always smiling and friendly and we can visit at meal times; there is a lovely little room where we can enjoy a meal together as a family; we really appreciate that." Visitors to the service explained they were able to meet in quiet areas if they needed privacy and always felt welcome.

Information on advocacy services was available for people and their relatives. Advocacy services were promoted and the service was a member of the Care Aware Advocacy Services which is a non-profit making public information, advisory and advocacy service specialising in elderly care for people and their relatives. Posters advertising advocacy services and how people may benefit from these services were on display in the reception area of the home. No-one was currently using advocacy services but people had used them in the previous year.

Is the service responsive?

Our findings

We received consistent positive feedback from the people we spoke with who lived at Gregory House. Feedback included, "It is such a marvellous place, it is like a little ray of sunshine. I came here for respite and thought I would give it a try; I chose not to go back home!" And, "I've been here for ten years and my [Relative] is also here. Trust me if I didn't like it here I would have been off years ago! It is a wonderful place to live." And, "We are treated like guests, not in a formal way but they always want to do more for us and please us." Relatives also spoke highly about service provision. Comments included, "It doesn't matter when I visit, from the gardens, to the care home, the food, care, thoughtfulness and expertise of staff is second to none." Feedback from a relative's compliment card also included, 'A sincere hope that all care homes would exercise such professionalism, patience and love of their work in caring for people as you all do.'

People consistently commented on the positive impact the service had made on their lives and how they had changed for the better. One person said, "I really didn't want to come here because of losing my independence; I've not often been proved wrong but I was on this occasion! I feel like I've been given a new lease of life and I am experiencing new things, at my age!" Another person told us "It is lovely here, I thought my working days were over but I now help with interviewing staff; I've even got my own name badge; I feel like I matter again."

People had comprehensive assessments before they came to live at Gregory House to determine if the service could meet their needs and they were happy to live there. The assessment included understanding people's backgrounds, preferred language, religious beliefs, histories and what was important to them including their views, preferences and aspirations. If time allowed, people and their relatives met with staff and other people living in the home to make an informed decision if Gregory House was the right place for them. One relative told us "[My relative] was in hospital when they came out to complete the assessment; they were really thorough and I was impressed with the attention to detail about routines and how they could give [My relative] more than just standard care."

During the initial assessments information was gathered from each person and those involved with their care to produce a detailed support plan and comprehensive risk assessments were completed specifically for each person on their arrival. The service also accepted short term referrals and worked efficiently and effectively with the person and those around them to welcome them into the home and understand the care and support they required. The assessment and care planning process considered people's values, beliefs, hobbies and interests along with their goals for the future. For example; it was clear in person's care plan that they enjoyed playing the piano and the person and their relatives wanted this to continue. This person told us that they regularly played the piano to entertain other people living at the home. Another person who used to work in human resources spoke in detail at the initial assessment stage about how important her job role was to her as she felt it gave her a purpose. We saw that the registered manager embraced this opportunity to involve the person in the recruitment processes and interviewing potential staff. People were fully involved in the care planning process and their voice was documented throughout their care plans.

People were supported with activities in the home and in the local community by an activity coordinator

who everyone thought very highly of. People and relatives said the activities were "first-class" and "creative and inspiring." One person told us, "[The activity coordinator] is like a little star, always coming up with good ideas and getting us involved in something." Along with in-house activities the activity co-ordinator organised trips out to an old time music hall, local café's and arranged in the summer months for an ice cream van to visit the home on a weekly basis.

People enjoyed an enhanced quality of life and a variety of social inclusion opportunities due to the excellent links the home had with the local community. The volunteers were made up of relatives and friends of people who lived or used to live at Gregory House; local school and college volunteers, Duke of Edinburgh students and people from the local community. Gregory House was a home which was valued by the community and brought local people together to support the people who lived there.

Volunteers had supported the home to enhance the garden area. There was a wild life area which was home to many animals including a frog pond, ant houses and hedgehogs; a person's relative made Hedgehog houses and cottages which were named and people were proud to show us these. The home won the The Orders of St John Care Trust wild life competition. Volunteers with support from people living at the home had created wall murals which were brightly painted and included sea life creatures and enhanced the outside of the building. A large boat in the garden was used as a garden planter and contained a stunning display of flowers. One person told us, "Isn't that lovely; [The boat] just brightens my day every day I come into the garden; what a marvellous job everyone did." In addition to the farm yard scene there were beach themed areas, various bird feeding stations, greenhouses with tomatoes and vegetables which people took great care tending to.

Volunteers also enhanced the front of the home and made what was called a 'kerb appeal'. Supplies were donated from the local community and large planters and cobbled stones were used to create a very effective appearance which was also low maintenance. One relative said "How fantastic and welcoming does the front of the home look; the volunteers did a brilliant job."

People also benefitted from a range of activities with in the home. These included pottery sessions, silk painting, music matters sessions where people can play a variety of instruments, exercise and mobility sessions, singers/entertainers. People also told us about 'pub night' which they thought was a fantastic night. Every month pub night involves darts, singing, pie and peas and a variety of refreshments. One person told us "We always have a great pub night; I really look forward to it." People, their relatives and staff were also involved in organising summer fete's and BBQ to help with raising money for the resident's fund. The activity coordinator told us they have enough money raised to purchase a summer house which was on people's 'wish list'.

There were arrangements in place to gather the views of people that lived at the home. Residents meetings had been held regularly and people discussed events and activities that they wanted to be included in the events calendar. We saw when reading through some minutes to a recent meeting that people were able to vote for the guest of honour at the recent summer fete. Other discussion topics were voting in local elections; we saw from photographs that people were supported to local polling stations and also with postal votes.

The provider also sought people's views about any changes to the home, structure and staffing. For example; the colour of the staff uniforms had changed and people said they were not too keen on the changes. The provider took the opportunity to seek people's views and for people to choose a new colour scheme which they felt was suitable. One person told us "I got confused with the new colours but we all had a chart where we could pick the colours that we wanted and they are going to change it."

People we spoke with repeatedly said they had no complaints about the service. Feedback included, "My only complaint is that I don't always have time for my afternoon sleep because there is always something going on which I want to be involved in!" And "Everything has been just how they promised from day one, it wasn't just talk, they actually do it."

The service provided each person who lived at the home with a service user guide when they moved into the home. The service user guide contained information detailing how to complain and highlighted the right to complain. This demonstrated the service worked proactively to address complaints. We reviewed the way one complaint had been handled and we saw that it had been investigated appropriately and the registered manager had taken robust action to ensure it was resolved to the person's satisfaction and lessons learnt from the complaint embedded future learning.

Is the service well-led?

Our findings

People were at the heart of the service. There was a positive, inclusive and open culture which centred on improving the service it provided for people. The registered provider and registered manager placed a strong emphasis on continually striving to improve the service. They demonstrated to all staff the values, ethos and expectations of providing a high quality individual service to people and their family. The registered manager was innovative in their approach to providing care and support and encouraged the staff team to be the same. New ideas were actively sought to enhance the quality of service provided. A member of staff told us, "I absolutely love it here. Everything is about the residents and how we can make their life more enjoyable. I never worked in care before I came to work here but Gregory House has such a good name in the community I thought I would see what I could offer and I've never looked back." A relative commented, "It is all about good management and leadership, when you have someone good at the helm you can't go wrong and that's what make this home so good."

The registered manager had a clear vision of the quality of service and this was shared by staff. This included the values of choice, inclusion, independence and a feeling of being 'at home'. One staff member told us they aimed to, "Do everything we can to make sure the resident is happy." Another staff member said, "All of the team treat the residents like they are one of their own relatives that is why it works so well." A third staff member told us, "We are guests in the residents home and we never forget that; everything we do is focussed on making it feel like home and giving people what they want and when they want it." Feedback from people was consistently positive about the 'home from home' feel to the service.

The whole staff team understood and shared the culture, vision and values of the service in its main objective to provide high quality care and continued positive life experiences to those who used it. The management team had developed and embedded a positive culture which ensured that people were at the heart of the service. People told us they were very happy with the quality of the service they received, because it felt like their home. One person told us, "I liked it so much here that I got [My relative] to move in as well." One relative commented "Just wonderful management and staff, they are conscientious and efficient. Innovative volunteers who exceed all expectations. Gregory House is a home from home."

The manager had created an open and transparent culture with the staff team, staff told us they felt confident going to the manager with any concerns or ideas and they felt that the manager would listen and take action. One member of staff told us "[The manager] is really good, they listen to our ideas; for example we had an idea to have a live band when we had the fete in the summer for residents and their families and we were supported to plan it; it was a great day." Another staff member staff "[The registered manager] is really good, if we make a mistake we use reflective practice to go over the events to see why and how something went wrong and what we would different in the future. This approach helps to say when things go wrong or to raise concerns."

Staff were encouraged to support and value each other to ensure they worked effectively as a team. They were focused on ensuring that each person's needs were met and shared information to ensure all staff had the most up to date information on the person which enhanced the care delivery and provided the best

outcomes for people. Staff clearly enjoyed their work and told us that they received regular support from their manager. One care staff told us "I love working here, we all give quality care and that is why I have been here for so long." Staff meetings took place on a regular basis and minutes of these meetings were kept. Staff said the meetings enabled them to discuss issues openly and was also used as an information sharing session with the manager and the rest of the staff team. The manager worked alongside staff so were able to act as a role model, observe their practice and monitor their attitudes, values and behaviour.

The provider valued the dedication of the staff team and the care they provided to people and offered many additional benefits. To show their appreciation and to continually build on the positive professional working relationship; the provider offered reward schemes which included discounts at various shopping and leisure outlets, staff's families were also able to benefit from these reward schemes. The provider also offered a flexible working scheme, paid breaks, life assurance and many other additional benefits which staff told us they really valued. One member of staff said "The Orders of St John Care Trust [OSJCT] is a fantastic company to work for; we get lots of benefits and professional career support. I've never worked for a company who offers everything that OSJCT do."

People benefitted from a consistent and stable staff team because the provider invested in staff and encouraged career progression to ensure OSJCT had a secure future. Staff received comprehensive learning and development and were encouraged to progress their careers with the newly developed 'training and talent management' team who focused on every individual's development. Formal supervision meetings had been redesigned so the emphasis was learning, reflection and 'doing our jobs well' and the monthly meetings took the shape of on-going conversations. One staff member told us "We are just starting the new supervision forms; I think the idea is great because OSJCT always focus on looking after the staff, so the staff can look after people well."

The registered manager and staff team had developed excellent links with the local community which people benefitted from. For example, the home was supported by volunteers from three different schools and colleges, Duke of Edinburgh Award schemes, The Grantham bikers club donated Easter eggs for the Easter bonnets celebrations, local garden centres and builder merchants donated items for the 'kerb appeal'. The registered manager also thanked people, relatives and the community for their support and placed 'thank you' notices in the local media.

Communication between people who lived at Gregory House, their families and staff was always open and transparent and this leant itself to forming positive open relationships where trust was upheld. The registered manager and the care staff talked positively about people's relatives and how important it was to maintain a good relationship with them. One relative told us "The manager always has an open door, I am kept informed of everything and decisions are made with me which is so important to me." Another relative said "Communication is excellent."

People and staff were empowered to voice their opinions, and the management always responded to comments put forward. People, their families and staff were provided with a range of ways in which they could express their opinions including 'care to talk' surveys, meetings and via a feedback station located in a prominent position within the service. People were kept well informed about what was going on at the service via a monthly newsletter which gave usefully information about forthcoming events as well as celebrating successes in the service and recognising special occasions and achievements of people and staff. People were encouraged to be involved and have ownership of what was happening in the service. There was a strong emphasis on continually striving to improve in order to provide a high standard of care.

There were robust quality assurance systems in place which meant the management team had clear

oversight of how the service was meeting people's physical, emotional and social needs. The registered manager undertook regular audits to ensure quality and safety. These were further supported by audits carried out by the area operations director and provider and included audits of care records, medication, complaints, safeguarding, emergency planning, accident reporting and Infection control. There was an open and transparent culture in the service. Where audits identified problems, records showed these were dealt with in a timely manner. Information gathered from auditing processes were used to drive continual improvement in the service.

The registered manager highlighted that they were also supported from all levels of the organisation. They told us, "I get great support from the area operations director. The area manager visits weekly and we also have monthly visits from a more senior person in the organisation. We are also encouraged to have good links with other OSJCT managers so we can all offer peer support which works really well." This strong working relationship meant that the provider was continually informed and updated and therefore had effective oversight of the service.

The provider and registered manager ensured they were up to date with current quality care initiatives and best practices. For example; The provider was a member of the National Care Forum [NCF], Quality First Commitment. Quality First is a framework which demonstrates the commitment of NCF members to providing a high quality and continually improving service. NCF unites members in a strong and compassionate community, shaped by not-for-profit values, supported by shared experiences and expertise, and dedicated to delivering ethical and accessible services. The provider was also a member of the Care Aware Advocacy Services.

The Orders of St John Care Trust was awarded a top 20 position in the carehome.co.uk large care home group. The carehome.co.uk Top 20 Care Home Group Awards 2017 highlight the most recommended Care Home Groups in the UK. Gregory House at the time of our inspection also received a carehome.co.uk rating of 9.5 out of a maximum 10. We viewed the feedback on the website and comments included 'We especially commend the care home manager and its entertainment manager. A nice friendly atmosphere, relatives are always made to feel welcome.' We noted that the registered manager had taken the time to respond to every comment that had been made and where suggestions had been made this had been acknowledged and actioned and feedback was provided.