

# Adelaide Care Limited

## Greenways

### Inspection report

Effingham Road  
Cophorne  
Crawley  
West Sussex  
RH10 3HY

Tel: 01342529442  
Website: [www.adelaidecare.com](http://www.adelaidecare.com)

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### Ratings

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

# Summary of findings

## Overall summary

### About the service

Greenways is a residential care home providing personal care for up to six people. It is housed in an adapted building providing residential care for people who have complex learning disabilities and care needs including autism and epilepsy. Greenways is located in a residential area.

The service has been adapted in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

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

Risks to people's health and safety had been identified and actions were in place to ensure risk was minimised. Staff were aware of the actions to take if they thought anyone was at risk of harm or discrimination. Any concerns identified had been reported to appropriate external professionals. A complaints procedure was in place and although there were no current complaints staff and relatives were aware of the process.

Medicine procedures and systems were robust with staff competencies assessed to ensure high standards were maintained. Suitable systems were in place to prevent and control infection.

People were empowered and encouraged to make choices and decisions and to achieve goals and aims. Relatives fed back positively regarding the achievements their loved one had made since moving to Greenways. Staffing numbers were assessed dependant on people's needs. Regular care reviews were completed, and the service worked closely with relatives and other health professionals to ensure consistent, person centred care was provided.

Staff had access to appropriate training and support to ensure they could meet people's complex needs. A consistent staffing group meant staff knew people well and understood their needs and preferences. People were encouraged to continue hobbies and interests that were important to them and supported to maintain relationships with friends and family.

People's needs and choices were well documented and understood by staff. It was evident that there was a close relationship between people and staff. People and their relatives were involved in the planning of care and any changes to the way care and support was delivered. People's care was tailored to the individual

considering their personal preferences and support needs. People who had behaviours that may be challenging had clear guidance in place to ensure positive behaviour support was followed. People's communication needs were identified and recorded in support plans with specific methods and choice cards used to facilitate communication with people.

People were supported to have a varied and nutritious diet with healthy options provided and encouraged. People's health and weight was monitored, and referrals made to other agencies if any issues were noted.

The registered manager and staff placed emphasis on person centred high quality care. There was an open culture which was inclusive and valued people and their individuality. Staff were aware of their roles and responsibilities. Greenways had a relaxed, open and welcoming atmosphere which relatives told us made it a happy place for their loved one to live. The registered manager worked with staff each day to provide people with a good quality of care. Regular checks and audits were carried out to ensure the quality and safety of care being provided was maintained.

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 Requires Improvement (published August 2018)

#### 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

### Is the service effective?

Good ●

The service was effective

### Is the service caring?

Good ●

The service was caring

### Is the service responsive?

Good ●

The service was responsive

### Is the service well-led?

Good ●

The service was well- led

# Greenways

## Detailed findings

### Background to this inspection

#### The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

#### Inspection team

The inspection was carried out by one inspector.

#### Service and service type

Greenways is a care home. People in care homes receive accommodation and nursing or personal care. 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:

This was an unannounced, comprehensive inspection. The inspection was carried out on 23 July 2019.

#### What we did before the inspection

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 reviewed information from other agencies and statutory notifications sent to us by the registered manager about events that had occurred at the service. A notification is information about important events which the provider is required to tell us about by law.

#### During the inspection

People were not able to tell us their views of living at Greenways, so we observed support being delivered in communal areas. This enabled us to see interactions between staff and people and observe support being

provided.

We spoke to four staff including the registered and deputy managers and care staff and looked at a range of documentation. This included two peoples care and support folders in full and one further care plan to look at specific areas of care. We reviewed documentation relating to the day to day running of the service, including staff recruitment records for a newer member of staff and one current staff member, training and supervision records and meeting records. We also looked at medicines documentation, quality assurance and maintenance.

After the inspection

We received feedback from six relatives of people living at Greenways.

# 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 Requires Improvement. At this inspection this key question has now improved to Good. This meant people were safe and protected from avoidable harm.

### Assessing risk, safety monitoring and management

- At the last inspection we made a recommendation that the provider made improvements to the environment to ensure people's safety. At this inspection we found the service provided a safe environment for people.
- Risks to people's safety had been identified and associated risk assessments completed. For example, risks in relation to activities attended or specific risks in relation to a person's health and behaviours if anxious or upset.
- Risk assessments were reviewed regularly and updated when changes occurred. Staff felt they had the information they needed to be able to meet people's needs safely. Relatives told us that the registered manager and staff followed guidance and took all appropriate steps to ensure people remained safe, this included consulting with social workers and other health professionals when needed.
- Risk assessments associated with the environment had been carried out by external professionals, including gas safety, legionella for water safety and personal appliance testing for all electrical equipment.
- Regular fire safety checks took place including fire evacuation drills. People had personal emergency evacuation plans which included details on how to support them in the event of an emergency.

### Systems and processes to safeguard people from the risk of abuse

- People were protected against the risk of harm or abuse as staff had received training and were aware of their responsibility to safeguard people. Information was available for people and staff on how to raise a concern. Staff told us they would report any concerns directly to the registered or deputy manager.
- The registered manager had notified relevant persons including the local authority and CQC in line with local safeguarding policies and procedures when required.

### Staffing and recruitment

- There was a core group of staff, many of whom had worked at Greenways for some time. Staffing levels were appropriate to meet people's needs. Staff were seen to respond to people promptly when they needed support or assistance.
- Staffing numbers were reviewed and assessed dependant on people's needs. People required one to one or two to one support at specific times, for example, when receiving assistance with personal care, in communal areas of the home, going out or attending activities.
- The provider had other services in the nearby vicinity, this meant there was a bank of staff available to provide support if needed due to staff sickness. The registered manager told us staff would only work with people at Greenways if they knew them well, as people had complex needs and some did not respond positively to new faces.

- Safe recruitment and selection procedures were in place. All required safety checks including references and Disclosure and Barring Service (criminal record) checks took place before a person could start work at the service.

#### Using medicines safely

- Medicines were provided safely in line with national guidelines. There were systems in place for ordering, storing, administration and disposal of medicines safely.
- Each person had guidance in place to inform staff how they liked their medicines to be given. A medicine administration record (MAR) chart was completed each time medicines were given. MAR charts were colour coded to assist in administration and included 'as required' (PRN) medicines. PRN medicines are those taken when they are needed, for example when a person is in pain. There were detailed protocols that clearly informed staff when to give PRN medicines and how people liked to take them.
- Staff received medicines training to ensure they could safely administer specific medicines prescribed to people, and competencies were assessed by senior staff to ensure medicine practices continued to be safe and accurate.

#### Preventing and controlling infection

- Suitable measures were in place to prevent and control the risk of infection. Staff were responsible for the cooking in the home. Guidance was in place and they had received training in relation to safe food hygiene when preparing and storing food.
- Staff had access to protective personal equipment, such as gloves and aprons, if needed and there were adequate handwashing facilities throughout the home.
- All areas of the home were clean. People were supported to be involved in household chores if appropriate. A relative told us "Whenever I have visited Greenways the home is always immaculate."

#### Learning lessons when things go wrong

- Accidents and incidents were recorded by the person who witnessed them. Forms were then given to the registered manager for review and action.
- All accidents and incidents were responded to appropriately to ensure people's safety was maintained. Including referrals to other agencies and notifications to CQC when required.
- Information regarding accident/incident investigations and outcomes, was shared with relatives and staff. When incidents had occurred, staff were given the opportunity to talk through events and any learning from the incident was taken forward to try and prevent a reoccurrence. For example, it had been noted that one person responded more positively to male staff. This was supported, and we saw this in practice during the inspection.



# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

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

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

- Care and support was delivered in line with current legislation and evidence-based guidance. Regular reviews were being completed to ensure people's outcomes were being met and they were being supported in the least restrictive way to encourage their independence.
- People had lived at Greenways for a number of years. A consistent staffing group meant staff knew people well and understood their needs and preferences.
- People's needs and choices were well documented and understood by staff. It was evident that there was a close relationship between people and staff and people were seen to respond positively when staff spoke to them or offered them support. Relatives told us staff went the extra mile to ensure people had opportunities to do the things they wanted.

Staff support: induction, training, skills and experience

- Staff had access to appropriate training and support. This included updates and refreshers when needed. Training included fire safety, Mental Capacity Act (MCA), Deprivation of Liberty safeguards (DoLS), safeguarding, moving and handling. Further specialist training was also provided, this included epilepsy and autism training.
- New staff completed an induction. This included spending time shadowing other care staff, observing and getting to know people's needs and reading their care documentation. New staff also read policies and procedures before they provided care.
- Staff received regular supervision and annual appraisals. Senior staff carried out competency checks and observations to ensure that best practice was being implemented. Staff felt supported in their roles, telling us, "We get all the training we need, and plenty of support." Relatives told us, "Staff are well trained and appear to enjoy working for the manager, as even in his absence high standards are maintained."

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

- People were supported by staff to have a healthy balanced diet and people were seen to enjoy their meal at lunchtime.
- People were involved in decisions regarding what they had to eat and drink, however staff told us that they worked hard with people to encourage healthy meals and snacks. For example, one person used to like only chocolate as a snack during the day. Staff had introduced new snack options including fruit, we saw this person approach staff during the inspection and ask for a banana.
- People's nutritional needs were clearly documented in support plans, including any identified risks. People's weights were recorded when needed and any weight loss or gain investigated and referred to their GP if needed. Staff were able to tell us about people's nutritional needs and we saw guidance being

followed by staff during the inspection.

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

- Staff worked closely with other agencies, including local authority, social workers and other health professionals involved with people's care, this ensured continuity of care which was up to date, and person centred.
- Detailed progress reports were written and these were used during reviews. Review meetings took place regularly to discuss each person's care and support needs, or when there had been any changes to their health or behaviours. Reviews were attended by the individual, their relatives, local authority, and other health professionals involved in their care when appropriate.
- Staff were prompt to respond when people became unwell or presented with changes in their behaviour. Referrals were made promptly when needed and staff supported people to attend appointments.
- Relatives told us they were kept informed of any health issues or upcoming appointments and involved in changes to people's care. Documentation confirmed referrals had been made for specialist advice and support when appropriate. Details of any upcoming appointments were written in daily reports and recorded on a whiteboard in the office. This included contacting GPs, psychiatric referrals, hospital and dental appointments.
- People had a hospital passport and health assessment booklet. This provided information regarding their specific health and support needs should they need to attend another health setting.

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

- Greenways was a large adapted building with further accommodation for one person provided in an annexe. There was open access to a large secure outside area. Relatives spoke highly about the overall environment and the positive impact this had on the people living there.
- There were communal areas which people could access throughout the day, including a large kitchen and dining area.
- People's rooms were decorated in the style of their choice, personalised and reflected their personality.

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

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

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). We checked whether the service was working within the principles of the MCA, and whether any conditions on authorizations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Applications for DoLS authorisations had been sent and relevant information recorded in support plans regarding the specific decisions which had been authorised.
- Decisions were made in the person's best interest and involved relatives and health professionals when appropriate. Documentation was in place to show how decisions had been made including discussions and meetings with relevant persons.
- Staff had received training to ensure they understood the principles of MCA and DoLS and were clear that people should be involved in decisions as much as possible about their care and how they spent their day.

- People were asked for their consent and were involved in day to day choices and decisions. Staff interaction with people clearly demonstrated that people's choice and involvement was paramount to how care was provided. We saw people making choices about who supported them when they went out and what activities they wished to do.

# 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 as Good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- Staff demonstrated a clear understanding around equality and diversity. They supported people to do individual tasks and activities of their choice
- It was clear from observations that staff knew people really well, and care was provided with warmth. People were given appropriate levels of emotional support tailored to their individual needs at the time. Relatives told us, "The staff at Greenways are very patient as (name) can be very challenging."
- People were supported to maintain relationships that were important to them. Relatives told us "I am very happy with the care given to my relative. I could not have asked for a better setting, I feel as though I have a lot of support and that I am not alone in taking care of my loved one and giving them an opportunity to live their best life."
- People reacted positively when staff engaged with them. Staff communicated well with people and there was obvious fondness. The atmosphere throughout the home was relaxed and cheerful.
- Staff were able to tell us about people's health and emotional support needs and how specific behaviours may present themselves. Relatives told us, "My relative is very happy and content living at Greenways, under the careful eye of the staff, you couldn't ask for more." And, "When I see the smile on her face I know she is happy and content."

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

- People were involved in decisions throughout the day and offered choices including how they spent their time, and who supported them with their care.
- Staff communicated well with people and communication was tailored to the individual. Care plans included specific information regarding how the person will make their wishes known, including the use of verbal and non verbal communication, choice boards, picture exchange communication and Makaton. For example, although one person was unable to tell staff what they wanted, staff recognised immediately when they wished to go out.

Respecting and promoting people's privacy, dignity and independence

- We observed that respecting people's privacy, dignity and independence was of paramount importance to how care was provided at Greenways.
- Doors were always closed before people were assisted with personal care, and conversations regarding people's care and support needs took place discreetly.
- Everyone was encouraged to participate in activities and staff were available to accompany people when they wished to go out. Two people had vehicles which staff used to take them out.

- People's independence was supported and encouraged, for example staff always included people in tasks and activities to enable them to do as much for themselves as was possible. One person liked to help with kitchen tasks and had learnt to do some tasks independently.
- People's personal preferences were respected including how they dressed and how they liked their rooms to be. Relatives told us, "Staff show total respect and dignity to my relative, I couldn't wish him in a better home. Totally happy with the way staff take care of him."

## 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 as Good. 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; 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

- Care planning was personalised and discussed with people and their relatives when appropriate. Although people were not always able to communicate their wishes verbally, staff used communication aids to involve people as much as possible. Relatives and healthcare professionals were also involved when appropriate and kept updated of any changes. Relatives told us "Staff will inform me of upcoming appointments and the outcomes for routine visits, and for more in depth appointments I am invited to attend and it's planned around a time to fit my schedule."
- Each person was treated as an individual. Staff adapted their approach from person to person. For example, using simple verbal instructions, or saying the person's name before talking to them so they were aware when staff were speaking to them.
- Detailed guidance was in place regarding positive behaviour support procedures to maintain a safe environment for people and staff. This was used when people displayed anxiety which led to behaviours which were challenging, or in response to physical aggression towards staff or other people. Staff had excellent knowledge and understanding regarding each person's behaviours and how these may present themselves, including people's possible triggers. Guidance was clear and informed staff how they should respond. For example, redirection, or diversion, to a reinforcing or compelling activity, listening to music, watching a DVD, or encouraging the person to move to a more relaxing area of the home. The emphasis at Greenways was to reinforce positive behaviour with praise and support.
- Each support plan contained clear guidance to inform staff how people communicated their needs and how staff should engage with them and we saw this in practice throughout the inspection. There were detailed descriptions about each person's likes and dislikes, including, favourite pastimes and people they admired, for example one person was a big sports fan and staff had taken them on a visit to the football stadium where the footballer they liked played.
- Care plans included detail which enabled all staff to provide consistent person centred care. Staff communicated well. At the end of a shift, relevant information was handed over to staff coming on duty to ensure they were aware of any changes to care needs, things people wanted to do that day and people's chosen activities.
- Staff and management enabled and supported people to maintain regular contact with people who were important to them. People went to stay with relatives and out on trips. One person had been supported by the registered manager to attend a family wedding. Staff worked closely and inclusively with people's relatives. We received only positive feedback from relatives, regarding the improvement in their loved one and how they had developed and flourished since moving to Greenways.
- One person had found going outside distressing and took measures to hide themselves when they were

out of the service. Staff had worked with them to gradually encourage them to feel less anxious and over time this had led to a complete change in the persons behaviours and they were now able to enjoy going out supported by staff. Another person found a particular item distressing. If they saw this item when they were out they would become increasingly anxious and this would lead to self harming behaviours. Staff worked with other health professionals to devise a support plan to desensitise the person and allow them to feel comfortable with this item. This had been achieved slowly with positive behaviour support and understanding. This had a positive impact on the person and enabled them to see this item without causing them anxiety or leading to injurious behaviour.

- People had opportunity to access the wider community as hobbies and activity choices were supported. An activities lead had been introduced to ensure people had a variety of activities available to them. Each person had a weekly programme of daily activities, these included horse riding, trampolining, music, foot spa treatments, going out for drives or walks, shopping and trips out. Relatives told us, "(person) has made so much progress in the time he has been at Greenways. This has allowed him to take part in all kinds of activities, have a good social life, go on an annual holiday to Centre Parcs, do overnight stays at home and on home visits be taken out for walks or drives."

- New activities were offered and varied from person to person. Group activities were inclusive and people were encouraged to participate to prevent social isolation and encourage new skills. All planned activities were flexible and people could choose what they wanted to participate in. However, some people required routine and could become anxious if there were unexpected changes. Staff ensured people were supported and routines were followed whenever possible. People had access to the outside garden area and there were vehicles to take people out if they wished. Relatives told us, "I like the fact that each service user has a party for their birthday and this is attended by service users from the other homes and the residents at Greenways also get to attend their birthday parties. It's like having a wide circle of friends."

#### Meeting people's communication needs

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

- Staff understood the AIS and the service identified people's information and communication needs by assessing them, and these were recorded in support plans. We saw evidence that the identified information and communication needs were met for individuals. For example, care documentation informed staff how to speak to one person using simple verbal or written instructions, and to ensure they had the persons full attention before communicating with them. Other people used facial expressions, communication cards and personalised signing which staff had learnt.

- Menus, support documentation and weekly activity programmes had been devised using pictures and photographs of people, including relatives, staff and people important to the person. People had access to this and other information to ensure information was provided in a format they could understand.

- Staff told us they were able to pick up non verbal indicators when a person may be unwell, or when changes in their behaviour may indicate they were experiencing anxiety or distress. For example, an increase in aggression towards others, or becoming more socially isolated could indicate that there is an issue with their physical or mental health. This knowledge and understanding of people's needs meant if people needed to access other healthcare agencies, staff could share relevant information to ensure they received coordinated, person centred care.

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

- The provider had a complaints policy and procedure. The registered manager told us if any issues were shared with them, these would be reported and investigated immediately.

- There were no complaints at the time of the inspection. When a previous anonymous issue had been raised, this had been discussed with CQC and issues raised had been fully investigated. The registered manager told us if complaints were received, these would be escalated as appropriate. The quality assurance officer working for the provider had oversight of any complaints were raised, including any outcomes and actions needed.

#### End of life care and support

- People living at Greenways were not receiving end of life care, however the service worked closely with relatives and if people became unwell, close liaison with families would take place.
- The registered manager and staff were aware that any sudden changes to people's health would need to be reviewed to ensure that the service was able to safely meet the persons needs and provide appropriate support.



# 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 Requires Improvement. At this inspection this key question has now improved to Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The registered manager and staff placed emphasis on person centred high quality care. There was an open, engaging atmosphere. People were seen to engage readily with staff and there was a relaxed friendly atmosphere. People had access to the main staff area and often chose to come in and sit with staff when they were in the office.
- The emphasis at Greenways was that it was people's home first and foremost. The registered and deputy managers worked with staff each day to provide people with a good quality of care. Empowering people to achieve outcomes and goals. Relatives confirmed their loved ones were supported and empowered to achieve. One told us, "Since the time they came to Greenways I can see the change in them, they have improved so much doing things for themselves." Another said, "There is a low staff turnover which gives the home a family feeling. This is an indication that staff are happy, and it allows the service users to get used to them and they are able to observe and contribute to their progress."
- Information in people's care documentation was written sensitively and supported ongoing involvement in decision making for people and their relatives if appropriate.

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 provider was aware of the statutory Duty of Candour. This aims to ensure providers are open, honest and transparent when incidents occur. Any issues raised were investigated and reported to the relevant agencies with outcomes recorded.
- Families confirmed they were always notified without delay if any incidents or accidents occurred.

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

- Regular staff meetings took place. Meetings were used to discuss all aspects of care and support provided to people, training needs and any other issues related to the running of the home.
- Family members were liaised with as appropriate and feedback on the service being provided was encouraged. Relatives were involved in care reviews. Relatives told us the registered manager was always available and they could speak to them or any staff if they had any queries or concerns. One said, "I feel this was a model service. (registered managers name) is a very hands on manager and he always has time to listen to any concerns that I may have."
- Staff were aware of the importance of providing care in ways that supported people's choices, equality and

diversity. Staff understood what was important to people as an individual and people were encouraged to express their individuality, personality and needs.

- When people went to stay with family, a family communication book was used to enable relatives to update staff and share key information. For example, how people had spent their time, their mood and behaviour. This meant staff were able to provide consistent care and respond to any issues or concerns that had occurred during the persons stay.
- People were encouraged to be part of the local community, staff supported people to go out for meals at the local pub, access the local area on walks and go shopping in the local town.

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

- Staff demonstrated a clear understanding of their roles and responsibilities and told us they enjoyed working at Greenways. One said, "I love my job, it's a good place to work." Most staff had worked at Greenways for many years, including the registered manager. It was clear that staff worked well as a team. The registered manager told us, "It's important that there is a happy vibe here, people will pick up on things if staff are not getting on, so it's important we are working together as a team and supporting each other."
- The registered and deputy manager completed a comprehensive system of quality checks and internal audits to monitor care, documentation, safety and quality of the service at Greenways. Action plans were produced from the findings and actions completed. The quality assurance officer working for the provider also had oversight of audits completed and carried out a number of spot checks and further audits at the service.
- The registered manager observed staff and checked high levels of care where consistently being provided. The deputy manager carried out medicine's competencies and further observations at the home. We were told that any issues or improvements identified would be feedback to people to ensure high standards were maintained.
- The registered manager understood their regulatory responsibilities. Notifications of significant events, such as safeguarding concerns, had been submitted to the Care Quality Commission (CQC) in line with guidelines. Reportable incidents had been referred appropriately to the local authority. Action was taken to prevent similar occurrences, and outcomes were shared with staff.
- All staff were receiving the appropriate training to enable them to carry out their duties appropriately. Any additional training identified would be sought to ensure staff had continuous learning and were able to safely and effectively meet people's needs. The service also accessed further external training through the local authority West Sussex portal.
- The registered manager read CQC updates and passed relevant information onto staff to ensure continued best practice.

Working in partnership with others

- Staff had a good working relationship with the learning disability acute liaison service, psychiatrists, social workers involved in people's care and activity providers to ensure people received the best outcomes and their physical and mental health were supported consistently.
- The service worked closely with other agencies such as occupational therapists and GPs to access help and support when needed. Any advice by health professionals was used to ensure the safety and wellbeing of people was maintained.