

# Bupa Care Homes (HH Northumberland) Limited

## Ridley Park

### Inspection report

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### Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

### About the service

Ridley Park is a care home providing nursing and personal care for up to 59 people with a range of healthcare needs. The service was full. The accommodation is primarily over two floors with the third floor being used for hairdressing, laundry and a ballroom.

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

Extensive feedback confirmed the service was entirely person-centred, and staff made sure people and their relatives were at the heart of it. This was driven by the exceptional leadership of the registered manager and her team.

People were extremely well-cared for. Staff had an extensive knowledge of people and their preferences. There were multiple examples of staff going the extra mile. A relative said, "In the settling in period the staff have been outstanding in their approach; they have been unfailingly patient, encouraging, friendly and helpful in all respects."

There was a well-established staff team, most of whom had worked at the service for many years. The whole team were exceedingly enthusiastic and passionate about the service they provided. Staff were very proud to work at Ridley Park and were highly skilled and motivated. A relative told us, (and this was echoed throughout communications), "It is our genuine family reflection of what is a fantastic care home in every respect; we cannot fault Ridley Park at all, and we are just delighted that (person) has such a wonderful and caring environment to spend the remainder of their life." A staff member said, "I can honestly say that Ridley Park is a fantastic place to work and I have never had a better working experience."

People's lives had been enhanced through positive outcomes. Staff were excellent at anticipating and understanding people's needs. Collaborative working and excellent communication with external professionals was in place.

There was a wide variety of individual and communal activities available to promote people's well-being overseen by two dedicated activity coordinators. One relative commented, "The range of activities on offer for residents is brilliant." People were also given opportunities to connect with the community, including partnership working with local schools and colleges and visiting various venues.

Equality and diversity was truly embedded throughout the service, including promoting various faiths. Staff were extremely flexible and adaptive to meet people's needs or choices. People and their relatives were fully and consistently involved and supported in decision making. 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.

Comments about the management team were overwhelmingly positive. The management team were very

visible throughout the home and there was an open-door policy with people, their relatives and staff very confident about approaching them. The management took on board any areas raised as potential for further improvement to ensure the service continued to excel.

There was a strong and effective governance system in place which was regularly reviewed. A complaints procedure was in place and accessible, although comments made indicated that no-one had cause to complain. People and their relatives' views were valued, and the provider highly encouraged this through a variety of ways.

People felt safe being supported by staff. Staff understood risks to people and how to help reduce them. Systems were in place to safeguard people. There was enough staff to support people at the service and this was constantly reviewed.

Medicines were generally managed well. Systems were in place for the safe storage, administration and recording of medicines. People received a good range of food and refreshments to meet their needs. The home was extremely clean and tidy and had a homely, welcoming environment.

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 and update

The last rating for this service was good (published 19 September 2017).

#### 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?

Good ●

The service was effective.

Details are in our effective findings below.

### Is the service caring?

Outstanding ☆

The service was exceptionally caring.

Details are in our caring findings below.

### Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in our responsive findings below.

### Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-led findings below.

# Ridley Park

## 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

One inspector and an Expert-by-Experience carried out the inspection. An Expert-by-Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Ridley Park is a care home. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and external professionals who work with the service. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections. We used all this information to plan our inspection.

#### During the inspection

We communicated with 11 people and 23 relatives about their experience of the care provided. We

communicated with 22 members of staff including the registered manager, the deputy manager, an activity coordinator, six nurses, 10 care staff, the head chef and five administration, maintenance and domestic staff. We also spoke with the regional director and a visiting GP. We further communicated with an occupational therapist, a chiropodist, the district nurse team, a training assessor, an external trainer and a funeral director to gather their views on the service provided.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included five people's care records and multiple medicine records. We looked at four staff files in relation to recruitment, support and training. We also reviewed a variety of records relating to the management of the service, including policies and procedures and quality assurance checks.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records.

# Is the service safe?

## Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse. Staff were trained in safeguarding and had access to guidance about reporting any concerns. The registered manager understood safeguarding procedures and had reported any concerns appropriately.
- There were robust systems in place to keep people safe. There were no concerns raised about people's safety. One relative said, "Safe definitely. The nurses here have brought (person) back to trust them to help, after losing trust in a different place."

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Staff managed the risks people faced very well. This included risks associated with weight loss, falls, skin integrity and choking.
- Safety checks on the building and equipment were carried out and kept up to date.
- Fire safety procedures were in place to keep people safe, including individual personal emergency evacuation plans.
- The provider learned from accidents and incidents. Incidents were recorded and analysed, including near misses. De-briefings took place at staff meetings, to help support staff and reduce risks.

Staffing and recruitment

- There were enough staff on duty to meet people's needs. Staffing levels were monitored to ensure there were enough staff to provide safe support and an increase in senior care staff on the nursing unit had recently taken place to enhance this.
- Safe recruitment procedures were in place.

Using medicines safely

- Medicines were managed well, including ordering, storage and disposal. Audits were carried out to ensure errors were found and rectified. We found a small number of minor recording issues which the registered manager addressed immediately.
- Staff were trained to undertake medicines administration and policies and procedures were in place to support this.
- People received their medicines on time, this included those with time critical medicines for Parkinson's disease for example.

Preventing and controlling infection

- The home was extremely clean and tidy and there was a very good standard of hygiene.

- Staff followed best practice guidance and used protective equipment appropriately. There were two infection control champions who promoted good practice amongst staff.



# Is the service effective?

## Our findings

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

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

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

- People were assessed prior to moving into Ridley Park to ensure staff could meet people's individual needs. This included gathering information from families and external professionals. The information was reviewed on a regular basis or when needs changed. One relative said, "(Registered manager) spent a good length of time completing (person's) care plan prior to stay. Gave us confidence that they wanted to know as much as possible about (person's) wants and needs."

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

- People were supported to maintain good nutrition and hydration. There was a good range of food available, which also included additional catering for parties and other special events.
- People's weights were monitored on a regular basis. Where a person's ability to eat or drink changed, staff consulted with healthcare professionals and implemented their guidance. The head chef visited people to check meals were suitable.
- Most people and their relatives said the food was good. A small number of people made comments about more variation. This was being addressed by the registered manager and head chef.
- Kitchen records were in the process of being reviewed. After discussion, a new information board was placed in the kitchen during the inspection which supported kitchen staff to easily access dietary information for people on particular food and fluid regimes.

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

- People had access to a range of healthcare professionals. This included a weekly dedicated GP home visit, chiropody, optician and dentistry services. The visits were well documented in care records. One healthcare professional commented, "The staff really seem to know their patient's. They follow information given." A relative said, "(Person) had pressure damage when they first came in here but now skin is in excellent condition for the first time in a long long time. Staff were wonderful, they worked tirelessly to get that sore better."
- The management team supported people's oral health in line with current guidance. One staff member said, "We have a massive pair of teeth which are in the manager's office and they are used to help train staff to combat poor dental health."

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

- The service was designed to comfortably meet people's needs. It was well decorated throughout with signage to help people orientate, including those living with dementia. People's bedrooms were

personalised to suit their individuality. A refurbishment programme was in place.

- The home had ample communal space which included, a ballroom and bar area, café, hairdressing salon and various lounge areas. The garden had raised beds for ease of access and a greenhouse which produced some home-grown vegetables in season. A relative told us, "When (person) is sitting outside, I am not entirely sure it's as private as it could be." We discussed this with the management team and the regional director said they would review this, which would include suitable privacy fencing put in place.

Staff support: induction, training, skills and experience

- Nursing and care staff were skilled and experienced and received training relevant to their role. Staff were encouraged and empowered to undertake training and systems were in place for staff progression. Staff received regular supervision and annual appraisals.
- A good induction programme was in place to ensure new staff were competent to carry out their duties.

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

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

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- People's care and treatment was provided in line with law and guidance. Appropriate DoLS applications had been made to the local authority. The registered manager ensured these remained lawful.
- Staff had a good understanding of people's needs and only supported them with consent. The registered manager and staff were aware of the need for decisions to be made in a person's best interests if they were unable to make those decisions for themselves, which included family and other professional involvement.

# 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 requires improvement. At this inspection this key question has now improved to outstanding. This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

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

- Staff were exceptionally caring, attentive and patient and this was commented upon by people and their relatives. There was laughter and very positive interactions throughout. Staff gave comforting hugs or held the hands of people who needed reassurance or comfort from a friendly touch. A relative said, "The caring and compassionate attitude of the staff is outstanding. Most important to me is their happiness and (person) is. They always have a laugh and joke and that is what I like." Another relative said, "When (person) started to lose their mobility, (person) would get quite upset and often break down in tears. When this happened, the staff would take extra time to try and comfort my (parent) in order to lift their spirits. These actions made a massive difference."
- There was a strong staff attitude to providing people with the very best of care in a very nurturing environment. Staff motivation, empathy and passion for their roles was both clearly visible and tangible. A relative said, "My (Person) was experiencing difficulties with their catheter. The nursing staff were quick to inform me clearly of the problem even drawing me diagrams when I didn't fully understand medical terminology." Another relative said, "It was down to their kindness and empathy that kept my (parent's) moods in good fettle, preventing them from going into periods of depression."
- Staff supported people with diverse needs very well. A staff member told us about a married couple living on different units, "They continue to spend time together enjoying each other's company and having their meals together and family members have expressed to us that it gives them peace of mind that they can continue with their relationship."
- Staff spoke fondly about people and went over and above their duties to provide a fulfilling experience for them.
- Staff had a detailed knowledge of each person to enable them to support them extremely well, including in connection with their interests and their families. There was a 'resident of the day' on each unit which meant the person would be the focus for staff on that day, to make sure care records and wishes were current. This was monitored to ensure every person was included.

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

- People and relatives were listened to and felt valued. For those who could not always verbally communicate, this included with the use of electronic aids to fully support this, including tablets, Alexa devices and other assistive technology. One person was supported by staff by using sign language. A relative told us, "Staff will talk to me all the time and include me fully in (person's) care as (person) is not able to do that. They make me feel part of the fittings. I have been made to feel so very welcome." Another relative commented, "We are fully involved in (person's) care and we are invited to meetings appropriately. We

receive emails, phone calls and verbal updates on a regular basis. Management of Ridley Park is excellent. From our very first contact through to the present, our contact with management has been nothing but exemplary."

- Staff provided a large range of information to help people make considered decisions about their care, including information on dementia, benefits, mental health and advocacy services available in the local area.
- People had choice and control over their daily lives. One person told us, "I like to get up really early and go to bed sooner. Staff help me and never make me wait. I choose what I want to do, and staff help me to do it." One person had chosen to join the staff slimming group run from the home in order to lose a little weight.

Respecting and promoting people's privacy, dignity and independence

- People's privacy and dignity were fully respected. Staff knocked and identified themselves before entering people's rooms. Doors were closed before personal care was delivered and discreet conversations took place if staff felt people may need support to visit the bathroom. A relative said, "It's just the way they (staff) speak to people... extremely dignified and respectful."
- The service placed significant emphasis on promoting people's independence. Relatives said they were very often surprised at how staff were able to encourage their relatives to remain independent when they had not been as successful. A relative told us, "(Person) could not write. They can now write some things, staff mainly have helped (person) to improve this. Staff have been great. They have persevered where we had given up." Another relative said, "When (person) could no longer hold a drink by themselves, rather than just getting the carers to give (person) a drink, the management looked into different options to keep (person) as independent as possible, by providing information on different types of drinking vessels."

# 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 now improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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 strongly encouraged to maintain full involvement with their families and friends. One person was unable to attend a family wedding due to their health at the time. A relative told us, "(Person) was unable to make the journey. However, (staff member) arranged with (person's) granddaughter, for (person) to view the ceremony over Skype. This was a great success, she sat with them for the entire ceremony, ensuring (person) was dressed smartly and even arranged for them to have a glass of bubbly while they watched it." Staff later supported the family to hold a surprise celebration of the wedding in the home.
- People and staff were involved in a variety of community projects that valued people's contributions and local identity. Including charities, young people organisations and the local coast guard. A staff member said, "The coast guard visits the home regularly in full uniform which is particularly important for one person." A local charity who supported local volunteers to help improve the lives of older people in care homes, regularly visited and provided a range of activities for people, including crafts or trips out.
- There was an extensive programme of individual and group activities to enrich people's lives. Numerous games were displayed in inventive ways to enable people to join in. There was considerable environmental stimulation for people who lived with dementia to keep them engaged and orientated, which included, a post box, old telephone box, a lifelike cat and dolls for people to cuddle. Those people who had previously enjoyed gardening, had been involved in making a herb border, staining garden furniture, making a bug hotel and generally caring for plants. A relative said, "I can't praise Ridley Park enough. As a family, we are just so happy that (person) is somewhere that (they) now love, where the care is uniformly excellent and there is always something going on for the residents."

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

- People received support which was centred around their individual needs and preferences and reviewed regularly. Care was consistently developed with the person, their representatives and external professionals. One person had a love for a local football team. Staff ensured they had access to televised events and if this occurred at meal times this was worked round to ensure they did not miss their favourite pastime. A staff member said, "(Staff member) brings (person) in from home, a newspaper pull-out listing all Newcastle United games."
- The service had information recorded on how to care for people of particular faiths and beliefs. Church services were held regularly, however some people chose to go out with friends and family to celebrate their faith elsewhere.
- Staff had an exceptional understanding of each person's background, likes, dislikes and how they

preferred to be supported. A gentleman's club was set up as staff recognised some of the male residents were not joining in with some of the more 'female orientated' activities. This included going out to the pub for a 'pint' and a game of dominoes or a meal. Staff confirmed females were not excluded and would be welcomed if they chose to attend.

#### 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.

- The registered manager was aware of the accessible information standard. Information was available in a different format, such as pictorial and large print to make it easier to read and understand. Staff supplied one person (unable to verbally communicate) with a picture book with Velcro attachments so they could communicate their needs to staff.
- Clear information was available in people's care records about how they communicated. Staff had been taught some sign language by one person who had a hearing impairment to aid their support. A relative said, "Staff are really superb at communicating with (person) and know sometimes better than me what (person) wants!"
- Staff supported people to use various pieces of equipment, such as computers or electronic tablets, to stay in touch with those important to them. A person said, "I say 'phone Ridley Park', this in turn rings a mobile phone in the care home. When the mobile rings the staff will come to help me. I ask for them through Alexa (electronic communication device) and they come quicker than when I used to press the buzzer, they are very good."

#### End-of-life care and support

- Staff cared for people at the end of their lives extremely well. Relatives were very positive about the care and compassion shown to their loved ones at this time. A relative commented, "During the last week of (person's) life, the staff could not have been more caring with (person) and also supportive to us as family members." A member of staff said, "When people are being cared for at the end of their life, we inflate a bed into their bedrooms if families want to stay nearby, but we also allow families to use a spare room if they don't want to do that. We make them as comfortable as possible. We provide a trolley with the basics on for families to use free of charge." The registered manager told us of a recently deceased person, "We put a picture of (relative) in their hands, which is something I know they would have liked." Another staff member said, "I wanted to stay with (person) till the undertaker took them away as I wanted to check (person) was treated with dignity."
- All units had a notice stating that if candles are lit, staff and visitors should be respectful at this highly sensitive time.
- Staff worked very closely with external professionals to ensure people were provided with the very best end of life care possible, including being comfortable and pain free. A healthcare professional said, "Palliative care is very very good. I would say people receive a very good experience at that sad time." A funeral director told us, "The staff at Ridley Park couldn't make it to the funeral (as out of area) so asked for some of the order of service to be dropped off at the home so they could have a little service of their own. We were really touched by this" and, "We pick up a lot of very positive feedback from families about the home."
- Advanced care planning took place with people and/or their representative, which included emergency health care plans and Do Not Attempt Cardio Pulmonary Resuscitation directives (DNACPR).

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

- A complaints procedure was displayed. The small number of complaints had been dealt with in line with

the organisations policies and procedures. People and their relatives told us they knew how to raise concerns if needed. There were many compliment cards and letters of appreciation of the care given.

# 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 now improved to outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

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

- People were at the heart of this service. The organisation led by example to create an ethos which was incredibly caring and supportive to people and staff. It started on arrival at the service when people were presented with a welcome pack which included a selection of toiletries as a gift to help them feel at home. We had many compliments about the exceptional caring culture of the service. One person said, "The manager here is really lovely. You see her about asking people if they are okay. She was very good when I moved in and reassured me and my family. They (staff) fussed around and made sure I was welcomed. Helped introduce me to others and I have made friends because of them." A staff member said, "(Registered manager) is a very compassionate lady and to hear her talk to the families that are going through the turmoil of bringing their loved one in to this environment is so uplifting and heart-warming; how she empathises with them, understanding the emotions they are going through, and how she assures them of all the support we will give them." A healthcare professional said, "Overall there is a strong leadership and support which is disseminated to the staff which provides a well-motivated caring team."
- There were many long-established staff members. Numerous staff said they "loved" coming to work and felt included. A staff member said, "They (management) offer support and want to see all their staff progress and exceed the relevant standards of their role. I feel confident in saying that they want nothing but the best for their staff and the service users at Ridley Park."
- Equality and diversity was celebrated within the staff teams. For example, staff from the LGBTQ community told us they were valued and supported, including when a marriage was celebrated at the service. LGBTQ means anyone from the lesbian, gay, bisexual, transgender community and those questioning (for example) their sexuality.
- The organisation operated staff recognition and loyalty schemes, including various incentives and long service awards. Ridley Park and the staff team had been recognised locally by the National Care Awards for the care provided. A nurse told us, "(Staff member) was appointed as employee of the month. She has done some fantastic work with (person). She has worked tirelessly with the family to make sure they were kept informed of (person's) health as it has declined recently. She has done a fantastic job."

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

- The registered manager was an outstanding role model who was passionate about their role and constantly sought positive outcomes for people and their staff team. The passion they radiated was reflected in the staff team. A relative said, "I would put the standards at this care home at the very top of



homes I have been involved with." Another relative said, "I am in awe at the hard work and professional standards they bring to the care business. The challenges they face every day are enormous, yet nothing appears to be too much trouble. These people are the unsung heroes of the Health Service."

- Staff were clear in their roles and contributed to the overall success of the service. A nurse told us about a recent incident, "The team work and support for the resident from the care staff was in my opinion excellent. Each member of the team present seemed to have a role. Nursing staff addressed the clinical issues, whilst the senior carers supported with the gathering of essential information re: transfer to hospital."
- There were very high levels of satisfaction across the staff team regarding training and support. A staff member said, "There is full support of the management in anything I want to achieve. It means a great deal to me and I could not ask for a better environment to work in."
- There was a very robust quality assurance system in place. Various meetings took place to monitor the service along with numerous audits and checks on records and procedures. This had led to the delivery of highly effective care.
- Staff closely followed best practice guidance and the organisations policies and procedures which were firmly embedded into the service.
- The leadership team fully complied with regulatory requirements.

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

- There was clear evidence of empowering people to voice their opinions, through resident of the day discussions, relatives' feedback, review meetings, one to one sessions, newsletters or questionnaires. Care staff were strong advocates for people. Management completed daily observational checks, which also gave them opportunities to engage with people and families.
- People, relatives and staff were fully engaged and involved. The registered manager recognised how crucial it was to involve people and their relatives in how the service operated and continually improved. Meetings took place and regular conversations were encouraged with people and their families. A relative told us, "(Activity coordinator) is always sending me pictures via email of (person) enjoying themselves. This gives me so much joy and gives me confidence that (person) is being looked after extremely well."

Continuous learning and improving care; Working in partnership with others

- There was an ethos of continual learning and improvement across the service. The organisation had paid for a 'dementia bus' to visit the home with the aim of exploring the condition further and provide additional learning for staff and relatives. Those who attended were able to feel first-hand what dementia may feel like with the use of dementia goggles. Staff had written appraisals of the learning and these were all positive. The organisation had recently purchased a defibrillator to improve their response to heart attack incidents.
- The registered manager worked to improve the impact of the service on the environment. For example, by installing a water butt and compost bin in the garden area. Recycling was encouraged with people and their relatives. The service had received a special award from 'Northumbria in bloom' in 2019 for the work undertaken with residents and the care of their gardens.
- External professionals highly commended the service for its extensive joint working. They said care staff were highly proactive at identifying issues, alerting them and working with them to resolve concerns.
- Staff actively sought to engage with local organisations and volunteers to support their work.

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 had robust procedures in place regarding reporting and acting and learning from when things went wrong.
- The registered manager was aware of their responsibilities regarding Duty of Candour. They were open

and honest throughout all the conversations we had with them and relatives confirmed this to also be the case.