

Villa Scalabrini

# Villa Scalabrini

## 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

Villa Scalabrini is a residential care home. It provides residential care for up to 49 older people. At the time of our inspection 49 people were accommodated at the home.

The home is a purpose built in the style of a small village, originally for the Italian community and now welcoming people from all cultures, nationalities and religions. The home was set in attractive gardens, which included a 'memorial garden'. People also had access to an enclosed garden with many tropical birds and a vegetable garden where people could enjoy the outside space.

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

People, relatives and friends all spoke very highly of the care received at Villa Scalabrini. People were at the heart of the home and everything centred around giving them an extraordinary quality of life. People were treated as individuals in a culture that values based and nothing was ever too much trouble. People and their families spoke about a compassionate staff group, we repeatedly heard people describing the home and staff as outstanding, excellent, kind, compassionate and thoughtful.

There was a strong spiritual ethos at the service and an appreciation for what had been achieved at Villa Scalabrini. The 'Villa' (as people referred to the home) had a happy feel. The ambience was felt as soon as you entered; lots of happy, busy people going about their daily business. People had a purpose, a mission, and staff were on hand to support people to achieve the best possible quality of life.

People told us it was a family home and family members confirmed they were warmly welcomed involved and all were delighted that people had thrived so well since coming to live at the 'Villa'. People had lived much longer than expected with many people well over 100 years old. Family told us they believed this was because of the excellent care people received at the 'Villa'. People and their relatives were fully involved in all aspect of their lives and how they choose to live them. This had a positive impact on people's psychological and physical health and wellbeing. It also empowered people and gave them control and independence.

People felt safe. Staff were well trained and knew how to report any concerns under the safeguarding procedure. Staff were aware of how to elevate concerns if required. Staff knew how to keep people safe and mitigate any identified risks to people. Staff were recruited through a robust procedure. There were enough staff employed to support people in a timely way. People received their medicines safely.

People were encouraged and 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. People had consented to all care and support. Staff were aware of the mental capacity assessments process and deprivation of liberty safeguards (DoLS).

People's individual needs were assessed and reviewed monthly. This helped to ensure all information was current and the care was effective. People's dietary needs were well catered for including any specialist requirements. If any concerns were noted referrals were made to appropriate professionals.

People were engaged fully in a complete and varied range of activities organised around people's individuals' abilities, interests and hobbies. External events were regularly organised, and the community was fully involved and attended events organised at the home or within the grounds.

People's care and support plans were very personalised with a great deal of detail. Information about people's lives, history family, likes, dislikes and preferences were all recorded to help the staff really get to know the person well.

The service had a complaints procedure in place. People and their relatives told us they never had to complain as they could bring anything to the staff's attention and it would be addressed. We saw that many compliments had been received.

The provider, registered manager and staff worked professionally with other agencies and organisations to help ensure people received holistic and seamless care which achieved positive outcomes for them.

Quality assurance systems were in place for all aspects of the service. Audits were completed regularly and were reviewed to ensure quality was always a priority. The ethos related to the values and passion of all the management and staff team. Staff were accountable and had individual roles and responsibilities which they took very seriously.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://www.cqc.org.uk)

#### Rating at last inspection

The last rating for this service was Good (published 09 August 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 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.

# Villa Scalabrini

## 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

Villa Scalabrini 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 professionals and the local authority who have experience of working with the service. The provider was not asked to complete a current 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.

#### During the inspection

We spoke with five people who used the service and four relatives about their experience of the care

provided. We received written feedback from a further 19 relatives, family and friends of people who lived at Villa Scalabrini. We spoke with eight members of staff and received written feedback from a further 10 staff members. This included care team managers, deputy manager, care staff, activities staff, the chef, housekeeping staff, the registered manager and the provider. We also received written feedback from eight external professionals including the home improvement nurse, a GP, the CCG (Clinical commissioning group), a member of the SALT team (Speech and language therapy team) and a pharmacist. 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 three recruitment files, induction, training and support records, two people's care records and risk assessments and medication records. We reviewed various records relating to the overall quality and management of the service. We reviewed specialist projects around improved oral hygiene and improved hydration for people.

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 told us they felt safe living at Villa Scalabrini. Relatives confirmed they never had any concerns in respect of their family members safety at the home. One relative told us, "I feel that everybody is very safe here. The (Staff) are always on hand and are very diligent." Another relative told us, "I have no concerns and am always kept informed of the smallest things. They are very good at keeping families informed." We observed during our inspection that staff worked with people at their own pace and were not rushed.
- Staff were aware of their responsibilities under the safeguarding procedure. Staff were able to demonstrate how to identify any potential abuse. They told us they would report any concerns immediately. Staff were very aware of safeguarding and regularly discussed it at meetings, so it was always on the agenda as a reminder, along with having a safeguarding champion.

Assessing risk, safety monitoring and management

- Individual risks to people's health and wellbeing were assessed and measures were put in place to reduce and mitigate these. Staff knew people well and ensured that risks to people's well-being were minimised, without impacting on people's independence.
- Risk assessments included various aspects of people's lives. For example, any equipment people used, falls, skin integrity, choking risk and infection control. Risks were kept under regular review and updated accordingly so they remained current. Each person who used equipment to transfer safely had an individual step by step instruction sheet supported by pictorials in their bedroom to assist staff with safe moving and assisting manoeuvres. To reduce the risk of skin damage people were supported with pressure relieving equipment including air flow mattresses and cushions.

Staffing and recruitment

- Robust pre-employment recruitment checks were in place to ensure staff employed were suitable to work in this type of setting. Before staff started working at the service, a range of checks were completed. These checks included obtaining references from previous employment, a criminal record check, proof of identity and evidence of eligibility to work in the UK.
- There were enough staff to meet people's needs safely and in a timely way. People, relatives and staff told us there were always enough staff on duty and we observed this to be the case throughout our inspection. Staff sat and talked with people, and did not rush people, everything was very relaxed.

Using medicines safely

- People received their medicines safely and regularly. We noted that the medicine administration was completed in accordance with good practice. Medicines records were completed accurately, and with regular audits being completed. We checked a sample of various medicines and saw the stock balances

were correct, they were within their best before date.

- Staff received training, regular updates and competency checks. There were protocols in place for medicines prescribed on an as needed basis, for example for pain relief. There were protocols for topical applications such as creams and the administration of eye and ear drops.

#### Preventing and controlling infection

- The service was clean and there were no lingering odours. The registered manager had robust infection control measures in place with people having an infection control risk assessment completed before going into hospital and again on their return. This helped reduce the risk of spreading infection.
- Personal protective equipment was provided to staff when assisting people with personal care. For example, gloves and aprons. Staff had also completed infection control training. We observed staff wearing gloves when handling and serving food.

#### Learning lessons when things go wrong

- The registered manager and senior staff team discussed what they could learn when things went wrong and thought about what could be done differently to reduce the risk of a reoccurrence. Any learning was shared with staff to help improve the safety of people in their care.
- Staff told us they discussed any incidents at a variety of forums so that all staff were aware. For example, incidents were communicated during daily/shift and handover and staff meetings to discuss what lessons could be learnt.



# 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's needs were fully assessed before they came to live at Villa Scalabrini. This was to ascertain that the home could fully meet their assessed needs. This detailed assessment also identified if staff had the skills and knowledge to meet the person's needs.
- Staff were aware of up to date guidance and used a best practice approach when supporting people.

Staff support: induction, training, skills and experience

- People were cared for by staff who received regular training, updates and development opportunities. Staff told us they were well supported, and we saw evidence of how staff were supported to take on more responsibilities throughout the structure of the organisation. All new staff completed a detailed induction.
- Staff and records confirmed they received not only mandatory training but also specialist training and there were champions in place leading in various areas. For example, skin integrity and pressure care, oral hygiene, infection control, and dementia care. One member of staff told us, "I have completed safeguarding, moving and assisting, fire safety, MCA/Dols and dementia training."
- Staff were incredibly positive about the support arrangements in place and were motivated, worked well as a team and felt valued.
- Regular staff meetings were held with differing staff teams these included handovers, team meetings, management meetings as well as one to one supervision sessions which enabled staff to discuss any work related or development plans. The registered manager and deputy manager worked closely with the management team around the home so had a good insight as to how well staff worked together and any potential development needs.

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

- People spoke positively about the food and they were offered multiple choices. One person told us "I have put on weight since I came here. It's just so nice but too much of it."
- People were supported by staff to choose their meals. Staff plated up the different options and asked people which plate of food they liked, while explaining what each meal was. Where required staff assisted people to eat and drink. Pictorial menus were available for those who preferred to look at the pictures rather than reading from a menu. One relative told us, "We are always invited to join for any meal, occasion they are so hospitable here."
- Special diets were catered for and staff were fully aware of people who were at risk of not eating or drinking enough to maintain their health and wellbeing. In these cases, people's nutritional intake was monitored on a food and fluid chart. The home had worked on an initiative with the CCG (Clinical Commissioning Group) to help improve hydration in care homes which had really been successful in raising

the profile of the importance of keeping people well hydrated. Staff offered a range of snacks including fresh fruits, yogurts, smoothies ice cream and recorded people's targeted intakes and outcomes.

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

- The management and staff team had developed excellent partnership working with other professionals to ensure people's care was seamless and holistic. For example, they worked with the care home improvement nurse, the CCG, the SALT team, GP's and district nurses all of whom were regular visitors to the home.
- Staff supported people to access other health related practitioners including opticians and chiropodists. People's oral hygiene had improved and there had been a real push to raise the standards and support people to better maintain their oral hygiene. Where required people were supported to attend dental appointments.

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

- The environment was clean, well-lit and decorated appropriately. For example, sky lights had been fitted in the corridors giving a feel of being outside. The service manager told us they were continually improving and maintaining the environment to ensure it continued to be a nice homely environment for people to live.
- At the time of our inspection new flooring was being laid in the entrance hall and some of the communal areas. The service manager told us this was to ensure that people who lived with dementia would benefit from a plainer wooden floor as opposed to the previous coloured tiles which could look like they were holes in the ground.

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.

- Staff demonstrated they had a broad knowledge around MCA and DoLS and how it applied to their work. One member of staff said, "We always assume capacity unless we're told otherwise." We saw that staff had all received regular training and were confident about the principles of MCA.
- One staff member gave an example of what a best interest decision was. They said, "If a person refused their medicines because they did not have capacity, we may have to consider if it was in the person best interest to administer the medicines, to maintain their health and wellbeing."
- Staff obtained people's consent before they supported them. One staff member told us, "Sometimes they (people) cannot verbally communicate consent, but they work with us. For example, while being supported with personal care. We offer people choices and respect their decision if they don't agree or decline the support."

# 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 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

- We received extremely positive feedback about the quality of service people received, comments centred around how people were at the heart of the home, people were valued, whatever their contribution or ability. One relative told us, "The staff at Villa Scalabrini are genuine and caring and go out of their way to make the residents comfortable and to provide a good quality of life. Whenever I visit there is laughter and love."
- Staff were passionate about inclusivity for all people living at Villa Scalabrini. This created a positive culture which centred around supporting people to achieve anything they aspired to. This culture had significantly improved people's quality of daily life. For example, by enabling people to keep in contact via social media and IT.
- People and relatives we spoke with were overwhelmed by how caring and kind the entire staff team were. One relative told us, "We can only report that the love, care and attention that our [relative] has received during their time at Villa Scalabrini, and have no doubt it has played a large part in extending their life beyond a time frame that could have been anticipated when the stroke occurred."
- Relatives of people who were not able to speak with us were impressed by the staff working at the home. One relative told us "There are many members of the team for which care giving appears to be a vocation rather than a job. They make people smile and give them a reason to live."
- All relatives we spoke with or received feedback from told us they were convinced that due to staff's kindness and individualised care their loved ones lived a comfortable and fulfilling life. One relative told us, "I want to acknowledge and highlight the continued and superb care that my Mother is receiving at Villa Scalabrini. Since my father passed away at Villa Scalabrini my Mum has remained in the care of the home. The care she has received is second to none. The staff are continually attentive, extremely professional in their approach and treat Mum with dignity and respect. I have witnessed on numerous occasions how her eyes light up when certain members of staff speak to her, to me it's a wonderful bond to see and an acknowledgement that she is safe and so well cared for."
- Staff understood the importance of making people feel valued and promoted people's self-esteem. This contributed to people's increased mental and physical wellbeing and helped them to achieve positive outcomes. For example, by assisting them with specific grooming so their appearance was maintained.
- Staff repeatedly told us how much they enjoyed working at Villa Scalabrini and were proud to work for an organisation where the entire management team by example, and excelled in showing love, kindness and compassion.

Respecting and promoting people's privacy, dignity and independence

- People were treated with upmost dignity and compassion. Staff were respectful when talking about people and bent down to make sure they were included in the conversation. One relative told us, "Nothing is ever too much trouble for them and are always happy to help with a big smile. We as a family are delighted that [Person] considers it their home. The staff are truly amazing and go above and beyond to help, and always keep you updated on any developments regarding my [relative's] care needs."
- One staff member told us, "The management team nurtured, care for and developed us (the staff team)." They told us how the management team supported them with accommodation and child care arrangements in such a dignified way. They recognised staff strengths and celebrated their achievements. Another staff member told us "Dignity is in everything we do, it's not just dignity for the people who live here but extended much further to relatives the entire staff and management team."
- A relative told us, "The entire staff team treated people and extended family with complete dignity and respect. People were listened to and their opinions valued." While another relative told us staff were always respectful of their loved one's privacy.
- People were not just cared for while living but aftercare and support for family and friends was provided in the garden of remembrance with an annual event to celebrate the lives of people who had passed away. Trees and memory plaques were on display for families to visit. One family member told us, "The kindness, dignity and respect extended beyond the lives of people living Villa Scalabrini make it exceptional."

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

- People and relatives told us they were consistently asked for feedback about all aspects of the service and they felt their views were listened to and acted upon. For example, the provider had installed Italian TV channels for those people whose first language was not English. They were able to stream mass services to people who were unable to attend mass services but were very keen to maintain their faith.
- Relatives told us repeatedly that they were involved in every aspect of people's care and support. One relative told us, "They keep me so well informed, we are always invited to be involved in reviews of care or if anything even the smallest detail changes they make it their business to let us know. It's so reassuring for our family." Another family member told us, "We visit regularly but they don't wait for us to visit they involve us, you can feel their passion and the attention to detail, they don't miss anything. They are excellent each one of them."
- People and their relatives were empowered to be involved in making decisions about their care because staff found ways to involve them. For example, most of the people living at Villa Scalabrini did not speak English as their first language. All the staff were bilingual and spoke many languages to ensure effective communication with people. The staff team spoke more than 20 different languages and dialects to truly understand people and facilitate effective communication. One staff member told us, "Translation is so important because not every word translates exactly that's why we go the extra mile because it could make a massive difference to the individual."

# 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 improved to outstanding. 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

- People received care that was personalised around their individual needs and wishes, and their care plans described in detail all aspects of their care and support. This included information about lifestyle preferences and people's likes and dislikes.
- People experienced consistency of care with each person having a named keyworker. Staff retention was very good with most staff having worked at the service for many years. One family member told us, "The staff are really great they know [Name] well and are patient, they don't rush people and are very responsive."
- People's religious, cultural and spiritual needs were considered, and people were supported to participate fully in cultural and religious events held regularly at the service. The deputy manager told us how they ensured people were supported to attend church as often as they wished if this was important to them.
- People told us the activities are very good. One relative told us, "Even though my [relative] cannot always take part due to their lack of capacity, but she is always thought of and enjoys the masses and music. The staff are so very caring and talented as some can sing and play musical instruments to entertain the residents"
- Another family member told us, "The staff make every day special, we cook Italian biscuits, our culture is observed, we love food and talk a lot when we sample our cooking. The staff are very friendly and do a fantastic job of taking care of the residents there." One person told us "I am blind, and the staff have created sensory things for me, different smells, touch, sound laughter, and the banter. I look forward to each day."
- A relative told us that the service was so responsive when their relative moved in. They said, "The daily atmosphere is cheerful, caring, and attentive. It is also extremely clean, welcoming and the care staff could not have been more helpful in giving special attention to the needs of my [relative]. As a result, they adapted amazingly quickly and well."
- Regular relative and residents meetings were held with people leading on discussion topics. One relative told us "We have requested things which would improve the quality of life for the people. They listened and acted." For example the call bell system was changed from a bell ringing and was now silent to minimise disruption and noise levels for people. Staff are now alerted by a vibration.
- People had requested better outdoor furniture to enable them to enjoy the enclosed garden and eating area. People told us not only did they replace the furniture. They went the extra mile by installing a retractable cover meaning people were protected from the sun and wind or showers but when weather was good it was a well utilised area giving joy to people who used the service and family and visitors.
- One relative told us "The staff team at Villa Scalabrini are always open to suggestions and have strived to create a visual and inclusive environment for their residents. They are great at actioning new ideas and involving the families in what they do. Their response to feedback is always prompt, open and honest."

### 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.

- Information was provided in a variety of languages, formats and communication methods were used to help assist with effective communication. All staff spoke several languages including English, Italian, Portuguese, Romanian, and many others. A range of communication methods were utilised, including: the use of white boards, pictorials, hand gestures and simplifying communication into a way people could understand.
- Staff were aware of The Accessible Information Standard (AIS) and this was recorded in care records and other documentation reviewed. The provider and registered manager had installed TV channels in a range of languages to ensure people could access programmes and services they wished to.
- People were supported to learn to use computers and the camera function to facilitate better communication, enable them to access interesting news stories in a range of languages and send and receive communication from family and friends.

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

- There was a robust complaints procedure in place and people were aware of how to raise concerns. No formal concerns had been received. One family member told us, "We have never had to complain, if we have any feedback at all we can talk to a member of staff or the management team and it is addressed."
- The service had received numerous thank-you cards, letters and positive feedback. One relative told us, "I can only tell you wonderful things about Villa Scalabrini. It is a wonderful place and the staff really do care. My [relative] is so happy here, and we are so glad they lived here."

### End of life care and support

- People at the end of their life were supported by staff and external health professionals to have as dignified a death as possible. The registered manager gave us examples of where staff had supported people and their families at this time.
- People and their relative gave very positive feedback in relation to end of life family support. They told us families were well cared for and the care and compassion extended far beyond the residents of Villa Scalabrini. One family member told us, "We are embraced with their love and spiritual care. They made our grieving process so much easier to bear."
- One relative told us how they were able to have a dignified end for their father they told us "They (Staff) provided an experienced escort carer for mum and mum to dad's funeral and cared for her so well during the funeral and burial, allowing my brother and I to grieve for and pay our respects to my dad without having to worry."
- A relative told us "It goes without saying that when making a decision to choose a final place for [Name] to live was one of the hardest things I have had to do. Villa Scalabrini were so responsive and most importantly of all staff who have a passion for what they do, made such a difference to all our lives."

# 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 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; 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

- People, relatives and staff told us the home was exceptionally well managed. Feedback from many professionals described the staff and management team as proactive, responsive, thoughtful and excellent. The team went the extra mile always for the benefit of people, their families and staff, and in doing so achieved the best possible outcomes for people. For example following the passing of a resident the management team facilitated a small gathering for family and friends and provided refreshments.
- Staff told us they felt so proud and valued to work for such a caring and nurturing service. Staff were recognised as individuals all of whom had great things to offer, their individuality was celebrated, and staff were so well supported not only in the work place but person/family. One staff member told us, "It's an honour for me, I am delighted to work here. I get here every day with a feeling of fulfilment knowing I, and the team, will make a difference."
- People, family and relatives spoke about the management team being outstanding, approachable and available while not compromising on quality. The management team were well known for being out and about in the home knowing how everything ran. All staff had clear lines of responsibility and accountability.
- The management team were extremely open, honest and transparent around duty of candour and sustained a culture which had embedded the core values. Staff told us how they felt liberated and empowered because they were valued and respected by a forward-thinking management team who supported embraced and encouraged diversity.
- There was a variety of lounges and communal living areas, three internal dining rooms as well as external dining areas. There was also a church which welcomed all religious denominations, and designated spaces for family and friends to get together.

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

- There were clearly defined roles for staff working in the home. The structure of the home supported development and gave staff opportunities to excel in their areas of expertise. The management team had champions for all aspects of the service, including falls, nutrition and dementia. They made time to connect with people and the entire service centred around the people.
- The management team completed quality assurance in every aspect of the service from the environment, hygiene, décor and gardens. For example, checks included, medicines audits, incidents, accidents and



health and safety and infection control. The regular in-depth quality assurance systems enabled any trends to be identified quickly to ensure the service was meeting the high standards people had come to expect. For example, the service had received a recent 5-star food rating.

- The management team had a clear understanding around their responsibility in relation to quality performance, risks and regulatory requirements as well as demonstrating an appetite for continuous learning and improving care and outcomes for people. For example, by running various projects to keep up to date with any regulatory changes. This included the introduction of a "Risk Champion" to make sure they implemented any changes efficiently and effectively. In addition, the management team provided regular English lessons to all members of staff to whom English is not their first language with the aim of raising the effectiveness of the communication with the individuals and across the teams.
- Staff demonstrated they were well trained and supported. They followed good practice guidance and were always researching the most up to date information for example the NICE (National Institute for Health and Care Excellence) guidance, improved oral hygiene and were involved in various improvement projects including a hydration project in partnership with CCG. This was very successful in reducing urinary tract infections and staff talked passionately about people's fluid and nutritional intake and the importance of continuing with the good practice they had learned.
- The service had received many beautiful thank-you cards letters and communications from people past and current thanking them for the outstanding care.

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

- People, staff and relatives felt engaged with the running of the service with regular team meetings and opportunities to catch up, which included social events. The provider carried out annual staff surveys to obtain feedback and measure quality assurance levels.
- The registered manager encouraged feedback from people and relatives and used this to help drive improvement. People and their relatives had a good relationship with the registered manager and staff team.
- Staff said they felt supported by the registered manager, deputy manager and the entire management team. One staff member told us, "We can voice our opinion whenever we have anything to say we are encouraged and supported. We have many opportunities to give feedback, it's a lovely working environment."

Working in partnership with others

- People, relatives and professionals gave consistently excellent feedback. One professional told us, "Over the past few years since the Trusted Assessor team has been in post we have built up a good relationship with Villa Scalabrini and their staff. Villa Scalabrini always have good communication and are very responsive to phone calls and emails. When visiting the home all of the staff have been very welcoming and eager to work together."
- Another professional told us "When Villa Scalabrinis residents are admitted to the local Hospital they provide accurate, detailed and up to date information about each resident and are always happy to be contacted to provide further information. They raise any concerns with us and bring them to our attention very quickly. "