

Methodist Homes Queens Court

Inspection report

2 Downing Close
Bottisham
Cambridge
Cambridgeshire
CB25 9DD

Tel: 01223811905

Website: www.mha.org.uk/ch52.aspx

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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?

Good 

Summary of findings

Overall summary

Queens Court is a residential care home providing personal care for up to 55 people. There were 52 people living at the home at the time of the inspection, including a number of people living with dementia. The care home accommodates people in one building which is split into separate areas. There is also a day centre within the home that people living there and people from the community use.

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

The registered manager, management team and staff working in the service were all very dedicated to providing care and support to people in an individual and meaningful way. Staff knew people's needs in detail including, their likes and dislikes and what gave them comfort. Staff went the extra mile so that people felt well cared for and people received high quality and personalised care. One person described how staff had given them their life back. Healthcare professionals were highly complementary about the support that people received at the home and the excellent working relationships they had with the staff. The service demonstrated the remarkable achievements made to improve people's quality and experience of life. People and their families were supported with outstanding end of life care. One relative said, staff recognised even the slightest changes in people's health and promptly requested the relevant healthcare support to ensure that they were comfortable. One relative told us, "They provide personal loving care to my [family member] the staff have been wonderful how they look after [family member], they have supported them."

People continued to feel safe living at the service. Risk assessments had been completed to ensure that action was taken to keep people safe. Staffing levels were appropriate to meet people's needs in a timely manner. People received their medication as prescribed. There were systems in place to record, monitor and learn from accidents and incidents.

Staff had the knowledge, skills and support they required to meet people's needs effectively. People's physical, emotional and social needs were identified so staff could meet these. People received support with eating and drinking when needed. People were supported to maintain good health and were supported by or referred to the relevant healthcare professionals. People consented to their care or when appropriate best interest decisions were taken on their behalf.

People, relatives and staff told us the service had strong leadership and an open and supportive culture. The service identified areas for improvement so that people received a good service.

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.

For more details, please see the full report which is on the CQC website at www.cqc.org.uk

Rating at last inspection

The last rating for this service was Good (report published June 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?

Good ●

The service was well-led.

Details are in our well-led findings below.

Queens Court

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, one assistant inspector and one Expert by Experience over one day. 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

Queens Court is a 'care home'. People in care homes receive accommodation and nursing or personal care as 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 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 of this information to plan our inspection.

During the inspection

We spoke with 11 people who used the service and nine relatives. We spoke with nine members of staff including the registered manager, assistant manager, one senior care assistant, two care assistants, one domestic, catering manager, one agency member of staff and an internal quality assurance officer.

We reviewed a range of records. This included two people's care records and medication records. Records relating to the management of the service, including policies and procedures were reviewed.

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

- Staff knew how to recognise abuse and reduce the risk of people suffering abuse. Staff had received training and had a good understanding of the provider's safeguarding systems and procedures. They were confident the management team would address any concerns and make the required referrals to the local authority. The registered manager was aware of their responsibilities for reporting concerns to the CQC.
- All of the people we spoke with told us they felt safe living at Queens Court. One person told us, "I feel safe when [staff are] helping me get up. They know what they're doing." Family members told us that they were satisfied that their relatives were safe, and staff knew how to support them. One family member told us, "It's a relief to us to know that she's being safely cared for and there are people to help her when she needs it." Another relative told us, "Overwhelmingly safe. I am so happy knowing she is in a safe place as that was such a worry in the first place she was in. I know I can go home and not worry."
- Information was available for people and for staff on adult safeguarding and how to raise concerns.

Assessing risk, safety monitoring and management

- Processes were in place to protect people from avoidable harm. Risk assessments were completed to identify risks to people's health and safety such as their risk of falls. Staff reviewed the risk assessments regularly and put actions in place to reduce these risks.
- The environment and equipment were safe and well maintained. Emergency plans were in place to ensure people were supported appropriately in the event of a fire.

Staffing and recruitment

- People we spoke with told us that they felt that there were enough staff available. The registered manager told us that they always requested agency staff who had worked in the service before so that they already knew people. Staff confirmed that they had time to support people with personal care and activities at a pace that suited the person
- Safe recruitment practices were in place to ensure staff were safe to work with vulnerable people.

Using medicines safely

- People's medicines were managed safely. Processes were in place for the timely ordering and supply of medicines. Medicines administration records indicated people received their medicines regularly. One person told us, "[Staff are] very good on the tablets; they're very reliable and always on time. I have six different tablets and an inhaler, and they make sure I take them."
- Staff completed training to administer medicines and their competency was checked regularly.
- The management team completed monthly audits of medicines to ensure policies and procedures were

followed and any errors or concerns were identified.

Preventing and controlling infection

- The service was clean, tidy and free of unpleasant odours.
- Staff had completed training in how to reduce the risk of infection and followed good practice guidance. The domestic staff were very knowledgeable about the risk of spreading infections and what precautions they should take.
- There was a good supply of gloves and other protective equipment to reduce the risk of infection. Staff used this protective clothing effectively.

Learning lessons when things go wrong

- Staff followed the provider's procedures when any accidents or incidents occurred. This included completing forms the registered manager reviewed.
- The registered manager was analysing accidents and incidents to identify any trends. Detailed information was recorded to ensure that where possible, action was taken to prevent a recurrence of accidents and incidents. Information was also shared with the regional manager so that they could raise any concerns if needed.

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

- Staff assessed and documented people's physical, mental and social needs and preferences in relation to their care and they planned care based on this.
- People's care and support was regularly reviewed to ensure they were provided with the right care and support in line with best practice and guidance. For example, staff were aware of the latest guidance regarding good oral care. This information was included in people's care plans.

Staff support: induction, training, skills and experience

- People and relatives told us that staff knew how to care for people and knew how to use equipment. Staff had received training when they first started working at the service and this was updated each year. One relative told us, "I feel [the staff team] are well trained and know what they are doing."
- Staff told us they continued to feel supported, received regular supervision on a one to one basis, and had an annual appraisal.

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

- The staff team had worked hard to improve the dining experience for people. Regular observations were carried out at meal times to ensure that staff offered people choices and assisted people to eat and drink when needed.
- People received the support they required with eating and drinking, and this was done at a pace that suited them. People were shown the choices by plating up the meals and taking them round so they understood what was being offered. One person told us, "We get good food and good care here. The choice of food is ok, and you always get something you like for the main meal."

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

- Staff supported people to attend appointments with health professionals such as GPs, dentists, chiropodist, opticians and hospital consultants. The home had an excellent working relationship with the local GP. One healthcare professional told us, "If my mother needed a care home I would bring her here. [staff] know people like the back of their hand. They see even the subtle changes in people."
- Relatives told us that they were consulted and kept informed about health issues. One relative told us staff had noticed their family member had been unwell the previous week and responded immediately by calling an ambulance. The healthcare professionals told them that as the medical emergency had been spotted so early it had made their recovery much quicker. Another relative told us that staff kept them informed in any changes in their family members health they stated, "They are good with communication."

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

- At the time of the inspection the service was being refurbished with new carpets and walls being painted. This had been managed well to limit any disturbance to the people living there.
- Suitable signs were displayed throughout the home, so people could find their way around.

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 obtained consent for people's care and support where possible. Staff had a good understanding of the principles, of the MCA and people were supported wherever possible to make their own decisions.
- When people could not make a decision, staff completed a mental capacity assessment and the best interest decision making process was followed and documented. Staff tried to ensure that any action taken was done in the least restrictive way possible. DoLS applications had been made when required.

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 Outstanding. At this inspection this key question has remained the same. 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

- There continued to be a very caring and friendly atmosphere in the service between staff and people using the service. This included all of the staff team and included small touches, for example, the chef came out of the kitchen and checked with people that they were enjoying their meal or if they would like anything different. Staff clearly knew people very well and were able to tell us about individuals and their lives and families. One person told us, "The staff are brilliant and they'll do anything for you, like run errands." Another person told us, "The staff are good here; they'll come and talk to you and they're kind and listen to you. If you ask for anything they'll try and get it for you" People told us this made them feel special
- People's families and health care professionals also continued to be very complimentary about staff working at Queens Court and the homely environment. One relative told us, "Now I can just relax - I can go away and not have to worry at all - we don't come up every day because we don't need to." Another relative told us that staff were, "Professional and incredibly caring. I'm a nurse and I would have them on my team." They told us their family member had been quite poorly and felt staff had looked after their family member as well as the family could have done themselves. They added, "[Staff] really know them as an individual. It's very homely here. I can come and go as I like, and everyone knows my name. I know that my [family member's] safe here and they are being treated as a person." Another relative continued to visit the home after his family member had passed away at Queens Court. Staff not only offered the person support, but he also enjoyed interacting with the people living at Queens Court.
- People and their relatives told us that staff treated them with the utmost respect and gave them the level of support they wanted. One relative told us, "They seem to have a good level of staff with good knowledge who are all motivated. They interact well with the people they get to know you, make you feel at home here the way they treat you. The Manager always has time for you." Another relative told us about the care their loved one had received and said, "I would just like to say that every member of staff was excellent and the care she received was outstanding."
- The provider ensured a caring approach in order to support people at times of need. For example, they worked with local health professionals to offer an emergency placement to a person who required this. The registered manager had completed a telephone assessment and arranged for the person to move into the home immediately so they could receive the support and care they needed at that time. This had meant the person was safe and was able to thrive in a caring environment.
- Staff continued to carry out little acts of kindness and thoughtfulness that made a big difference to

people's lives. For example, one of the domestic staff members always dressed a room with fresh flowers when someone new was moving in. They also regularly left little gifts such as chocolates on people's beds when they cleaned their room. This was done where staff knew it was safe and respectful. People had commented how much they enjoyed this and what a difference it made. The registered manager nominated the staff member or the providers Oscars – which they won for going above and beyond their duty the expectation of their role.

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

- Staff strived to involve people in making decisions about their care and how the service was run. People and their families were regularly asked their view about the care being provided and if it could be improved in any way. One relative confirmed this happened and told us, "It's lovely here, a real family - you can talk to anybody."

- People and their relatives confirmed that they attended meetings to discuss what was happening in the service and suggested new ideas. For example, one person requested to have a Chinese takeaway. This was organised by two members of staff for anyone who wanted to participate. People were given a choice from the menu to order what they wanted. As a result, one person who normally stayed in their room for mealtimes had enjoyed going into a communal dining area and eating with other people. This was something they had not previously done.

- Staff were innovative in understanding what made people happy and relaxed even if they could not verbally express their views. One person became anxious at times and staff had recognised that music really helped to calm them. The use of music had a positive impact on many aspects of their life such as when their family visited and whilst staff undertook personal care

- Staff had recognised that one person whose first language was not English was having difficulties understanding information and choices offered as their dementia progressed. The registered manager arranged for a staff member who spoke the same language to spend regular time with the person chatting and explaining things to them. This had a positive effect and meant that the person was able to make choices about their support.

Respecting and promoting people's privacy, dignity and independence

- Staff told us they made every possible effort to offer people choices and encourage them to be independent. One visitor told us about how staff had supported their relative to regain their mobility after coming to live at the home. They said, "[My family member] seems happy here and I don't think there could be a better place. It's friendly and the staff are caring. When they came in here they couldn't walk, and [staff] got them to walk in a couple of months. I think the thing they do best is caring."

- People's skills and life experiences were respected and promoted by staff. For example, one person who had been a decorator and was now living with dementia showed an interest in a room being painted. They were encouraged to become involved, gave the staff advice and joined in with the painting.

- Staff and relatives told us that after a person had died they continued to treat them with dignity and respect. One relative stated, "At the funeral I was approached by people who came to Queens Court before the cortege left. They were impressed that staff had come out and lined the street as a mark of respect as the hearse passed by. The relative went on to say, "This in my eyes was the sign of a very caring home, even after residents had passed away and once again carried out with extreme dignity."

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as Good. At this inspection this key question has 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.

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

- People received care and support truly centred around their individual needs and preferences. People's support plans were detailed and included what the person was able to do and how staff should support them. One relative told us, "They provide personal loving care to my [family member] the staff have been wonderful how they look after [family member]."
- People's likes, dislikes and preferences were completely known and respected, staff were committed to providing personalised care. They had an excellent understanding of each person's life history and knowledge of their needs from working closely with them. This knowledge had enabled staff to support people in order to improve their lives, with excellent results. For example, staff had supported one person to reconnect with estranged family members, resulting in regular visits.
- Prior to staying at Queens Court, another person had become withdrawn from their normal life and activities. Staff had worked hard to support the person with exceptional results and positive impact on their quality of life. The person had thanked staff and stated, "I'd like to thank you all for your friendship and support. When I first came to Queens Court I was a nervous wreck, now I've got most of my confidence back thanks to you and the nine weeks I spent with you. I can never thank you enough, you brought me back to life."
- Healthcare professionals told us that staff's excellent knowledge of the people they supported had a positive effect on the support they received. One health professional told us, "[Staff] know people so well. They were able to calm one person down enough so that I could give them their flu injection. Normally I struggle to take the person's temperature."
- The provider and staff went the extra mile to ensure people received the values of warmth, love, compassion, hope, humour and respect. For example, when one person had moved into the home with no access to personal money and in need of certain items, staff had taken the person shopping and the provider paid for the items. Staff then arranged for the person to visit their bank, so they could access their own money.

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 communication standards and told us of ways in which the service was meeting people's needs in relation to this. Information was available in different languages to meet the needs of people who used the service. The registered manager had also purchased an electronic audio device for a person with communication difficulties. The person used this to orientate themselves to the day and time without having to ask a member of staff. This enabled them to be significantly more independent and told us this vastly improved their day to day conversations.

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

- The staff team considered what people could do and made their dreams and possibilities become a reality. They enabled people to live a full life whatever their health conditions. The registered manager and staff had far exceeded people's expectations by arranging and taking people from Queens Court, all of whom were living with dementia, on holiday. People had not thought this would be possible and described the positive impact this had on their well-being. Staff had arranged for one person's relative to come and spend the day with them on the holiday so they could enjoy some family time.

- People in the local community continued to be encouraged to come in to the home and use it as a local hub. Local groups were able to use some of the rooms for their meetings and people living in the home were able to join in with them. The benefit of this was twofold as it had also helped introduce people to the home before moving in, so they could experience what it would be like to live there.

- The registered manager told us they promoted "Intergenerational activities." Students from a local college visited regularly and played board games and chatted to people. This made people feel valued, they enjoyed the company of younger people and welcomed the opportunity to do this

- People were also encouraged to take part in bespoke activities and events they had enjoyed before moving into the home. Trips out to places of interest were regularly organised. One relative had feedback to staff, "Thank you for taking mum around Burwell to see all the old places where she grew up and around the museum. She loved that day so much and often talked about it." Another person had requested to visit their old farm and local haunts. Staff had contacted the farm and the person was made to feel very welcome. The person proudly told the staff all about growing up and his memories of the local area.

- Both group and individual activities were available based on people's needs and interests. One person told us, "We do have lots of entertainment. We get a list of the activities going on. but if you don't want it you don't have to go. There are quizzes and other things in the morning and afternoons every day in the Day Centre." An interactive table was available for people's use. This could be wheeled anywhere in the service and used for all sorts of activities with people. They could play music on it, use it for reminiscence work and playing games. It was being used as a group activity but also when people did not, or could not, leave their bedroom it was also being used by individuals. It promoted mental, physical and social stimulation and was enjoyed greatly by those using it.

- Special occasions were celebrated. For example, there had been a recent remembrance service held which was of significant importance to a number of people living at the home.

Improving care quality in response to complaints or concerns

- The complaint procedure was displayed throughout the service. There had not been any complaints received since the previous inspection although people told us they knew how to raise concerns if needed. One relative told us, "I would go to the [registered] manager if I had any complaints and I'm pretty confident she would sort it out." Another relative told us, "I could raise concerns with them. The only thing I am worried about that if [family member] needs nursing care and has to leave, that would break my heart."

End of life care and support

- Health professionals praised the end of life care provided at Queens Court. One healthcare professional told us, "For end of life care I don't think you will find a better example than what you get here. In the last couple of weeks, they will alert me, they detect gradual deterioration. We discuss end of life wishes with the person or their relatives when they move into the home and then when the times comes we review it. Just in case medications are provided to ensure people aren't in discomfort or pain. They provide a carer to sit with the person 24 hours a day if their relative is not available, the use a carer who knows them, so they can comfort and talk to them. They are exceptional in that situation."
- The registered manager had received lots of compliments about the care they had provided to people at the end of their lives. One relative had stated, "Thank you so much for coming to [name of person's] funeral. ...and to be reminded of how much you did for him in his last months, then weeks, then days and hours. He was a lucky man to find himself at Queens Court. We knew this well, because earlier experiences in other care home had been very frightening for him and us and we wondered how we could ever leave him in such sadness and anxiety. You rescued us all." Another relative stated, "I would like to thank you for all the help and care that was given to both [name of relative] and myself when Mum passed away and how it was handled with extreme dignity. I was kept advised at all times of Mum's condition to even being advised when staff felt she was going to pass away within a short period of time for which I will be forever grateful. Once again can I just thank you and all the staff at Queens Court for making mum's life towards the end comfortable and dignified as possible." One relative had written to the registered manager and stated, "Thank you for allowing [family member] to come back 'home' for her final days. It was in no way easy for your staff, but you were all so wonderful."

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 remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider and registered manager promoted a person-centred approach towards supporting people. Staff confirmed that they knew people well and cared and supported them as individuals. One staff member told us, "When people first move in we get their assessment with their life history and about them, we talk to families, we talk with the person to make them feel settled and they will talk about what they like or did in the past. We get to know the person and what they like to talk about like serial like to talk about the news in the morning when supporting with care, so we will talk about that."
- All of the staff, people and relatives that we spoke with told us they found the registered manager, management team and care staff approachable. One staff member told us, "Everybody is friendly and helpful, it's a lovely place to work."
- The registered manager had been incredibly supportive of the staff team at Queens Court. When one member of staff had been off work due to an operation a hot meal was taken to their home every day. When another member of staff was experiencing ill health, they were supported to work the hours that suited them and were used as an extra pair of hands so that it did not affect the staffing numbers.
- The registered manager recognised and rewarded the staff for their hard work. One member of staff had been nominated for going the extra mile and had won the provider's award for excellence.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; 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 staff team were very complimentary about the support they received from the registered manager. One staff member told us, "I have been through 13 assistant managers and five home managers -the staff I work with now [name of registered manager] has been brilliant. She has really turned the home around. I do not have a bad word to say. Her work is amazing she is so compassionate."
- The registered manager was clear about their responsibilities about what they needed to report to the CQC. Risks were clearly identified and escalated where necessary.
- As well as regular audits carried out by the registered manager the provider also carried out an annual assessment of the home. This was taking place on the same day as the inspection. The person completing the assessment told us, "When I have been here for a few weeks I will look at documents, talk to people and review the service, then I would put together an action plan if required."

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

characteristics; Continuous learning and improving care

- People and staff were encouraged to contribute their views on an ongoing basis informally and through surveys.
- Staff meetings and meetings for people living at Queens Court and their relatives were held. This was a forum for people to discuss any issues or make suggestions for improvements.
- Staff confirmed that they were encouraged to make suggestions to improve the care and support provided. One staff member told us they made suggestions and the management team listened.
- The registered manager had effective systems in place to resolve issues two people had raised, such as repairs to the home's broadband
- Audit results were monitored by the provider and representatives of the provider visited monthly to provide support and undertake their own quality monitoring.
- Information from analysis of incidents and accidents, feedback from people and their relatives and health and social care professionals and complaints were used to continually improve the service being offered.

Working in partnership with others

- The registered manager and staff achieved good outcomes for people by working very well with health care professionals. For example, one person was admitted to hospital due to a medical condition. However, when the person was nearing the end of their life the staff worked with local health professionals to ensure the support and equipment was in place to allow them to return to the home to be cared for.