

# Margaret Homes Limited

# Tudor Manor

## Inspection report

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## Ratings

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

# Summary of findings

## Overall summary

This inspection took place on 14 and 16 December 2015 and was unannounced. At our last inspection in May 2013 the service was meeting the regulations of the Health and Social Care Act 2008.

Tudor Manor provides accommodation for up to 22 older people who require personal care. On the day of our inspection there were 22 people living there.

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

People were positive about the care they received and they all told us they felt safe. People told us that staff knew them well and supported them in their preferred way. We saw that staff had developed a good rapport with people who used the service. People commented on the homely atmosphere within the home.

The staff had a clear awareness and understanding of potential abuse and knew how to protect people from the risk of harm. There was enough skilled and experienced staff to meet people's needs. Staff were recruited in a safe way which ensured they were of a good character to work with people who used the service.

Risk assessments and care plans had been developed with the involvement of people. Staff had the relevant information on how to minimise identified risks to ensure people were supported in a safe way. People had equipment in place when this was needed, so that staff could assist them safely.

The manager understood their responsibility to comply with the requirements of the Mental Capacity Act 2005 (MCA) and Deprivation of Liberty Safeguards (DoLS). Staff knew about people's individual capacity to make decisions and supported people to make their own decisions.

People were treated with kindness, compassion and respect and staff promoted people's independence and right to privacy. People were supported to maintain good health; we saw that staff alerted health care professionals if they had any concerns about their health. People knew how to make a complaint and were confident that their complaint would be fully investigated and action taken if necessary.

People described the management team of the home as approachable and they said they felt the service was well managed. Arrangements were in place to assess and monitor the quality of the service, so that actions could be put in place to drive improvement. The management of the service was open and transparent.

## 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 ●

People felt safe and staff understood their responsibilities to keep people safe and protect them from harm. Risks to people's health and welfare were assessed and actions to minimise risks were recorded and implemented in people's care plans.

People were supported to take their medicines as prescribed. There were sufficient staff to support people and recruitment procedures were thorough to ensure the staff employed were suitable to support people.

### Is the service effective?

Good ●

The service was effective.

People's needs were met by staff that were suitably skilled. Staff felt confident and equipped to fulfil their role because they received the right training and support.

Staff understood the principles of the Mental Capacity Act 2005 so that people's best interests could be met.

People were supported to eat and drink enough to maintain their health. Staff monitored people's health to ensure any changing health needs were met.

### Is the service caring?

Good ●

The service was caring.

People received care and support that was tailored to their individual needs and preferences.

Staff were highly motivated and inspired and offered care that was kind, and compassionate. Staff treated people respectfully, and supported people to maintain their dignity and privacy.

Staff were very knowledgeable about people's needs, likes, interests and preferences.

### Is the service responsive?

Good ●

The service was responsive.

People were actively involved in developing their care plan which was updated when their needs changed.

People were supported to follow their interests and take part in social activities.

People knew how to raise any complaints or concerns and felt listened to.

### **Is the service well-led?**

**Good** ●

The service was well led.

People, relatives and staff felt well supported by the registered manager who demonstrated strong leadership.

The registered manager promoted an open and transparent service and people had the opportunity to share their views about living in the home.

Staff understood their roles and responsibilities and were given guidance and support by the management team.

Systems were in place to monitor the quality of the service provided.

# Tudor Manor

## **Detailed findings**

### Background to this inspection

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

This inspection took place on 14 and 16 December 2015 and was unannounced. The inspection team consisted of one inspector.

We looked at the information we held about the service. This included the notifications that the provider had sent us about incidents at the service and information we had received from the public. We also contacted the local authority who monitor and commission services, for information they held about the service.

We spoke with 13 people, five visitors, four professionals, four care staff, team leader, deputy manager and the cook. We looked at the care records for four people. We looked at the way people's medicines were managed, three staff recruitment files, staff training records and the manager's quality monitoring audits. In addition we used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experiences of people.

# Is the service safe?

## Our findings

People and their relatives told us that care and support was delivered in a safe manner. People confirmed they felt safe and comfortable when they were supported by the staff team. One person told us, "I feel safe here, the staff make sure of that". Another person said, "I feel safe here, the staff would not let anything happen to me, or anyone else, they guard us with their lives". A relative told us, "I think my family member is very safe here, the staff always provide the support they need when they are walking or with personal care, we have no concerns".

Staff we spoke with had a good understanding of their responsibilities to keep people safe, and they confirmed they had received training to ensure they were able to recognise when people may be at risk of harm. All of the staff we spoke with were aware of the procedures to follow if they felt someone was at risk. One staff member told us, "I have had the training, and if I had any concerns about people I would report it straight away to a senior or the manager. I know that action would be taken to protect people from harm or abuse". Information provided to us, and the records we saw showed that the registered manager had reported concerns appropriately to the relevant people and had taken the appropriate actions to ensure people were kept safe.

We saw that people had risk assessments in place which identified any risks due to their health and support needs. These assessments included information for the staff to follow to minimise the chance of harm occurring. Some people were at risk of developing pressure sores due to their fragile skin and we saw that cushions were in place to prevent this. Some people required support to stand and we saw staff support these people in accordance with their plans offering reassurance at all times. One relative we spoke with told us, "The staff do a great job, they are very patient, and offer lots of encouragement to my family member when they are supported to walk". A staff member we spoke with told us, "Everyone has been assessed and we have risk assessments in place to guide us on how we need to support people in order to ensure any risks are reduced. These are kept under review, but if we have any concerns we only have to speak to the registered manager and she will come and advise and reassess the person".

People and their relatives told us they were satisfied with the staffing levels. One person said, "There is always staff around, and I am well cared for, I never have to wait, the staff are always there when I need them". Another person told us, "There is enough staff, we are well looked after". A relative we spoke with said "I think the staffing levels are good I have never had an issue or concern about there not being enough staff". All of the professionals we spoke with also told us the staffing levels were good, and people's needs were met. One professional said, "There is always staff around and it is lovely to see staff chatting and having a laugh with people".

We observed that staff were available in the lounge areas to support people with their needs, and where people required assistance we saw that staff responded in a timely manner. Staff we spoke with told us they thought the staffing levels were sufficient, and they did not feel rushed. One staff member said, "There is enough staff on duty to meet people's needs, we have time to care". The registered manager confirmed that she took people's dependency levels into account when planning staffing levels. She was able to give

examples how she had increased staffing levels to enable people to have one to one support when going out or when people were poorly and needed more support. The registered manager stated that she worked with staff to support people which enabled her to observe and ensure there was enough staff to meet people's needs.

People told us they were happy with the support they received and we saw recruitment checks were in place to ensure staff were suitable to work at the service. These checks included requesting and checking references of the staff members character and their suitability to work with the people who used the service. We spoke with some staff who had recently started working at the home. All of the staff confirmed they commenced employment after all of their recruitment checks had been concluded. One staff member told us, "I had my interview and then I had to provide references and a police check to make sure I was suitable for this work. The staff and manager have been great since I started working here, I have had lots of support".

People were happy with the support they received with their medicines. One person told us, "The senior staff give me my tablets, and they always make sure I have taken it before they leave me to sign my chart". Another person said, "I am happy with the way staff give me my medicines. If I am in pain they always make sure I have my pain killers as well, they always ask". We saw people's medicine records were well maintained; staff had signed to confirm people had their medicines. We checked the balances for some people's medicines and these were accurate with the record of what medicines had been administered. We found some people were prescribed 'as required' medicines. Supporting information was in place to guide staff in the signs and symptoms which might indicate people needed their medicine for those people who were unable to request this. We observed a staff member administering people their medicines, and we saw they explained what the tablets were for and they ensured people had taken their tablets before signing the records in place. Staff we spoke with and records we looked at confirmed that staff had received medication training. Observations of staff competencies were in place to ensure they practiced in a safe manner.

# Is the service effective?

## Our findings

People told us that they were happy with the care they received and that staff were helpful and supportive. One person told us, "The staff are angels, they are very good at what they do I know I am in the best place I love it here". Another person said, "The staff are lovely, they are so good to me, they are well trained and I am very happy here". A relative we spoke with told us, "The staff here are very good, some of them have worked here for ages and I think they are very skilled and knowledgeable, they know what they are doing".

We saw that staff had the skills and knowledge to meet people's needs and promote their wellbeing. Throughout the day staff demonstrated that they understood people's needs and the support they required. For example one person was supported into their wheelchair and we saw that staff offered encouragement and reassurance to the person and they supported them at their pace. This support enabled the person to retain their independence and met their mobility needs.

Staff told us they had received the training they needed to care for people effectively. One staff member said, "We have regular training and this enables us to keep up to date and to care for people safely". Another staff member told us, "We have regular training updates, which is good as it refreshes my knowledge. I recently completed equality and diversity training which opened my eyes and made me think about things differently". The staff who had recently started working at the home told us they had received an induction which enabled them to become familiar with the routines at the home. They said it also equipped them with the knowledge and skills they needed for their role. One staff member told us, "I had a good induction which included shadowing experienced staff and I have read people's care plans, which was nice to be able to read all the information before I provide care for them. I have also completed training so I have the skills for my role. It has been very positive and I love my role".

The registered manager told us that all new staff would complete the Care Certificate induction process to enable them to gain the skills for their role. We saw that the registered manager had a system in place to monitor the training needs of the staff, and this included identifying when refresher training was needed. We saw that future training events were displayed on the staff notice board, which demonstrated that training was on-going and available for staff to access.

Staff confirmed they received regular supervision and an annual appraisal and we saw a plan was in place to ensure supervision was provided on a regular basis. Staff told us they were supported well by the management team and by each other. One member of staff said, "We can go to the manager or deputy at any time, we all support each other and work as a team, it's a nice place to work and I love my job".

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. The application procedures for this in care homes and



hospitals are called the Deprivation of Liberty Safeguards (DoLS).

Staff we spoke with had an understanding the requirements of The Mental Capacity Act 2005 (MCA) and the Deprivation of Liberty Safeguards (DoLS). A staff member we spoke with told us, "Everyone here has the capacity to make decisions for themselves, but if they didn't they would be assessed and we would support them based on the outcome of this and in their best interests". We observed and heard staff asking people's consent before providing support. For example one person was asked if they wanted to join in an activity, which they declined, and this decision was respected.

People we spoke with told us they enjoyed the food and were happy with the quality and quantity of food provided. One person said, "The food is lovely here, we have lots of choices and if we fancy something different we have it, nothing is too much trouble". Another person said, "We have meetings so we can discuss what we want on the menu, so we decide on what we eat, we are consulted about the food to make sure we like it". A relative told us, "The food looks lovely here, my family member can have whatever they want, they can even have wine or beer if they want which I think is great as there are no restrictions on people". We saw that people were offered regular drinks and snacks throughout the day and fresh fruit was available in the lounge areas so people could help themselves.

We spoke with the cook who had a good knowledge of people's preferences and dietary needs, including providing meals to meet people's diabetic needs. The menus that we saw confirmed that people were offered a varied nutritional diet with vegetables and fruit. The cook told us, "If we have concerns about people losing weight we offer milky drinks, and put more butter with the potatoes. I get feedback from people to make sure they are happy with the food provided".

We saw that there was a system in place to monitor any risks to people of not eating or drinking enough. One person told us, "The staff monitor my food and fluid intake due to my health condition, they are very good and encourage me to eat or drink more if I need to". A staff member we spoke with told us, "When risks are identified we monitor people's intake and complete records. We also increase the frequency they are weighed and complete referrals to health professionals when necessary". We saw that when concerns have been raised about people's dietary needs referrals have been completed to healthcare professionals for advice and support.

People told us they were supported to maintain their health care needs. One person told us, "The staff are very good and if I need the doctor they call him out, they don't mess about". Another person said, "I have been having some trouble lately and I have been in pain. The staff have been very quick to call the doctor who has visited me and now I need to go into hospital for further tests. The staff are very responsive and supportive when these things happen". People confirmed they had access to other health care services. One person said, "I have all the checks done here for my eyes, feet and the district nurse comes to check on me". The health care professionals we spoke with all confirmed they received referrals when needed. One health care professional told us, "The staff are very responsive and make a referral as soon as they identify an issue. The staff follow all of the recommendations we make and they are very consistent in providing the support we need". Another professional said, "We have no issues here it is a good home, we work well with the staff who do an fantastic job looking after people's healthcare needs". A relative we spoke with said, "The staff are very good, they have arranged for all the different healthcare professionals to come here and complete the routine checks for our family member. They keep us informed of any issues, we couldn't ask for more". We saw that records were in place to monitor people's healthcare needs to ensure all the staff had up to date information about any changes or on-going issues.

## Is the service caring?

### Our findings

We observed a positive and caring relationship between people and staff. We saw staff treated people with respect and in a kind and compassionate way. One person told us, "This is the best home, there is a great family atmosphere here, and the staff are kind, caring and very attentive to me, I am very happy here". Another person said, "I am very well cared for, the staff are marvellous, smashing, and anything I want or need I get. We can have a laugh with the staff they are all kind and friendly and do a fantastic job looking after me". People who visited the service were very complimentary of the care. One relative told us, "I am very impressed, its brilliant here, very homely and the staff are genuine, caring and compassionate. They look after my family member so well, I would move here. I am very happy with everything". A healthcare professional told us, "People receive very good care here, it has an inclusive atmosphere and the staff are friendly and kind. People tell me they are very happy here and are well looked after".

We saw that staff encouraged people to make choices as part of their daily lives, for example we heard staff asking people about where they would like to sit and what they would like to do. People told us staff supported them to maintain as much independence as possible. One person told us, "The staff come into my room in the morning and they always have a smile. They ask me what I want to wear and then help me to get dressed, but they always encourage me to do as much for myself as I can". Another person said, "I enjoy having a bath, I am never rushed and I have a good chat with the staff. They often say they would leave me for a bit to have some privacy but I want them there so I always say it's okay to stay. They help me wash the bits I cannot reach and they are very gentle it's just lovely".

We saw that staff were attentive and observant when people showed signs of discomfort, checking with them to see if they were in pain or if they needed anything. We saw that staff engaged positively with people whilst providing them with support throughout the day. For example people were approached by staff in a sensitive and discreet manner to see if they wanted to use the toilet. People were asked if they had everything they needed and staff checked on their wellbeing. One person told us, "The staff are always checking to see if I am okay and if there is anything I need they are very good. They are always like this, its not just because you are here". Another person said, "Its nice that the staff have the time to sit down and hold my hand. We have a little chat about things, I love that".

We observed people's privacy and dignity was respected by staff when receiving care and support. For example when supporting people to stand the staff made sure they adjusted people's clothing if it was needed. We observed that people were asked if they wanted to wear protective clothing at meal times. One person said, "The staff always make sure my dignity is maintained when they help me with my personal care, I never feel embarrassed". Another person told us, "The staff always knock before they come into my room they are very respectful". The staff we spoke with all commented on the importance of making sure people's needs were met in a respectful and dignified way. One staff said, "I am always mindful of the way I support people with their personal care. I make sure I ask them if it is okay to help or to wash a certain area. It is important their dignity is maintained and that I provide support in a respectful way". Arrangements were in place to support people with their personal mail, and finances and staff were aware of protecting people's confidentiality.

We heard about how staff and the registered manager supported people and their families to try and fulfil people's aspirations and goals. We were told about some of the experiences people have enjoyed as a result of the staff and registered manager dedication to arrange and plan these events. For example one person visited their favourite football ground for their birthday and had a great day out with their family. Another person's dreams were fulfilled when they successfully applied to be in the audience of their favourite chat show host. The person told us, "It was fabulous I had such a good time. Some of the staff came with me to support me, and we enjoyed every moment. It was a dream come true. I even got to meet him and we had a brief chat. It would not have been possible if it wasn't for the manager and the staff they are so dedicated, and go that extra mile, I cannot thank them enough". Another person told us, "The manager and staff always take the time to ensure birthdays are made a special event for us. We can have a party, a cake, and entertainment if we want. They will do anything for us to make sure we have a great day".

Relatives and visitors we spoke with told us they could visit at any time and were always made to feel welcome by the staff team. One person's visitor said, "I am always made to feel welcome here it's a lovely place to visit. The staff always offer me a drink and I know I could stay for a meal if I wanted to. It is home from home". Another visitor told us, "There is a great atmosphere here. I am always made to feel welcome by the staff and manager. I think it is a lovely home that provides good care".

We saw that the registered manager had made contact with the local authority requesting for information about their advocacy services so that this information could be displayed in the home. Advocacy is about enabling people who may have difficulty speaking out, or who need support to make their own, informed, independent choices about decisions that affect their lives. We were advised that nobody was using the services of an advocate at the time of our visit. The registered manager confirmed that she would assist people and make referrals if this was needed or requested.

## Is the service responsive?

### Our findings

People confirmed that the support they received from staff met their individual needs. One person said, "The staff provide me with the support I need. I do as much for myself as I can and then they do the rest". Another person said, "I am very happy with the care I receive, the staff always ask what assistance I need and then they help me". Relatives confirmed their family member received support in their preferred way and that staff were responsive to their needs. One relative told us, "My family member is very happy here and has settled very well. They seem at ease with everything. The staff provide the support they need and my family member is happy with everything. It is a weight off my mind knowing they are happy and being looked after".

Relatives we spoke with confirmed they were involved in the care their family member received and informed about any changes. One relative told us, "My family member and I were consulted about their preferences and routines, and about the support they needed so this could be put in the care plan. The staff keep me up to date with any changes". Another relative said, "The staff involve us and we have been invited to attend reviews".

We saw that people were involved in the way their care was provided. One person told us, "I have a care plan which tells the staff all about me. We have meetings to make sure nothing has changed and it is up to date. I have signed it as I am happy with it". We saw that each person had a care plan that was tailored to meet their individual needs. The care plans included information about people's previous lives, their likes, dislikes and preferences. These were updated on a regular basis reflecting any changes in people's needs. A staff member we spoke with told us, "I make sure that if someone's needs have changed I report it to the team leader so she can amend the care plan. We also write it in the communication book so all staff are aware that there has been a change". Discussions with staff demonstrated that they understood people's likes and dislikes and the way they preferred to be cared for.

People told us there was an activities programme in place, and staff encouraged them to join in if they wanted to. One person told us, "There are lots of activities we can join in with, and trips out, we don't get bored here". Another person said, "There are activities and I join in when I want. We can go to church if we want to on a Sunday and we have the vicar come once a month". A relative we spoke with told us, "There also seems to be things going on here, either activities or entertainment or outings. My family member is happy just watching and taking it all in. She enjoys the trips out". We saw a variety of activities taking place which included; gentle exercises, nail care, bingo, quizzes, and people were taken out to the shops. All of the people we spoke with told us they were happy with what activities were provided. We saw that festive activities took place and included a Christmas jumper day, parties, carol service, and church visits.

People we spoke with did not have any complaints about the service and their relatives and visitors told us that if they had any complaints they would report them to the registered manager. One person said, "If I had any concerns I would speak with the boss (manager) and I know she would sort it". Another person told us, "I have no complaints but I know that I could speak to the staff or the manager if I wanted to discuss anything". Relatives we spoke with all said they would speak to the manager if they had any issues, but none

of them had any concerns.

We saw there was a copy of the complaints policy displayed in people's bedrooms, and in the corridor of the home. We were advised that no formal complaints had been received since our last inspection. We saw that records were in place to record any complaints raised. All previous complaints had been responded to promptly and appropriately with the action taken recorded. The registered manager told us about some minor concerns that had been raised such as laundry items going missing and the quality of the butter that was provided. Both of these had been responded to quickly and action taken to address the issues.

## Is the service well-led?

### Our findings

All of the people we spoke with told us they thought the service was managed well. One person told us, "The manager is good and makes sure this place runs well". Another person told us, "The boss (manager) has everything under control she runs this place like a ship, she is very good and doesn't miss a thing". It was evident that good relationships had been developed between the registered manager and people who used the service. For example we saw people smiling, laughing and joking with the registered manager. One person said, "The manager is marvellous very approachable and listens to what I have to say. She turns her hand to anything and nothing is too much trouble. She will do all she can to make sure I am happy". It was clear from the discussions we had that the well-being and welfare of people was of paramount importance to the registered manager. We saw the registered manager spent time talking and supporting people and that people knew who she was. Discussions with her demonstrated that she knew people well and knew about their specific needs.

All of the relatives we spoke with were complimentary about the way the service was managed and about the management team. One relative said, "The manager does a great job, she runs the home well, and is approachable. She knows what is going on and she is visible which is reassuring". Another relative told us, "All the staff and the manager are friendly and approachable. The manager is very hands on and she cares about the people that live here. She gets people involved and is very dedicated". Healthcare professionals we spoke with also made positive comments about the way the home was managed. One healthcare professional said, "We have a good relationship with the manager, she is friendly and approachable, and manages this home well". Another professional said, "The manager advocates on people's behalf and in their best interests. The care is person centred and people's needs are met to a good standard".

There was a positive and inclusive culture which ensured people received care and support which was tailored to their individual needs. The registered manager had a clear vision and set of values which included the involvement of people, being honest and providing positive life experiences and a good standard of care. Discussions with staff demonstrated that the staff understood these and we saw they put them into practice. This was evidenced by the positive interaction between the registered manager, staff and people and the involvement of people in their own care. For example staff ensured all aspects of people's care such as their dignity, independence, safety and life choices were respected. This meant people were at the centre of the service and everything revolved around their needs.

We saw there were clear lines of accountability in the service. The registered manager was supported by a deputy and a team leader. Both had key areas they were responsible for. For example the deputy was responsible for completing audits, and overseeing the medication systems. The team leader implemented and updated people's care plans. Both supported the registered manager with supervising the staff team. Tasks were clearly delegated to ensure that the service were monitored effectively and staff support systems were in place. We saw there was a delegation book in place. Information was recorded for staff so they was clear about who they would be supporting on that shift, and what tasks had to be completed.

All of the staff we spoke with confirmed they felt supported by the management team. One staff member

told us, "The manager is approachable and always has time for us, her door is always open. I feel listened to and involved as the manager includes us and shares information and is open to new ideas. We have good teamwork here; everyone works together for the good of the people". Another staff member told us, "The manager is the best thing that happened to this home. She is person centred, supportive, approachable and listens. It is a lovely place to work and I love my role here".

We heard from people and their relatives that regular meetings were held to discuss the way the service was provided. People told us they were able to raise and discuss any issues they had or suggest ideas for the future. We saw the minutes from the meeting that took place in November. Discussions were held focusing on the five key questions that the service was regulated against. People discussed what each question meant for them and if the home was meeting its obligations to ensure people received a service that was safe, effective, caring, responsive and well led. Feedback provided was very positive and the registered manager ensured that people had an opportunity to raise any suggestions for improvement. We saw that suggestions were made for the things people wanted during the Christmas period. The registered manager agreed to make the required arrangements in response to this. A relative told us, "They have regular meetings here for people and families. I have attended some, and we discuss all aspects of the home. I feel involved and able to raise any issues on behalf of my family member".

We saw that systems were in place to gain feedback about the service provided. Surveys had been sent out as part of the quality assurance processes to gain feedback from people, relatives, staff and professionals. The surveys focused on the five key questions. A report was compiled of the findings which were all positive following the recent analysis undertaken.

We saw that the registered manager had systems in place to monitor accidents, and incidents, which were analysed to identify any patterns or trends. We saw that when a pattern was identified the registered manager had taken action to minimise the risks of a re-occurrence. For example one person who had been identified as falling frequently had equipment in place to reduce the risk of further falls. Their risk assessment and care plan had also been updated.

We saw that the registered manager had audits and quality monitoring systems in place to monitor the safety, effectiveness and quality of the service provided. For example audits were completed to ensure care planning documentation was up to date, and medicine audits were completed to ensure staff were following the procedures in place. We saw that where shortfalls had been identified action was taken to address these, such as speaking with staff about their performance. This demonstrated that the service was monitored to ensure safe standards were in place. Discussions with the registered manager demonstrated that she was aware of her legal responsibilities to notify us of events that they were required to by law. The registered manager had kept themselves up to date with new developments and requirements in the care sector. She was also aware of the new regulation regarding the duty of candour, and had this regulation displayed on the notice board to enable staff to read this.