

Auden House Care Limited

Auden House Residential Home

Inspection report

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Date of inspection visit: 05 June 2019 07 June 2019

Date of publication: 02 August 2019

Ratings

Overall rating for this service	Outstanding ☆
Is the service safe?	Good
Is the service effective?	Good •
Is the service caring?	Good •
Is the service responsive?	Outstanding 🌣
Is the service well-led?	Outstanding 🌣

Summary of findings

Overall summary

About the service

Auden House Residential Home is a residential care home providing accommodation and personal care to 24 people aged 65 and over at the time of the inspection. The service can support up to 24 people.

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

The registered manager and providers shared a clear vision and very strong values. They led by example and were passionately committed to providing exceptionally good quality individualised care and support.

They demonstrated a strong commitment to continuous improvement and took great pride from the home's achievements. Their values and vision were at the centre of all developments. This ensured people were treated as individuals, were respected and were at the heart of the service provided.

Everyone was very positive about the registered manager and their exemplary approach to providing holistic support to people who used the service and staff who worked at the home.

Quality checks and audits enabled the registered manager to ensure improvements were embedded and excellent quality standards were maintained.

Activities were tailored to meet people's individual needs, preferences and interests. They were designed to promote people's well-being, prevent people becoming socially isolated and to keep people active.

Staff had a clear understanding of the importance of providing people with the opportunity to develop and maintain friendships and relationships. They had an exemplary approach to finding activities that were not just fun, but also helped people to develop confidence and friendships. Managers, the provider and all staff shared a passionate commitment to developing a sense of belonging and community

Care records identified what people wanted to achieve with the support and how staff could help this happen.

Staff were committed to ensuring people's wishes at the end of their lives were respected and that people were able to die with dignity and amongst people who they knew and who knew them well.

People felt safe living at the home. Risks were well managed. Medicines were managed safely. Staff helped people to stay healthy and people had access to a range of health care professionals.

People were supported to have maximum choice and control of their lives. People were involved in decisions about their care. Policies and systems in the service supported this practice.

Staff received the training and support they needed to carry out their roles effectively. Staff had been safely

recruited and there were enough staff to provide people with the person-centred support they needed.

The home was very clean, well decorated and furnished. People enjoyed the home cooked food.

The registered manager, provider and staff all knew people really well. Interactions were warm and friendly. Staff spoke with people in a respectful, kind and gentle way.

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 (published 20 December 2016).

Why we inspected

This was a planned inspection based on the previous rating.

You can read the report from our last comprehensive inspection, by selecting the 'all reports' link for Auden House Residential Home on our website at www.cqc.org.uk.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our reinspection 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?	Good •
The service was caring.	
Details are in our caring findings below.	
Is the service responsive?	Outstanding 🌣
The service was exceptionally responsive	
Details are in our responsive findings below.	
Is the service well-led?	Outstanding 🌣
The service was exceptionally well-led.	
Details are in our well-Led findings below.	



Auden House Residential Home

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 first day of inspection was undertaken by one inspector and an expert by experience. An expert by experience is a person who has personal experience of using or caring for someone who uses this type of care service. The second day of inspection was completed by one inspector.

Service and service type

Auden House Residential Home 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. Inspection activity started on 5 June 2019 and ended on 7 June 2019.

What we did before inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We also asked Healthwatch Tameside for their views on the service. Healthwatch is an independent consumer champion that gathers and

represents the views of the public about health and social care services in England. 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.

We used all of this information to plan our inspection.

During the inspection

We spoke with thirteen people who used the service and three relatives about their experience of the care provided. We spoke with seven members of staff including the provider, registered manager, administrative assistant, care workers and the cook. During the inspection we also spoke with three visiting health care professionals.

We reviewed a range of records. This included two people's care records and multiple medication records. We looked at two staff files in relation to recruitment and staff supervision. A variety of 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

- People were protected from the risk of harm, abuse and discrimination. Staff had received training in safeguarding people from abuse and were confident if they raised any concerns they would be dealt with appropriately.
- People who used the service told us they felt safe living at the home. They said of staff, "Safe? Yes. They are nice and gentle with care", "No one is rough or rude" and "I can't fault any of them."
- The relatives we spoke told us that that they were happy with the care provided and had no concerns or safety issues for their loved ones.

Assessing risk, safety monitoring and management

- Risks to individuals were identified and well managed. Risk assessments were person centred and guided staff on what the risks were and what action they needed to take to reduce the risk.
- Health and safety checks in the home had been carried out. There was a programme of regular maintenance to the building and servicing of equipment used. Concerns or repairs were dealt with effectively.
- Systems were in place to protect people in the event of an emergency. Contingency plans gave information to staff on action to take for events that could disrupt the service.

Staffing and recruitment

- We found there was a safe system of staff recruitment in place.
- Everyone told us there was enough staff to ensure people received the support they needed in a timely manner. One person said, "There's plenty of staff; and good ones."
- The service had policies and procedures to guide staff on what was expected of them in their roles.

Using medicines safely

- •There were safe systems in place for managing people's medicines. Records we reviewed were fully completed and people received their medicines as prescribed.
- Medicines were stored safely and securely. Stocks of medicines we checked were accurate.
- We found medicines management policies and procedures were in place. Records showed that staff had been trained in the safe administration of medicines and had their competency to administer medicines checked.

Preventing and controlling infection

- The home was visibly clean and there were no unpleasant odours.
- Records showed that staff had received training in infection prevention. There were robust systems in place to prevent the spread of infection or disease.
- Suitable facilities were in place for the laundry of people's clothes

Learning lessons when things go wrong

- Records were kept of accidents and incidents that occurred to people who used the service and to staff.
- Managers of the service reviewed the action taken to identify any patterns or lessons that could be learned to prevent future occurrences.



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

• Care records included a detailed preadmission assessment. This included information about people's wishes, choices and the support they needed.

Staff support: induction, training, skills and experience

- Staff had the skills, knowledge and experience they needed to carry out their roles effectively.
- Records showed staff completed a range of training the provider considered mandatory. Staff told us the training was good. One said, "It's great, if you have an interest in something, you can ask for extra training."
- Staff had regular supervision and told us they could always speak to a manager and felt very well supported. Supervisions were used to offer staff support and also to set standards of care and check out staff understanding of their roles.

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.

- We found the provider was working within the principles of the MCA. The correct procedures for applying for DoLS had been followed and conditions on authorisations were being met.
- Records showed that people, or where appropriate their representatives, had been involved in decisions about their care.
- People told us they were supported to have choice and control in how their support was provided. A relative told us "[Person who used the service] is totally involved in care plan reviews."

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

- We found people's nutritional needs were met. Food was stored and prepared safely. The home had received a five-star food hygiene rating.
- People told us the meals were very good and there was always plenty to eat and drink. People told us, "There is always choice in eating. Food is tasty", "Lunch time we get two meal choices. Food is excellent" and "We get to eat fruit and vegetable grown in the garden." People clearly enjoyed the food. We heard one person ask a staff member to; "Convey my compliments to the chef."
- We saw that ensuring people ate well was important to all the staff at the home. The food was wholesome and home cooked. The cook knew peoples likes and dislikes. During our inspection we saw staff gently encourage people to eat. Lunch was unhurried, and staff allowed people the time they needed to eat independently. When people didn't want to eat what they had chosen, staff offered them alternatives.

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

- We saw that bedrooms were spacious and personalised and contained pictures and photographs of things that were important to people.
- The were separate lounges that people could choose to sit in; this meant they could listen to music, watch television or sit quietly.
- The home was well maintained, and furnishings were in good condition.

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

- People were supported with their health needs and had access to a range of health care professionals. Records showed these included; district nurse's, optician's, G.P's and speech and language therapy.
- The home used an electronic system, 'Digital Health' which allowed them to make immediate contact with health care professionals at the local hospital. This allowed the service to relay people's symptoms via a hand-held electron tablet and improve treatment response times.
- They also used the hospital 'Red Bag' initiative. This aims to standardise and speed up the transfer of paperwork, medication and personal belongings of a resident throughout their hospital visit. It also ensures hospital staff know what is important to and for the person.



Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

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

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

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

- People were treated as individuals. Their life history and preferences were respected.
- We observed staff interacted with people in a friendly, relaxed and sensitive manner. Our observations of care, review of records and discussion with the registered manager, staff and people demonstrated that discrimination was not a feature of the service and that the service had a very positive approach to supporting people as individuals.
- Everyone we spoke with was positive about the staff and told us staff were kind, friendly and polite. People said, "It is absolutely wonderful here. Years ago, I was frightened going into a care home, but here they treat you with courtesy", "Staff know what they are doing, are polite and will listen" and "I am very well looked after. Staff are all very kind." A relative told us "I enjoy coming here. It is a happy place to come."
- During our inspection we observed the registered manager, provider and staff all knew people really well. Interactions were warm and friendly. Staff spoke with people in a respectful, kind and gentle way. Staff clearly enjoyed working at the home. One told us, "Its lovely. It's like a family."
- A relative told us "Staff know everyone by name. Last week a resident came from the hospital, everyone welcomed her."

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

• Residents we spoke with were happy and contented with the care that was offered to them by staff. They told us staff considered their preferences and respected their choices. People told us, "Staff will ask my consent for a shower or hairdressing" and "They [staff] always knock before entering, that's respecting me." Other people said, "Staff respect my choices very much. If I want to stay in bed or what I choose to wear" and "Yes, I can make my own choice and they respect my preferences."

Respecting and promoting people's privacy, dignity and independence

- Care records we saw, and our discussions with staff, showed that promoting and maintaining people's independence was at the heart of the service. We observed staff giving people the time and encouragement they needed to do things for themselves.
- People's right to confidentiality was respected. Care records were stored securely. Policies and procedures we looked at showed the service placed importance on protecting people's confidential information.
- People told us that staff were polite, respectful and protected their privacy. They said, "Staff are kind and show respect and treat me with dignity" and "Daily I dress myself. Staff always knock before entering my

room. In the shower staff ensures the door is closed and curtains are drawn."

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 improved to outstanding.

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

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them.

- Activities were tailored to meet people's individual needs, preferences and interests. The home had three activity coordinators, who along with other staff, were highly motivated and proactive in finding out what interested people and what would encourage them to take part in activities. We saw there was a wide range of activities on offer, both in the home and in the community, to help prevent people becoming socially isolated and to keep people active. People were extremely positive about the activities on offer and the positive impact these had on people's wellbeing. Relatives said, "I feel more relaxed. [Person who used the service] was worse at home with just carer support. Here there are more people to talk with. [Person] has come out of [their] shell" and "There are always activities. Staff have organised Christmas fayre, school children singing, once a month a singer comes, Greek taster session, craft and card making sessions."
- The service was extremely responsive to people's social needs. People were supported to make links in the wider community and there was a great focus on community-based activities. On the first day of our inspection eight people went on a trip to a canal boat. We saw this was a popular, regular event. There were also regular outings to a local community café based at a supermarket. Records showed that the home had themed nights. These were fun events based on different countries and cultures. They were also used to encourage people to eat and introduce people to different foods they may not have tried before.
- Staff had a clear understanding of the importance of providing people with the opportunity to develop and maintain friendships and relationships. They had an exemplary approach to finding activities that were not just fun, but also helped people to develop confidence and friendships. Managers, the provider and all staff shared a passionate commitment to developing a sense of belonging and community. We were given examples of people who had become very isolated living in their own homes who, since starting to live at Auden House, were now actively involved in a range of activities and had made new friends.

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

- Care records included detailed risk assessments and care plans. These covered all aspects of the care and support the person needed. We saw that records also identified what people wanted to achieve with the support and how staff could help this happen. Staff went the extra mile to find out what interested people, what was important to them and how they could be encouraged to take part and become active members of the community.
- Care records were reviewed regularly and updated when people's needs changed. People were actively

involved in reviewing the service provided. One person said, "A lot of places you go, and they treat you like you have no brain, here I am fully involved in care plan discussions."

- We saw that a 'wishing tree' had been created. People who used the service either wrote or pasted photographs of things they wanted to do onto cards and they were placed on the tree. Staff had arranged for some people to do things they had wanted to do. One person had wanted to feed a shire horse. Photographs showed the person feeding the horse in the garden of the home. Another person had a love of Morris dancing, a party had been arranged and a Morris dancing troupe performed around a May pole. Photographs showed the event was extremely popular. A relative said of one of these activities,"[Person who used the service] had an amazing time. I haven't seen [person] this happy for a long time. [Person] hasn't stopped talking about it since."
- Relatives spoke passionately about the impact these and other tailor-made activities had had on their family members. They said people had gained confidence, become happier and that these events and other activities had even led to improvements in people's eating and drinking. One family member said, '[Person who used the service] has received such amazing and excellent care and attention at Auden House. We as a family could not be happier. Staff made [the person] welcome from the start and [the person] has put on weight, which is wonderful. We feel we are part of a big family, [person] has a great rapport with them all. [Person] is relaxed, content, engaging and well. We couldn't ask for more." Another relative said their family member had commented, "You don't need to worry about me, it's lovely here, everyone knows my name and the things I like. If I need anything I can just ask and they sort it out."

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.

- All staff had completed training on AIS and we saw that, if needed, important information was available in large print, pictorial, easy read and written format, which was easy to follow.
- Each person had been supported to create a memory book. These had photographs and stories from the person's life. These were used to help people remember important people and events from their past. They were also used as an aid for staff to start conversations with the person.

End of life care and support

- The home was part of the six steps programme which promotes good practise in end of life support. The exceptional standard of end of life care was recognised during the homes last accreditation with the programme. We saw that following reaccreditation the home had received the following feedback, 'We evaluated your portfolio and the work you submitted was outstanding.' We saw that the end of life support Auden House provided was recognised as a 'gold standard' of care by the six steps programme and was being used to help other homes develop good practice. As part of their commitment to ensuring people had the best possible support at the end of their lives the registered manager had attended events to share their experiences and ideas.
- We saw that everyone was asked if they had specific wishes about how they wanted to be cared for at the end of their life. People who were important to the person were encouraged to be involved in these discussions. This information was detailed in care records.
- Staff were committed to ensuring people's wishes at the end of their lives were respected and that people were able to die with dignity and amongst people who they knew and who knew them well. We saw that the home worked with local hospitals and the district nurse team to ensure that where possible, people who wanted to return to Auden House at the end of their lives were able to. Feedback from one family member said, "Auden House made all the arrangements for [person who used the service] to be able to return home

and receive end of life care in the comfort of familiar surroundings and friendly faces."

Improving care quality in response to complaints or concerns

- There was an appropriate system in place to manage complaints. Complaints were handled in the correct way and a response was sent in a timely manner.
- People who used the service knew how to raise any concern or complaints, but they told us they had no complaints. People said, "I have nothing to complain about", "I feel like I have come home. Nothing to complain about" and "I can talk to someone if I am unhappy."

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 improved and has now been rated outstanding.

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

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

- The leadership of the home was exceptional. We found the registered manager and providers shared a clear vision and very strong values. They led by example and were passionately committed to providing exceptional individualised care and support to people.
- Staff we spoke with, and our observations during the inspection, showed that staff were highly motivated and shared the enthusiasm, commitment and passion of the registered manager and provider. One staff member said of the registered manager, "[Registered manager] is the most hands on friendly, helpful person. [Registered manager] would always be there for me."
- Staff spoke with exceptional pride about working at Auden House. They said, "I love it here" and "I love working here, it's about meeting people. We are like a family." A person who used the service said, "It is absolutely top class care here."
- Everyone we spoke with consistently referred to the home as being like a family. During our inspection we found the atmosphere to be extremely homely and welcoming. There was a clear sense of belonging and community. People who used the service told us, "They have created a family atmosphere", "It is absolutely top class care here" and "It is absolutely wonderful here. Years ago, I was frightened going into a care home, but here they treat you with courtesy." A relative said, "I enjoy coming here. It is a happy place to come."
- People were actively encouraged to take part in activities in the wider community. The home had three activity coordinators. The ethos of the service was to support people to maintain and develop interests, which were important to them, and to ensure people led meaningful lives and developed a sense of community.

Continuous learning and improving care

- The providers had worked innovatively to develop the home's environment to support people's wellbeing and improve their experience of care. They had introduced environmentally friendly, sustainable projects. These included developing systems of renewable energy, water recycling and growing vegetables and fruit that were used in the kitchen. People were involved in the accessible garden project, from growing seeds to harvest.
- The providers and registered manager were continually striving to ensure care and support at Auden House was innovative and reflective of best practice. They regularly attended forums and conferences and the home was involved in a number of research and development initiatives. The registered manager and

providers had recently attended an event looking at good practise in dementia care. We saw that as a result they had purchased specialist equipment that helped people living with dementia communicate and join in activities more easily.

- The home was part of the 'Research Ready Care home network' and worked with a local university to look at ways of improving people's physical health. The home supported placements for student health care professionals. We saw that one recent placement had been for speech and language students. Learning from the placements had been put into practise in supporting people with nutrition.
- The home had been awarded a Dignity Daisy award, which recognises services that provide people with care that ensures their dignity is protected. They had scored 100% in the accreditation process. We saw that as part of the same scheme the registered manager had also been given a good practice award for 'maintaining excellent standards and going above and beyond to ensure person centred care is delivered'.

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

- Everyone spoke very highly of the registered manager and their exemplary approach to providing holistic high quality care and support to people who used the service, and supporting staff who worked at the home. Staff said, "[Registered manager] is great. Any problems [registered manager] gets stuck in. Even your personal stuff", "[Registered manager] wouldn't ask anyone to do anything [they] wouldn't do [themselves]" and "[Registered manager] is fantastic." People who used the service said, "The manager is approachable and gets thing done" and "Yes, the manager is nice and easy to talk with."
- The registered manager promoted an extremely open culture where staff could talk about their roles and issues that might be affecting their well-being. Staff said the registered manager went the extra mile to ensure they felt valued and that their well-being was looked after. Staff told us of occasions where the registered manager had attended appointments with them or helped them personally.
- People also told us the providers were very involved in the home. Staff said of one of the provider's, "Anything we need, [provider] will get it. [Provider] is here all the time." A person who used the service said, "The owner is hands on. [Provider] listens and will resolve any issue I have." Without exception, everyone said they would recommend the home.
- We found there were well established and effective governance systems to support the service to continually improve. People's experience of care and support were at the core of these systems. There were very good systems of daily, weekly, monthly and annual quality assurance checks and audits in place. We saw evidence that where issues were found, action was taken promptly to ensure improvements were made.

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

- The registered manager and provider recognised the importance of involving people in developing the service, listening and acting on feedback. There was a system in place for gathering people's views and how the service could be improved. One person said, "Yes, we have regular residents' meeting and our views and opinions are listened to. They will bring back feedback next meeting."
- We saw that some people who used the service had said that when being supported by staff to bathe, they were uncomfortable not wearing clothes. The registered manager had sourced specialised 'cover up' clothing that people could wear to protect their privacy and dignity when showering or having a bath.
- We saw there was a statement of purpose and an information booklet about the home. This gave people who used the service the details of the facilities and services provided at Auden House. These documents also clearly explained the service's aims, values, and objectives.
- Staff told us they were listened to and their suggestions for improvements were valued. Staff were proactively encouraged and supported to explore news ways of working. Staff took on 'champion' responsibilities for areas of care that interested them, for example dignity, laundry, falls, nutrition and

activities. Champions promoted best practice in their areas amongst other staff, ensuring people received a better-quality service that respected individual needs.

• The home was a member of a web-based feedback site. People could leave comments, anonymously if they wanted, about the service and rate them for how good the service was. We saw that the home had received awards for being in the top 20 homes in the north west of England for the last 5 years and currently had a rating of 9.9 out of 10.

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 registered manager kept an overview of all accidents, incidents, safeguarding and complaints. We saw these were reviewed to ensure correct action had been taken and to identify any lessons that could be learned. The registered manager had notified CQC of significant events such as safeguarding concerns.
- It is a requirement that the provider displays the rating from the last CQC inspection. We saw that the rating was displayed in the home and on the provider's website.

 Working in partnership with others
- The home worked extremely well with local authorities who commissioned the service and health care professionals to achieve excellent outcomes for people and ensured people were receiving the support they needed.
- Visiting health care professionals were extremely positive about how the home was run. They told us, "They are very responsive. You come in it feels like a home, not a care home. The manager is excellent" and "[Registered manager] is a good leader. She knows the residents inside out. There is good continuity [of staff] and staff are therefore more confident. They are well organised."
- The home had recently worked in partnership with local authority looking at falls prevention, developing a booklet and their own in house falls training package to reduce falls. We saw that as part of the programme the home had arranged a number of activities designed to help increase people's physical activity and reduce falls. These included; Thai chi, arm chair aerobics and an exercise group. As a result of this work the home had seen a reduction in falls. Plans were in place for the work to be shared with other homes in the area.
- The leadership of the home had an excellent track record of sharing good practice with other services.