

People First Care Ltd

# The Old Vicarage

## Inspection report

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## Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Good 

# Summary of findings

## Overall summary

The inspection took place on 27 March 2018. The inspection was unannounced and carried out by one inspector.

We last visited the service in December 2015 where we found a breach of the regulation relating to good governance. We rated the service as good. Following the inspection, the registered manager sent us an action plan stating what action they were going to take to improve.

At this inspection in March 2018, we found that action had been taken and the provider was meeting all the regulations we inspected against. In addition, the registered manager and provider had introduced a number of changes and had further developed the service. We rated the caring and responsive key questions as outstanding which meant the overall rating for the service is outstanding.

The Old Vicarage 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 Old Vicarage accommodates 18 people over two floors. Some of the people living at the home had a dementia related condition. There were 17 people living at the home at the time of the inspection.

There was a registered manager in place. 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 2008 and associated Regulations about how the service is run.

We found that staff were exceptionally caring. We observed kind, caring and thoughtful interactions between staff and people. Staff were highly motivated and committed and spoke with pride about the importance of ensuring people's needs were held in the forefront of everything they did. People, relatives and staff were able to give numerous examples about how staff went "above and beyond" to meet people's needs.

The service was extremely responsive. People and relatives described the responsiveness of staff as "Outstanding." Staff found inclusive ways to meet people's needs and enable them to live as full a life as possible. A creative activities programme was in place to help meet people's social needs. There was a complaints procedure in place and people knew how to complain.

People told us that they felt safe at the service. There were no ongoing safeguarding concerns. Medicines were managed safely. Checks were carried out to ensure that prospective staff were suitable to work with vulnerable people. There were sufficient staff deployed. Staff carried out their duties in a calm unhurried manner.

Staff told us, and records confirmed that training was available. There was an appraisal and supervision

system in place and all staff told us they felt supported.

People's nutritional needs were met and they had access to a range of healthcare services.

Action had been taken following our last inspection with regards to monitoring the quality and safety of the service. Audits and checks were carried out to monitor the service. Our observations and findings on the day of our inspection confirmed that the provider now had an effective quality monitoring system in place. Staff were very positive about working at the home. We observed that this positivity was reflected in the care and support which staff provided.

We had been informed of all notifiable events at the service.

## 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.

There were safeguarding procedures in place. Medicines were managed safely.

The premises were clean. Checks and tests had been carried out to ensure that equipment and the premises were safe.

Recruitment checks were carried out to ensure that staff were suitable to work with vulnerable people. There were sufficient numbers of staff deployed to meet people's needs.

### Is the service effective?

Good ●

The service was effective.

Staff told us, and records confirmed that training was available. There was an appraisal and supervision system in place.

Staff followed the principles of the Mental Capacity Act 2005 in their work.

People's nutritional needs were met and they were supported to access healthcare services.

### Is the service caring?

Outstanding ☆

The service was exceptionally caring.

Staff demonstrated a real empathy for the people they cared for. We observed kind, caring and thoughtful interactions between people throughout our inspection.

Staff were highly motivated and committed and spoke with pride about the importance of ensuring people's needs were held in the forefront of everything they did.

The service used inclusive methods to help people communicate and express their wishes and preferences.

### Is the service responsive?

Outstanding ☆

The service was exceedingly responsive.

Staff knew how to meet people's preferences and used inclusive ideas to ensure that people had an enhanced sense of wellbeing and exceptional quality of life.

A creative activities programme was in place. People and relatives told us that staff had gone the extra mile to find out about their previous hobbies and interests to enable these to be continued at the Old Vicarage.

There was a complaints procedure in place. Inclusive feedback systems were in place

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

The service was well led

Action had been taken and there was now an effective quality monitoring system in place.

There was a registered manager in place. People, relatives, staff and health and social care professionals spoke very highly of her.

Staff liaised with the local schools, churches and entertainers to ensure important local connections were maintained.

All staff informed us they enjoyed working at the home. We observed that this positivity was reflected in the care and support which staff provided throughout the day.

**Good** ●

# The Old Vicarage

## 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.

The inspection took place on 27 March 2018. The inspection was unannounced and carried out by one inspector.

Prior to the inspection, we checked all the information which we had received about the service, including any notifications which the provider had sent us. Notifications are changes, events or incidents that the provider is legally obliged to tell us about. The submission of notifications is a requirement of the law. They enable us to monitor any trends or concerns within the service.

We contacted the local authority's safeguarding adults team and contracts and commissioning teams. We also contacted the local Healthwatch.

The provider completed a provider information return (PIR) prior to the inspection. A PIR is a form which asks the provider to give some key information about their service; how it is addressing the five questions and what improvements they plan to make.

We spoke with the nominated individual, regional manager, registered manager, deputy manager and four care workers. We spoke with 10 people and three relatives on the day of the inspection. We spoke with five relatives by phone following our inspection.

We talked with two care managers, a social worker, a podiatrist, a district nurse, a medicines management technician from the local NHS, a local entertainer, a member of the local Evangelical church, a member of staff from the local school and a registered manager from a local domiciliary care agency. We also emailed the local GP surgery for feedback.

We looked at three care plans, 13 people's medicines administration records, information relating to staff

training, one staff recruitment file and audits and checks relating to the management of the service and the premises.

# Is the service safe?

## Our findings

People told us that they felt safe. One person told us, "I feel very safe, I've never thought otherwise." This was confirmed by all relatives with whom we spoke. Comments included, "I have complete confidence that they are safe," "I haven't seen any incident which I've needed to question," "When I had [name] in for respite care at other homes, I never felt at ease...but here I can let go, they go above and beyond" and "I don't worry at all with her being here."

There were safeguarding policies and procedures in place. Staff were knowledgeable about what action they would take if abuse were suspected. There were no ongoing safeguarding concerns. A health professional praised staff for their prompt safeguarding referral regarding a person who was admitted to the home. The safeguarding alert related to another provider and was not connected with the care provided at the Old Vicarage.

We checked staffing levels at the service. People and most relatives told us that there were sufficient staff deployed to meet people's needs. We observed that staff carried out their duties in a calm unhurried manner and had time to provide emotional support to people.

People and relatives were complimentary about the cleanliness of the premises. Comments included, "The home is squeaky clean and smells fresh since they steam clean everything at night" and "She has a lovely room which is always spotless."

We observed that the home was clean. Staff used personal protective equipment such as gloves and aprons. There had been a recent Norovirus outbreak. Staff had taken appropriate action and the home was now clear of the virus. One relative told us, "They have just had Norovirus and they coped with it in an amazing way. It was a hard period for them but they managed it very well including all the physical things like deep cleaning."

Gas, water, electrical tests and 'Lifting Operations and Lifting Equipment Regulations' (LOLER) checks on moving and handling equipment had been undertaken. Fire safety checks were also carried out. Personal emergency evacuation plans were in place which detailed how people should be supported to leave the building in the event of an emergency.

We examined the management of medicines. People and relatives told us that medicines were administered as prescribed. One person said, "They never forget." A relative told us, "Administration of drugs [people's medicines] is excellent." A medicines management technician from the local NHS told us, "With regards to medication, it was stored correctly, given at the correct time and documented correctly."

Due to the layout of the home and limited storage facilities, medicines were stored in two designated areas of the home. We found that staff made best use of the lack of storage space and we considered that medicines were managed safely.

People and relatives were positive about the staff who worked at the home. One person said, "They are nice girls and well chosen." Appropriate checks were carried out before staff started work. We saw that Disclosure and Barring Service [DBS] checks had been obtained. A DBS check is a report which details any offences which may prevent the person from working with vulnerable people. They help providers make safer recruitment decisions. Two written references had also been received and identity checks were carried out.

Risk assessments were proportionate and included information for staff on how to reduce identified risks, whilst avoiding undue restriction, such as maintaining independence and avoiding the risk of falls. One person had a sensor alarm because of their identified risk of falling. This had been assessed in line with the Mental Capacity Act 2005.

## Is the service effective?

### Our findings

People, relatives and health and social care professionals were complimentary about the effectiveness of staff. They told us that staff knew what they were doing. One person commented, "Oh they're very well trained." A relative said, "It is very homely, but it is effective. The staff are very sensitive to her fluctuating needs."

All staff informed us that they felt equipped to carry out their roles and said that there was sufficient training available. One staff member said, "The training is good. We get letters from [name of registered manager] telling us what we need to do."

The registered manager provided us with information which showed that staff had completed training in safe working practices and to meet the specific needs of people who used the service, such as dementia care. The registered manager told us that certain staff had completed nail care training and said, "In between [podiatry] visits we do in house nail care. We purchase a [nail care] pack for every single resident. Some people require filing only, others need their nails cut and filed." This was confirmed by the podiatrist who stated, "They have all the equipment – foot files and nail nippers for everyone. [Name of registered manager] has the best system for recording nail care." Staff had been assessed as competent before carrying out nail care.

There was an induction system in place to ensure that new workers were effectively trained, supervised and assessed to undertake their role.

All staff told us that they felt very supported in their roles. They said they had regular supervision. There was an appraisal system in place. This was confirmed by records we viewed. Supervision and appraisals are used to review staff performance and identify any training or support requirements.

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 authorisation procedures for this in care homes and hospitals are 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 were being met. Staff had assessed whether people's plan of care amounted to a deprivation and the registered manager had submitted DoLS applications to the local authority in line with legal requirements.

Mental capacity assessments and best interests decision records had been completed for any restrictions on people's movements such as the use of sensor alarms.

People and relatives were complimentary about the meals. Comments included, "I think it's wonderful, the cook makes special things for him. ... The cook had made some special biscuits for him with apple in" and "[Name] has put on about three stone and is looking better than she has done for five years."

Staff were knowledgeable about people's specific dietary requirements. One relative told us, "I wrote down a list of all the food that he could and couldn't eat and [name of registered manager] immediately took it and got all the carers to read it so there was no risk that he would be given the wrong food like a banana. The kitchen has also got a copy and there's a copy in his file."

We spoke with the cook who explained that there was an emphasis on home baking. This was confirmed by our own observations. She also made smoothies which were attractively served in fluted glasses. On a morning, freshly prepared fruit was provided in small individual bowls. A relative told us, "They have little bowls of fruit, strawberries, grapes – it's lovely and it helps to punctuate the day with something nice."

People and relatives told us that people's health care needs were met. One relative said, "Communication with the local health centre is excellent." Another relative stated, "They manage his diabetes so well. His blood is taken regularly and they keep a record of his blood sugars. His diet is also closely monitored," We saw evidence that staff had worked with various agencies and accessed other services when people's needs had changed, for example, consultants, GP's, district nurses, dietitians, the podiatrist and dentists. A podiatrist and district nurse visited on the day of our inspection. They both spoke positively about the home and the effectiveness of staff. This demonstrated that the expertise of appropriate professional colleagues was available to ensure that the individual needs of people were being met to maintain their health.

Attention had been paid to the 'dementia friendly' design of the premises. Signage around the building was clear. Words and symbols had been added to signs to help people locate different areas of the home more easily. Coloured paintwork had also been used to attract people to certain rooms such as bedrooms and bathrooms. Hand rails and toilet seats were provided in contrasting colours to help people identify these. The registered manager was aware that some of the flooring did not meet best practice in terms of design to support people living with dementia. This did not have an impact on people who were currently living at the home. The registered manager said that this was being addressed.

There was a fully enclosed garden with an accessible Summer house. This was used as an ice cream parlour in the summer. Free range hens roamed the garden. People enjoyed sitting in the conservatory watching the wildlife from the comfort of their armchairs.

## Is the service caring?

### Our findings

There was an atmosphere of wellbeing in the home. People were happy, content and well cared for. This was supported by excellent comments from people, relatives and health and social care professionals, all of which demonstrated the very positive impact which care at the Old Vicarage had upon people's lives.

People and relatives with whom we spoke told us there was a strong focus on building and maintaining open and honest relationships with people and their families. Comments from four relatives included, "When mum is no longer here, I am still going to come and visit... This place does me good," "He doesn't like the night and used to always reach out for me. The staff were so good and got a teddy that he could cuddle into if he needed it," "They are so well looked after and I wouldn't have them anywhere else but here – they go above and beyond," "I felt welcome and felt I was among friends," "[Name of registered manager] treats you as though you're the only one that matters... I often raise the silliest of things and she never minds," "I think it is a really happy home with an exceptional level of care and you get that as soon as you walk through the door," "It's the little things they do, they are so accommodating. There are too many things to mention they are just so caring. I would put it down as outstanding" and "She is safe, comfortable and cared for in every way – emotionally and physically and whatever else that entails." Comments from three people included, "The girls are very caring," "I'm very well looked after" and "They're all so lovely."

Relatives told us that staff also provided invaluable support to them as well as their family members. One relative said, "I couldn't fault it – the staff went above and beyond, they were absolutely lovely... They also supported us [as relatives]." The registered manager told us they also supported relatives whose family members had sadly died. She told us about one relative and said, "To make [name of relative] still feel included and to keep connections going with other residents and to help them in their bereavement process we always invite [name] and their grandchildren to all events. We contacted this relative who confirmed what the registered manager had told us and said, "I just think it is a lovely place to be."

We read a review on a national care homes website which had been submitted by a relative on 3 February 2018. This stated, "Residents at the Old Vicarage receive expert care which is delivered with respect and genuine love from all the staff. The manager adopts the latest and best care practices superbly and is tireless in findings new ways to enhance the surroundings and daily living experiences of the residents who she treats as extended family" and "The care staff are meticulous and prompt in their care which is given respectfully with thought to the residents wishes and privacy. Each carer invests a great deal of empathy and love for all the residents – no matter how difficult an individual's behaviour may be to deal with."

Relatives explained the very positive impact which moving to the Old Vicarage had had on their relations' wellbeing. We spoke with one relative on the day of the inspection. Their family member had recently moved to the home. We contacted them again following the inspection; they told us, "[Name] is actually trying to speak sentences. Before [name] would just speak the odd word or nod their head, but [name] has made progress and I think that it's because the carers spend time talking to them. I think it's one of the best homes I've ever been in." We spoke with another relative by phone. They told us, "I would rate it as outstanding – they go out of their way to help... I would say moving there has had an impact on everything. [Name] is more

chatty and more sociable, it's nice to see, it's a lovely home."

Health and social care professionals were also positive and explained that the service achieved exceptional results. Comments included, "It's a lovely home. They cater for all needs and we have a good relationship... We know they are going to be looked after," "I would want to be cared for here if I had to go into a home" and "The care is lovely, it's like they're looking after their Nanas and grandads."

We read a notice written by the registered manager which stated, "The Vicarage has been chosen as 'The Special One,' by NHS England. A film crew will be attending to produce a film to use as a training video for hospitals throughout the North East. The medication review team were so impressed by our home, hospitality, manager's knowledge of residents and medication, care and compassion witnessed throughout the day and our person-centred approach we have been picked to produce this short film." We spoke with a medicines management technician to corroborate this information. She told us that unfortunately film making had been postponed. She said however, "I would agree with every word [name of registered manager] has written about the feedback from the medicines review team about the care and compassion and person-centred approach at the Old Vicarage."

We received extremely positive feedback from additional sources such as a registered manager from a local domiciliary agency [DCA] and an accordionist who visited the service regularly. The registered manager from the DCA told us, "We have found that the staff and manager there are all very helpful and polite whenever we visit. A lot of our clients, when they are no longer able to live at home safely, have moved into the Vicarage and have received wonderful care from all the staff. Visitors are welcome at any time and are also treated with respect and kindness. The feedback we receive from the clients that we visit is always positive and they praise the staff for their help and kindness at all times." The accordionist stated, "I am always so happy to visit the Old Vicarage – it's an absolute joy to visit. I always think that if I ever need to be cared for in the future, I hope that I go to somewhere as lovely as the Old Vicarage. The staff are so lovely and nice with them. They [people] always look so well cared for... The staff will have a little bit of fun too if they notice they are down, to cheer them up. It is wonderful to see... Yes, I just think they are wonderful."

Staff were very motivated and committed and spoke with pride about the importance of ensuring people's needs were held in the forefront of everything they did. Comments from staff included, "I love coming to work. The people make me love it a lot. [Name of person] loves talking about dogs and travelling. She loves to see my holiday photos," "It is just like a little family. We share our meals and we will sit with people and have our meals," "I find their life histories so interesting... With it being such a small home, we know them so well," "It's very person centred – they decide everything" and "Everything is directed around them."

It was clear through our observation of staff practices that they had embraced the '6Cs.' The 6Cs are the values which underpin Compassion in Practice, the national strategy for nurses, midwives and care staff, which was launched in December 2012 [Skills for Care]. The 6Cs are care, compassion, competence, communication, courage and commitment. We saw that the 6C's were discussed with staff during supervision sessions. The registered manager told us, "I pride myself on being such a person-centred home, with the residents' choice at the heart of all we do." This was confirmed by people and relatives. One person told us, "It's their genuine caringness and the relationship we have with staff that is important."

Staff demonstrated a real empathy for the people they cared for. We observed kind, caring and thoughtful interactions between people throughout our inspection. Staff were very tactile in a well-controlled and non-threatening manner. Some people reached out for a hug which was immediately given. A relative told us, "You see the girls giving them hugs and it's lovely to see." We saw one care worker carrying two large toy dogs. The care worker told us, "They're real [to the person]. We feed them and take them out for a wee." The

dogs were placed on the floor near to the person together with a small silver bowl which was filled with water. Another person had a doll. The care worker again told us, "[Name of person] has a baby [doll]. If she is unsettled, she likes to sit and dress the baby. It is a real baby to her."

One person had recently moved to the home. They were currently looked after in bed because of their physical condition. The registered manager told us that the person loved animals and since they were unable to get out of bed; staff regularly took animals to them, including the home's rabbits and the registered manager's pet pug Lola. We spoke with this person's social worker to hear about the impact the move to the Old Vicarage had had on this person. She told us, "I want to book my place now for when I'm older - they are just so welcoming and go above and beyond. [Name of registered manager] arranged to meet [name's] relative at their home to get some personal possessions, ornaments, photographs and other important things that would help [name] settle in. [Name of registered manager] also brought their cuddly [toy] dog from home and when I saw [name], staff were sitting in [name's] room talking to them, building up a relationship. [Name was cuddling their dog] and I could see it gave them comfort... I think they are outstanding – absolutely fabulous."

People's privacy and dignity was respected. One relative told us, "[Name of relatives] are treated with respect and compassion." The registered manager told us, "I can't stress enough how ensuring dignity and privacy in care is so important." We observed that staff spoke with people respectfully. Many new seating areas had been introduced to give people more choice about where they felt most comfortable sitting. Some chose to sit quietly away from other people.

Staff promoted people's independence. This was confirmed by people and relatives. One person told us, "They support me to be independent. I put my ear drops in myself and my eye drops." A relative said, "They encourage her to do things for herself. It's a therapeutic and encouraging environment." Vegetables were served in terrines at meal times. This meant that people could help themselves. At breakfast time, milk was served in separate milk jugs so people could add as little or as much milk as they wanted to their cereal or drinks.

People enjoyed trips out to the shops. Staff also organised shopping experiences for people who were unable or chose not to go out. We read a notice which stated, "Can't get to Marks and Spencer's – we bring Marks and Spencer's to you for in house shopping at the Vicarage." This was organised three times a year. Other shopping experiences were also arranged. A clothing and accessories company visited twice a year. They brought in a selection of scarves, jewellery and handbags. The registered manager told us, "We have found the impact of the in house shopping experiences promotes residents' independence and makes life feel a little more normal... We have [people] who would get fretful at not being able to get something special for loved ones, husbands, wives or grandchildren. It stimulates conversation amongst residents and gives them back the value of money and makes the residents feel valued as a person."

The service used inclusive methods to help people communicate and express their wishes and preferences. A 'residents champion' had been introduced to obtain people's views. This was a member of staff who had been elected by people and staff. The registered manager told us, "I decided I wanted to get a true insight into how the residents felt and most importantly their opinions on the care, food, staff and the manager... and how they felt living in the home and what we could do to improve." We spoke with the 'residents champion' and read records of her conversations with people. We noted that feedback from people was very positive. Action was taken if any issues were identified. One person had requested breakfast at 7.50am. The residents' champion had recorded that this had been addressed.

People and relatives told us and records confirmed that they were involved in people's care. One person

said, "They include you in everything." A relative said, "They will keep me informed but they recognise that mum is her own person and she is able to decide." Handheld computers had been purchased. People used these to keep in contact with family and friends who lived further afield.

## Is the service responsive?

### Our findings

People and relatives were extremely complimentary about the responsiveness of staff. Comments from four relatives included, "I am absolutely amazed at how lovely it is. I have definitely done the right thing. I can't fault anything, everyone gives their time and they are so responsive," "I would say it's a safe, secure and a friendly home where people can live until the end of their life. They can find home again there and have their needs met in an encouraging environment. It's a place where you can continue to move forward rather than sliding back – it's not about standing still. Every day you will find something positive," "Staff at the Vicarage seem to sense and know her needs, and meet them so well. They give her individual attention and they have a care plan and refer back to it if it needs adjusting," "She is able to live locally... and her quality of life is so much better now" and "I would rate it outstanding, there is nothing, nothing that I could fault. As soon as they have any concerns, they contact the appropriate services." People told us, "The girls are great" and "I couldn't fault them."

Health and social care professionals were also positive about the responsiveness of staff. One health professional said, "They do stimulation and they do activities. We've just had a patient move in and he is more stimulated – they are helping his mood." A social care professional stated, "When they were discharged from hospital – they were really quick to get on to everything... I would say they are outstanding" and "The day I was visiting, there was a member of staff taking people individually around the garden and the grounds to get fresh air... they go above and beyond."

One page profiles were in place. Skills for Care [independent workforce development charity] state, "A one-page profile can help social care professionals provide better person-centred care and support. It is a simple summary of what is important to someone and how they want to be supported." We read several one page profiles. They contained very personalised information which helped ensure staff had sufficient information to meet people's physical, emotional, social and spiritual needs and provide responsive care. A relative told us, "They know them so well. They know all their personalities."

The service was tailored to meet people's individual needs and was delivered in a flexible way to ensure the needs of people were central to the service. People could spend their day how they wanted. Staff told us that everything revolved around people. One staff member said, "It's what they want, what they want to do and where they want to go." This was confirmed with all people and relatives with whom we spoke. One person told us, "Everything is down to me, I can do what I like, when I want." Many people were from the local farming community and were used to getting up early. The registered manager said, "All residents get up and go to bed when they request. Our staff shift patterns work around the residents. Last year alone we changed our shift patterns twice to accommodate residents getting up and going to bed. For example, in the summer months, residents were requesting to get up earlier so my early shift started at 7am instead of 7.30 which meant that more staff were on duty for this busy period. In the winter months shifts start at 8am as most residents with the darker nights and mornings prefer a lie in." The registered manager explained the impact which the flexible staff rota system had on people. She told us, "This gives the residents more time with staff and they are not rushed in the mornings or evenings. I stagger my staff to relieve pressure at busy times which again makes residents feel valued and creates better person-centred care."

There was no one at the home receiving end of life care at the time of our inspection. One person told us however, "They are particularly caring to anyone who is unwell." There was detailed information about people's end of life wishes in their care files. This meant staff had information about people's wishes at this important time in their lives.

Staff explained the importance of remembering and respecting people after they had died. With the family's consent, staff included people in the funeral proceedings such as gathering at the front door of the home to pay their respects as the Hearse was driven away. They were asked also, if they would like to attend the funeral service and were helped to do so by staff. The registered manager told us that this inclusion was important because people had been friends or in the company with each other for a long period of time at the home.

Staff knew how to meet people's preferences and used inclusive ideas to ensure that people had an enhanced sense of wellbeing and exceptional quality of life. A creative activities programme was in place. People and relatives told us that staff had gone the extra mile to find out about their previous hobbies and interests to enable these to be continued at the Old Vicarage.

One person came from Sweden. Staff downloaded the Swedish newspaper 'Umea Tidning' for her to read. This was confirmed by our own observations and their relative who said, "They print off a Swedish paper for my mum, they are so thoughtful." The registered manager told us, "We make every effort to remember her culture and language which helps promote her Swedish roots." Another person used to play the piano. Staff sought a second-hand organ and we saw photographs of the person playing the organ and read, "[Name] is now in her element entertaining all the residents lost in her happy music world."

Many of the people who lived at the home were from the farming community. The registered manager told us how important animals were to people. She said, "I'm trying to bring the farming life back into the home...I feel we need to bring wildlife, pets and animals to keep memories alive and ongoing. Animals are very therapeutic and calming and as you witnessed on the day of the inspection, most residents enjoy a cuddle or just something to watch and pass the time. My pet pug Lola often visits and the residents faces light up when she enters the room. I even ask them if anyone would like to walk her around the orchard."

The home had recently acquired two pet rabbits, Hoppit and Moppit. They also had free range hens which roamed the garden and came up to the conservatory window. One of the hens was sitting on 13 eggs. The registered manager told us, "[Name]...used to breed chickens. She is keeping us all right with the process and dates and what to watch out for." Following the inspection, the registered manager contacted us and stated, "Great excitement at the Vicarage we have our new nine baby chicks. Just wanted to share the news with you."

We observed people holding the rabbits and watching the hens and wild birds in the garden. We also saw photographs of people with the various animals who visited, including Lola the pet pug and animals from the mobile petting zoo. People were smiling and laughing which demonstrated the positive impact that the animals had on them and their emotional wellbeing.

People told us that they appreciated the animals and wildlife at the home. One person told us, "As a farmer's wife, it is nice to see the animals." Another person said, "It's good to have the animals both inside and out, it gives the home a life. There's a lot of interest around them, watching them feed, watching their behaviour." A relative said, "They [person] loves to sit here – it's like a living mural [picture]." Another relative commented, "Even when she is really down she can appreciate the animals...There is just a natural comfort with animals."

We read that one person used to live on a farm. They were spending more and more time in their room and becoming socially isolated. Staff discussed whether they would like to go and help collect some of the people who came for day care. The person agreed and we read that she enjoyed the drives into the country. Staff had recorded, "[Name] recognises places and it helps her talk openly about her childhood as a farmer's daughter and this has given her memory stimulation." Staff also documented, "Her low mood has become less apparent." Another person loved horses and was also brought up on a farm. Staff found out that she liked a 'flutter' on the races. She could no longer get out to go to the races so staff had recorded, "We brought the races to the Vicarage." Staff had purchased a horse racing DVD and we saw photographs of people enjoying the races from the comfort of their armchairs.

Other animal themed activities took place at the home. These included visits from a mobile petting zoo and visits from a pet as therapy dog. One relative told us, "I bring my daughter who is eight...She loves it here. They invite her down to anything they think she'll be interested in such as when the owl visited and the snake – it brightens up their day to see children."

School children visited the home. We read a recent letter from two school children which stated, "The Vicarage [The Old Vicarage] is a better place to be cared for and looked after and never ignored [ignored] and where you will spend your amazing happy life." We spoke with a member of staff from the local school who confirmed that the school children visited the home and people from the home visited them. People had recently visited the school for a school awards ceremony.

We saw photographs of people with the local school children. You could tell by people's expressions the impact that being with young children had on them and their happiness and wellbeing.

There was a complaints procedure in place. No complaints had been received since our last inspection. None of the people or relatives with whom we spoke raised any concerns or complaints. One relative "There's no complaints. Mother really loves it - really loves it."

## Is the service well-led?

### Our findings

At our last inspection in December 2015, we found a breach of the regulation relating to good governance. Audits had not been fully implemented or embedded into practice. Relatives and staff meetings were not recorded and we had not been informed of all notifiable events at the home. We rated this key question as requires improvement.

At this inspection, we found that improvements had been made and the provider had now ensured good outcomes for people in this key question.

There was a manager in post who had registered with CQC in 2015. People, relatives and staff were extremely complimentary about her. Comments included, "[Name of registered manager] is 100% good," "If I even mention something in the corridor to [name of registered manager] it's sorted. I don't know how she remembers," "[Name of registered manager] is not a manager who is above everyone. You can talk to her about anything and she gets stuck into anything," "[Name of manager] is brilliant. You couldn't ask for a better manager. She will muck in and will do anything. She is very, very supportive," "She made such a big difference here," "We have fantastic staff and that comes down from [name of registered manager]," "I am very happy with it. When [name of registered manager] came there was a massive improvement. She is ray of sunshine and she has the staff that way too" and "[Name of registered manager] is so amazing...She has confidence in me."

Health and social care professionals and registered managers from other providers also spoke positively about the registered manager. Comments included, "[Name of registered manager] is very passionate about the residents and staff" and "She goes far and way above." A registered manager from a local domiciliary agency told us, "[Name of registered manager] is also very helpful to me as a manager. If I have any queries regarding training or policies I have been able to go to her and ask for help. This has been very useful to us as a company and I hope that we will be able to continue to work together in the future."

People and relatives were also very complimentary about the home. Comments included, "We couldn't have chosen anywhere better...It's not like an institution, I find it wonderful," "I would sum it up by saying it's marvellous," "It's been a life saver. I don't know where I would be without them," "She's really settled. I really can't praise it enough" and "It's five stars."

Regular audits and checks were carried out to monitor all aspects of the service. These included health and safety, infection control, care plans and medicines management. The nominated individual also carried out regular visits and reports. No concerns were noted.

Accidents and incidents were monitored for any themes or trends so action could be taken to reduce any recurrence. The registered manager told us, "If they have three or more falls we request an OT [occupational therapist] referral." A sensor mat had been introduced for one person who had fallen on several occasions.

People, relatives and staff were involved in the running of the service. Regular meetings and surveys were

now carried out and documented. One relative told us, "[Name of registered manager] has enthusiasm and is open to ideas. We can contribute to ideas." Another relative said, "I've not had to complain about anything. There was only once when I asked for a brighter lightbulb in [name's] room and it was done immediately." These processes meant that people, relatives and staff were regularly involved with the service in a meaningful way to help drive continuous improvement.

Our observations and findings during the inspection confirmed there was now an effective quality monitoring system in place.

The service was an active part of the local community. Most staff came from Wooler and the surrounding areas. This was appreciated by people and relatives. One person told us, "They're all local girls. It's good because the connection is there. They know us and what is happening in Wooler." The service liaised with the local schools, churches and entertainers to ensure important local connections were maintained.

All staff informed us they enjoyed working at the home. They said that morale was good. This was confirmed by people and relatives. Comments included, "Nothing is too much trouble and that generates a positive atmosphere" and "Their bouncy good humour never flattens – even on rainy days like this." We observed that this positivity was reflected in the care and support which staff provided throughout the day. Staff responded positively to any requests for assistance and always sought to be complimentary when speaking with people.

We had been informed of notifiable events at the service. Notifications are changes, events or incidents that the provider is legally obliged to tell us about. The submission of notifications is a requirement of the law. They enable us to monitor any trends or concerns within the service.