

Helen McArdle Care Limited

Needham Court

Inspection report

Stanhope Road
Jarrow
Tyne and Wear
NE32 3UD

Tel: 01914898146
Website: www.helenmcardlecare.co.uk

Date of inspection visit:
17 May 2016

Date of publication:
12 October 2016

Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Outstanding ☆

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

The inspection took place on 17 May 2016 and was unannounced. We previously inspected the service on 30 September 2013 and found the service met the regulations we inspected against at that time.

Needham Court is a purpose-built three storey care home that provides personal care and support for up to a maximum of 57 people, some of who are living with dementia. At the time of our inspection there were 55 people using the service.

There was a registered manager in post. 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. People, relatives and staff spoke very highly of the registered manager and felt they managed the running of the home extremely well. Staff were very enthusiastic about how approachable both the registered manager and deputy manager were and how they felt supported in their roles as management had a vast amount of knowledge, skills and expertise. The registered manager was very committed and passionate about providing an excellent service and had implemented systems to monitor and drive improvement and excellence.

People told us staff were skilled and experienced to meet their needs. The registered provider had its own academy where staff attended a wide range of training courses. Staff received regular training in core subjects as well as additional training specific to meet people's needs such as dementia awareness. Staff had opportunities to go on advanced courses when they expressed a wish to excel in particular subjects suitable to their role as well as to further their career. Staff told us they felt enabled and empowered to attend new courses and specialise in particular areas. They were able to explain how they implemented new found knowledge from training into their working roles. Staff felt valued and supported to attend training at the registered provider's dedicated academy and transport was provided for those who required it.

Staff told us they felt supported and received regular supervision, observations and competency checks. They also received annual appraisals which they used to express specific goals and plan future development. Staff told us they found supervisions and appraisals useful as they could discuss career aspirations and long term goals as well as short term development opportunities and successes. Staffing levels were monitored by the registered manager to ensure they met people's individual needs. Staff provided input into staffing levels which the registered manager considered and increased staffing levels as a result. Staff were recruited safely with all necessary checks carried out to ensure they were fit to support people.

We received excellent feedback from people who used the service regarding the quality of food at Needham Court as well as the level and variety of choice. We saw menus were varied and consisted of two options each meal time, with additional options being readily available also. Staff were very knowledgeable about people's nutritional and hydration needs and were passionate about ensuring those needs were met. The

registered provider had successfully introduced a new method of preparing and serving pureed food so that people with a specialised diet such as dysphasia could benefit from a more pleasurable dining experience. It had also proven successful in increasing people's appetite, restoring their weight to a safe level and maintaining their dignity when dining as their food was moulded to resemble the meal they had chosen and they were able to eat it with a knife and fork. We found people's dietary needs and preferences were extremely well catered for and they were highly supported to maintain a healthy weight. The home had also recently introduced a new twilight dining experience which included dimmed lighting, imitation candles and a restaurant service. This created a more relaxing environment and a peaceful dining experience which the registered manager and staff told us had a positive impact. People's nutritional and dietary requirements were met, with referrals being made to dieticians, speech and language therapists and other health care professionals where needed and their recommendations were acted upon.

We found the design of the building to be tailored to the needs of people who used the service, including people who lived with dementia. There were a number of themed areas in the home including a beach as well as smaller areas with meaningful objects to stimulate people's memory such as old laundry equipment and a workbench. The home had been decorated with the consideration of people who lived in Needham Court which included themed pictures and pictorial formatted signs.

The registered manager, deputy manager and staff had a very good understanding of safeguarding and were confident in their role in safeguarding people. Any safeguarding concerns were investigated with the outcomes fed back and practices changed if necessary in order to prevent reoccurrences.

Medicines were managed effectively with safe storage and appropriate administration. All records were complete and up to date with regular medicine audits being carried out.

People had risk assessments in place and associated care plans were clearly linked and updated in line with risk assessment reviews.

A robust system was in place for the application and authorisation of Deprivation of Liberty Safeguards (DoLS) in line with the Mental Capacity Act 2005 (MCA). Best interest decisions were recorded in people's care records and staff were aware of what this meant in relation to people's care. Where required, people were deprived of their liberty in the least restrictive way. For example, those vulnerable to leave the home unsupervised were accompanied by staff or family members when away from the home.

People were treated with dignity, respect and compassion. Staff spoke with people in a friendly, gentle, polite manner and were warm and caring in their approach. People told us staff were "lovely" and they were happy and content living in the service. There was a wide range of activities provided in the home and in the community. The home had two activity co-ordinators who designed activity programmes tailored to people's individual interests. People were also involved in running activities such as a knitting club.

People had a range of care plans in place that were personalised and specific to their individual needs. Care plans contained relevant detail to guide staff how to support people appropriately and in line with their wishes. Care plans were reviewed regularly, were up to date and relevant to each person.

The registered provider had a clear complaints procedure in place. All complaints received were recorded, fully investigated and appropriately acted upon. Complainants received feedback from the registered manager on the outcome of any complaint made. People knew how to make a complaint and felt comfortable in doing so, although they told us they had never needed to complain about the service.

The registered provider conducted a staff awards scheme every two years which included individual members of staff being nominated by colleagues, people who use the service and relatives. People were involved in the awards ceremonies and the awards were to acknowledge exceptional contribution and performance of staff members.

Staff were very enthusiastic about the service and told us the registered manager was very approachable and supportive and that the home was very well managed. They told us they felt fully supported, appreciated and valued in their roles at Needham Court due to the wide range of staff incentives that were available. These included tickets to local football clubs, trips to a chalet at Kielder Trust and numerous discounts and vouchers on offer.

The registered provider and manager had robust audit systems in place to monitor the quality of service delivery and to drive improvement. The registered manager sent out surveys to people, relatives, staff and external professionals to gain their views of the service. Records showed feedback from all was positive.

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. People told us they felt safe living in Needham Court.

Staff understood the principles of safeguarding people and were comfortable in their role. Safeguarding concerns were fully investigated and service improvements were implemented where identified.

There were enough staff to meet the needs of people. The registered manager monitored staffing levels and made adjustments where required and considered staff advice for additional staff. Staff were recruited safely.

Accidents and incidents were recorded and monitored. Additional measures were implemented when identified, to reduce the likelihood of reoccurrences.

Medicines were managed safely and senior staff took ownership and responsibility for administering medicines.

Is the service effective?

Outstanding 

The service was very effective. People told us they felt supported and cared for by staff who were skilled and experienced.

Staff received regular training in core subjects as well as additional training specific to people's individual needs. Staff were supported and encouraged to embrace specialist training and advance in particular subjects. Staff received regular supervision, observations and competency checks. They also received annual appraisals.

People with specific dietary requirements were supported to maintain their nutritional needs innovatively. People were supported to maintain a healthy weight.

Staff understood the principles of the Mental Capacity Act 2005 and deprivation of liberty safeguards. People living in the service had best interest decisions where required and people were deprived of their liberty in the least restrictive way.

Is the service caring?

Good ●

The service was caring. People told us they were happy, settled and well looked after.

People were treated with dignity and respect. Staff spoke with people in a friendly, gentle manner and knocked on people's doors before entering their rooms.

People had access to information about appropriate advocacy services.

Is the service responsive?

Good ●

The service was responsive. People told us staff were good and knew how to meet their needs.

The service was responsive. People told us staff were good and knew how to meet their needs.

The service provided a range of activities for people both within the home and out in the community. They also arranged additional activities to meet individual people's interests. Activities were designed to stimulate people's interests as well as memories and sensory needs.

People had a range of personalised care plans in place to meet their needs. Care plans were detailed to guide staff and contained people's individual preferences. People and their relatives were involved in planning their care.

Is the service well-led?

Good ●

The service was very well-led. People told us they felt the service was well managed.

The provider held a staff awards scheme every two years which acknowledged outstanding care and service provided by individual members of staff. The scheme involved nominations from colleagues, people and relatives. People were included in the celebrations of the awards ceremony.

The provider had a number of staff incentives that staff at Needham Court told us made them feel valued. Incentives included family days out, holidays to a chalet at the Kielder Trust and monetary prizes as part of a festive gift.

The provider carried out surveys with people, relatives, staff and external professionals about the service. There were positive

responses received across the board.

The provider and registered manager had robust audit systems in place to monitor quality of service delivery and to drive improvement.

Needham Court

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 comprehensive inspection took place on 17 May 2016 and was unannounced. The inspection team consisted of two adult social care inspectors.

Before the inspection took place we reviewed the information we held about the service. This included notifications we had received from the provider. Notifications are changes, events or incidents the provider is legally required to let us know about. The provider also completed a Provider Information Return (PIR) and this was returned before the inspection. This is a form that asks the provider to give some key information about the service, what the service does well and what improvements they plan to make.

We contacted the local authority commissioners of the service, the local authority safeguarding team and Healthwatch. Healthwatch England is the national consumer champion in health and care. There were no concerns raised.

We used a number of different methods to help us understand the experiences of people who lived at Needham Court. As part of the inspection we conducted a Short Observation Framework for Inspection (SOFI). SOFI is a specific way of observing care to help us understand the experience of people who could not talk with us.

During the inspection we spoke with four people and received feedback from two relatives. We also spoke with eight members of staff, including the director of service and wellbeing, the head of elderly care, registered manager, the deputy manager, two senior care workers, one activities coordinator and the administrative assistant. We looked at two people's care records and people's medicine records. We reviewed four staff files, including records of the recruitment process. We reviewed supervision and training records as well as records relating to the management of the service. We also completed observations around the service.

Is the service safe?

Our findings

People we spoke with told us the service was safe. One person said, "I definitely feel very safe. That's why I came in here really. I had a lovely bungalow but I was really poorly so I came in here. It gives me security living here." Another person told us, "Oh yes I feel safe. They come in and check up on you two or three times on a night."

Staff told us they were confident in supporting people and ensuring they were safe. They told us how they would do everything possible to safeguard people from abuse. Staff were able to name different types of abuse and what they could entail. They were also aware of potential signs people may show if they were being subjected to abuse. One staff member said, "It's about protecting their dignity and privacy and from negligence of staff not following through on things. When you support people you build up a relationship with them and learn their particular needs and potential signs they may show. It's about knowing your residents." Staff told us they would report any concerns to the registered manager or deputy without hesitation.

We reviewed the provider's safeguarding policy as well as the safeguarding incidents that were recorded in the home. We saw the registered manager had clearly documented those incidents that were referred to the local safeguarding authority, as well as those that were managed internally within the home. All safeguarding records included the current progress (or whether closed), any action taken and the outcome, as well as any lessons learnt.

People told us there were enough care staff on duty to meet their needs. One person said, "When you're poorly you can press your buzzer for staff. They come pretty quick when you press that. There's always someone around." Another person told us, "I've had vertigo (previously) and if I couldn't get out of bed I pressed the button and staff came round to me."

The registered manager told us they completed all the staff rotas personally. At the time of our inspection the home had no staff vacancies. The provider's procedure was that they over recruited by 12% and this allowed cover for training and holidays without having any impact on care delivery. We were told that as the provider had other homes in the area, if they did need additional staff support then staff from these homes would always be an option. The registered manager said, "We have a brilliant staffing team, we want the continuity of staff for the residents." They confirmed that if it was urgent they would use agency staff but this wasn't something that was generally needed.

The registered manager reviewed the staffing levels each month by looking at the dependency levels within the home. They took into consideration accidents, people's needs, as well as any changes in the staffing and what the required skill mix should be. The registered manager explained how the staffing levels were calculated using an automated system with all key factors considered but historically they had increased the staffing and would be confident to do this again if needed.

Staffing levels during the day at Needham Court were typically two senior care workers and three care staff

on the upper floor and one senior care worker and four care workers on the ground floor. There was also a deputy manager who worked as a senior care worker on the ground floor for a minimum of six hours per week but more if needed.

The recruitment of any new staff members was done through the provider's head office. The registered manager told us how they conducted the interviews and then arranged for references and Disclosure and Barring Service Checks. We reviewed staff recruitment files and noted they were complete and all appropriate checks had been carried out.

Staff talked us through the process they would follow should there be any accident or incidents within the home. The registered manager explained how they then cross-checked the information and ensured all appropriate action had been taken, such as whether people's care plans had been updated accordingly and whether person's relatives had been informed. Records demonstrated this in practice.

We shadowed a senior care worker and discussed with them how they managed medicines within the home. These included room and fridge temperature checks every morning. Control Drugs (CD) were audited each Monday and all CD administration was double signed. We saw staff completed a weekly Medicine Administration Records (MAR) check, and noted any action required. The registered manager then also conducted a MAR and Topical MAR (TMAR) audit. We saw all audits were thorough and documented if any action was required, with a clear timeline and recording of when action was completed.

The senior staff member told us how they supported people to self-administer their medication if they wanted to do so and had the capacity. In order to ensure it was done safely they completed a weekly audit to verify stock balances and minimise any potential risks.

We found the senior staff member was knowledgeable of each person and their medication requirements including risks and contraindications for each medicine, such as warfarin. They explained the provider had a process in place where all warfarin administration was double signed on administration. In addition people's care plans had food lists that all staff needed to be aware of in relation to when medicines needed to be taken. This meant staff had knowledge of people's needs in relation to medicine.

Where people required topical creams, each cream had a sticker to record its opening date and expiry date. The staff members had also set up body maps which were available for every cream prescribed which clearly indicated where the cream needed to be applied. The body maps were stored alongside the care plans so all staff members could access them.

Risk assessments were completed for each person living at Needham Court. Records we viewed showed risk assessments were updated and reviewed in a timely manner. We saw all areas which were assessed were clearly linked to care plans and clearly documented how the likelihood of each risk should be reduced. For example, a person at risk of weight loss had a nutrition and hydration care plan in place, input from a dietician and was given fortisips (a thick drink which supported people to maintain their weight).

The registered manager and deputy manager carried out regular checks on the suitability of the building including fire alarms, fire extinguishers and water temperatures. There were appropriate risk assessments in place including fire, infection control, legionella and manual handling. The home also had fire evacuation procedures in place which included individual personal emergency evacuation plans (PEEP) for each person living in Needham Court.

Is the service effective?

Our findings

People told us they felt very supported and cared for by staff who were skilled, experienced and knew their needs. One person said, "When I have a bath someone (a staff member) sits with me and washes my back. I can do the rest but they stay with me." Another person told us, "I get help from staff with my pills."

Staff told us the provider had its own training academy locally in Gateshead. Staff told us that having a dedicated training academy where they received face to face training made them feel "valued" and "important". They also told us that the provider arranged transport for staff who required it, to enable them to attend. One staff member said, "It's not too bad for me because I drive and know the area, but work put taxis and mini buses on for staff to attend." Another staff member told us, "I definitely feel supported and I have been given the opportunity to develop myself further as this is a new role for me."

A provider representative talked us through the academy and the courses on offer. They explained how external trainers were used for practical sessions such as moving and handling and fire safety. In addition there was a training manager who facilitated training in areas specific to the provider such as whistleblowing, customer care, dignity and dementia. The registered manager told us it was important that those training topics were delivered internally as the provider had a standard they wanted to ensure all staff understood and that they bought into the provider's values, ethos and ways of working.

The registered manager was a registered nurse and explained how the provider was supporting the NMC revalidation requirements by providing additional training for staff. The registered manager also arranged for training sessions to be held in the home. For example, they worked with South Tyneside Nutrition and Dietetic Service to conduct 'Food First' and 'Malnutrition Universal Screening Tool' (MUST) training. They had also arranged Mouth Care training through the local Oral Health Lead.

Staff told us they felt it was useful that the training groups were mixed when they attended the academy. The deputy manager told us, "It was (useful), yes. If [registered manager] is on holiday it gives you that understanding of what other things you have to do." They went on to say, "It introduces you to staff in other services and the brand's standards. I found it really interesting."

The provider had a list of training topics that were deemed as mandatory. The registered manager reviewed the compliance for all staff. They explained there was a policy which detailed the frequency of training. The provider had a computer management system that identified when training was due to expire so they had time to ensure staff completed refresher training.

The registered manager was clear that although the provider had a mandatory training schedule they could arrange extra training or training in the home at either theirs or the operations manager's discretion. Staff told us they were able to request specific training they were passionate about and aimed to develop their knowledge further. One staff member told us they had expressed their interest in gaining more in-depth knowledge about strokes and how they affected people. They went on to tell us the registered manager supported their personal goal and arranged for them to attend the additional training. They said, "The

training courses are great. I did a stroke awareness course just before Christmas. I learned a lot about how people rehabilitate after a stroke." They explained to us how this impacted on their confidence and how they were able to implement their learning into their working roles.

The registered provider had engaged with Manchester University to create 'The HEARTS Process'. The aim of the training was to combine therapeutic and touch approaches whilst supporting people with dementia to create a relaxing environment which supported people's overall well-being. During the inspection we observed staff using the HEARTS Process when supporting people. For example, one person was shouting out and seemed a little distressed in the dining room. The person hadn't eaten anything despite staff encouragement and soft music playing in the background. They were isolated and not engaging with the mealtime. The person was supported by staff to the lounge after lunch time. They were still shouting out although seemed less distressed. Staff used the HEARTS process and sat next to the person and spoke to them in a soft, empathic manner to try and find out what the person wanted and what was wrong. Staff used appropriate touch as a way of comforting and the person appeared to relax and settle. With patience and compassion staff continued to use the HEARTS Process to speak with the person. This resulted in the person responded positively with staff, smiling and communicating. They then engaged in an activity and had something to eat and drink. This showed people benefited from the training staff had received.

Staff were keen to tell us about the induction they attended prior to starting work at Needham Court. The registered provider had a three day induction where staff attended the learning academy. On starting at Needham Court staff followed an induction booklet that was specific to the home and incorporated the Skills for Care common induction standards and the care certificate. New staff were assigned a trained mentor to work with and followed a 12 week induction programme. Staff told us they spent two weeks shadowing prior to working independently, something they told us was invaluable in getting to know the people who lived at the home.

Staff told us they received regular supervisions and annual appraisals. Supervisions are regular meetings between a staff member and their manager to discuss how their work is progressing and to discuss training needs. One staff member we spoke with told us, "You get your supervisions then your annual appraisal. With supervisions you're asked about anything that went well and any improvements (you want or need to make."

The home had a robust system in place to monitor and reduce the risks associated with malnutrition and dehydration for people. Each person had a malnutrition universal screening tool (MUST) in place to monitor weight loss and BMI, with clear steps to follow in event of concern. A MUST tool is a five-step screening tool used to identify if people are malnourished, at risk of malnutrition or are overweight. For people who had specific dietary requirements a care plan was in place which included: food allergies, special dietary requirements, preferred drinks and the person's dietary likes and dislikes. Records showed people were supported to reach and maintain a healthy weight as well as keep hydrated.

The provider had spent a lot of time investing in its catering staff; this included regular training for the chefs, as well as training on smooth foods. The home was keen to ensure the food menu kept evolving and was currently having a theme of the month to trial new things.

The director of service and wellbeing spoke with us about an initiative they had researched, adopted and developed for the welfare of people using the service to improve their experiences. They explained it was the 'Pureed Food Innovation'. This consisted of thickening and gelling agents that were added to pureed food which were then moulded to look like the food it was, and could be eaten with a knife and fork for people with specific dietary requirements. For example, swallowing difficulties like dysphasia. This meant food was

visually attractive and more appetising for people. It also meant people's dignity was maintained even though they had special dietary needs as they were offered a meal which looked the same as everyone else's. With this process, food was still fortified so people could enjoy their meals with minimal risk. It also meant people were able to use a knife and fork to eat their meals rather than a spoon. This meant people's dignity and wellbeing was being supported extremely well in terms of their nutrition.

During the inspection we found two people enjoyed this type of diet and it had led to an increase in their weight and encouraged them to eat more. One person told us, "The food is really nice. I'm on quite a soft diet because I struggle to swallow. There's always choice and it's really tasty. I like to go down to the dining room to eat my lunch." The person went on to tell us the home used moulds so their food looked the same as other people's and they felt "comfortable" eating their meals in the dining room because of this. They also told, "I used to be on fortisips because I was skin and bone (when I came into the home). But I've put weight on and they said I could come off it."

One staff member told us about another person who enjoyed the smooth diet. They said, "[Person] had suffered a weight loss of two kilograms in a month. We contacted the GP and completed weekly weight monitoring." They went on to tell us it was agreed with the SALT team to try the person with the smooth food diet. They said, "Visually the food is better. [Person] really enjoys it." The smooth diet had had a positive impact on the person as the staff member told us, "[Person's] weight had increased with the soft diet" and they were eating more than previously. They added, "If you're on a soft diet and every single solitary meal is a bowl of mush there would be nothing more off putting."

During our inspection we spent time observing the meal time experience. We noted this was a well organised time of day and people were very complimentary on the food that was on offer. We heard people sharing their thoughts on the food. Their comments included, "The soup is really nice today," "my sandwiches are too", "everything always is though isn't it". People told us there was enough to eat and they enjoyed the food. One person told us, "It's quite good. There's a good variety. It's all homemade. You order your meals the day before. I have ordered scampi and chips for mine today. Some of the things I don't eat but they make me something else. I definitely get enough to eat." Another person told us, "I'm a vegetarian, it's very good and there's always enough. The desserts are really nice so I'm happy with the food. The biscuits are lovely too."

The staff at Needham Court focused a great deal on the meal time experience. Most recently they had introduced a twilight experience for evening meals. The staff within the home created a calm, relaxing environment by closing the blinds and creating mood lighting with imitation candles. Staff had found the changes had meant there was less disruption during the evening meal and people not only enjoyed the meal time experience, but ate more also. Staff told us people were more relaxed during their evening meals and it was "going really well" and was having a positive impact on people. The registered manager explained that it helped to provide a calm environment for people living with dementia on an evening, to positively support them to be more settled as it was identified some people may become agitated on an evening.

The registered provider had designed the home to meet the needs of the people who used the service. Needham Court is a three storey purpose built home with living accommodation on the first two floors. The third floor consists of the laundry services, storage and a large staff room. Each bedroom had an en suite w/c there were communal baths and wet-rooms on each floor to meet people's personal hygiene needs and preferences. There were a number of communal lounges and dining areas in the home for people to access at their leisure. The home had a hairdressing salon on the first floor which was accessible to everyone. A hairdresser visited the service each week. People told us they enjoyed using the facilities and looked forward

to getting their hair done. One person said, "I can't wait to have my hair done tomorrow." Another person told us, "We go upstairs to the hairdresser when she comes."

The environment and décor had been well thought out in the home and all furniture was of a high standard. During the inspection we viewed the 'Grace Unit' which was situated on the first floor and was specifically for people living with dementia. We observed a great deal of work and consideration had gone into the layout of the unit and it had been designed and tailored to meet the needs of people living with dementia. There were themed areas such as a beach area. There were also a number of areas to encourage people's memories of previous times and included items they could pick up and familiarise themselves with. For example, there was a laundry area with an old laundry tin, feather duster, ironing board and iron. There were a small number of men living in the dementia care unit and we noted a workbench had been placed in one area for people to use as a way of remembering pastime activities. We also observed appropriate signage for areas such as communal lounges, bathrooms, toilets and the dining room. The signs included both large printed words and pictures.

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). 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.

For those people who had a DoLS authorisation in place a care plan was in place for each person which documented the reason the DoLS authorisation was granted. The care plans included ways to ensure the person's care was the least restrictive possible. When best interest decisions had been made, documentation was clear and recorded the full process that had been followed. For example, we saw best interest decisions recorded for the use of falls technology. We noted all best interest documentation was decision-specific and gave full details.

Is the service caring?

Our findings

People told us the service was caring. One person said, "I'm well looked after. I'm happy with everything. The staff are good, they're very good. They are chatty, I like them." Another person told us, "I didn't want to go back to my home. I gave up my house. This is my home now. I've always been satisfied and I've settled down quite well." A third person said, "Oh I love it. I've been in here a long time."

The atmosphere in Needham Court was warm and welcoming and was busy with visiting family members and professionals. People told us there was a nice atmosphere in the home. One person we spoke with said, "Everything is very good. I'm quite content. I like it here because there's plenty of company. I was isolated where I was. Everybody is nice here." During our inspection we saw people smiling, laughing and responding positively to staff and each other which confirmed what people had told us.

Throughout the inspection we observed staff treated people with dignity and respect. Staff spoke to people in a respectful and polite manner, and referred to them by their preferred name. Staff explained support they were offering to people and gained permission before providing it, for example, supporting a person in their wheelchair to the bathroom. We observed staff knocking on people's doors and waiting for a response before entering. Staff helped people maintain their own dignity where required. For example, one person was eating a homemade cookie and had spilled crumbs on their clothes. Staff immediately supported the person and with permission, brushed the crumbs away and tidied the floor. The person was happy and chatting to staff and other residents throughout the support. Another person had spilled their drink when in the lounge. Staff immediately supported the person to their room to get changed and cleaned up the spillage on the chair and flooring.

We observed positive interactions between people and staff members, such as encouraging people to join in activities or supporting them with daily tasks. We saw people received verbal support of encouragement and prompts from staff in relation to their care, which promoted their independence in doing things for themselves. For example, encouraging and verbally supporting people to mobilise using their walking frames.

People also received physical support from staff with eating and drinking as well as when moving around the home. We observed physical support being provided in line with individual care plans and in a caring and compassionate way. Support was gentle, patient and at a pace comfortable to each individual. Staff asked people if they were ready for the next piece of food before supporting them with it.

One staff member we spoke with told us, "You treat the residents how you would want to be treated or how you would want your mam to be treated. I keep that in mind when interacting with people."

Although there was no one at Needham Court who required an advocate at this time, the registered manager was clear on the support they would offer should the situation arise. Leaflets were available in the reception area and also documented in the service user guide about the advocacy support available.

Is the service responsive?

Our findings

The service was responsive to people's needs, wishes and preferences. One person we spoke to told us, "Oh yes they're (staff) good. They know what you need. I settled in well." Another person said, "I love it here. They see to me when I need them. It's definitely very nice." Staff explained to us how they got to know people living in Needham Court and supported them how they wished.

The registered manager and staff told us about the variety of activities that were provided by the home. The home had an arrangement with Beamish Museum as the provider had a gold membership. This meant they had unlimited access to the museum during normal working hours and were able to arrange visits for people living in the service. They had scheduled a visit for people living at Needham Court for June 2016. Beamish offers a dementia friendly environment, as well as opportunities for reminiscence.

The home also had access to a minibus every Monday. Staff told us they had taken people to the coast the previous day to get ice-creams to make the most of the nice weather. The home had two activity coordinators. One staff member worked Monday to Friday and the other Monday to Wednesday. One person told us how one activity worker was trained in manicures and gave people pampers. One person told us, "They do have activities for those who want to do them but I don't. I like to sit in my room and watch television." Another person said, "I go down if there's anything on. There's usually a singer on. They have a guitarist on soon." A third person told us they weren't really interested in any of the activities available in the home but that staff "take me to the library so I can get some books because I love to read".

The registered provider had initiated and implemented a 'Three wishes campaign'. People who used the service were asked to write down things they wanted to accomplish over the coming year. Staff then committed to ensuring they fulfilled people's wishes to the best of their ability. For example, one person's wish was to visit Australia. Staff worked together with the registered manager and organised an Australian party in the home for the person. The party included cork hats, picture displays, memorabilia and Australian themed food, drinks and quiz. During the inspection we saw photos of people in the home enjoying the party, including the person whose wish it was. There were meaningful activities for people living with dementia which included smelling boxes. Staff explained the smelling boxes were incorporated into a bingo style game and stimulated people's senses as well as encouraged their memories with familiar scents such as lavender.

It is evidenced that some people living with dementia can respond positively to doll therapy. The registered manager explained how they tried to involve families and promote a greater understanding of doll therapy. They had produced a leaflet for families which covered research, a psychologist's explanation, a family member's personal experience and how doll therapy could impact on a person's quality of life. We noted the leaflet had an emphasis on choice and options and how the importance was on the person's choice.

The activity coordinator and registered manager had regular meetings with the provider's marketing manager and discussed new ideas for engaging people who lived at Needham Court. The activity coordinator used the meeting to put forward ideas from staff and people living at the home. For example,

one person had suggested running a knitting club. Staff told us and records showed the person's suggestion was implemented and they were supported to lead on the knitting club activity.

We reviewed a number of care plans within the home. We noted these were clear, well written and focused upon the person's care and their individual requirements. We saw care documentation included a dependency profile, pre-admission assessments as well as risk assessments and thorough care plans for people's individual needs.

Each person within the home was allocated a care coordinator, who led on their care documentation. The home tried to involve family in planning their relative's cares. For those people who couldn't communicate their needs, or required or preferred support, their relative was invited in every six months to review their care. Staff told us how they use this as an opportunity to discuss everything and make any additions or changes.

The provider had a clear complaints procedure which was available throughout the home. People told us they knew how to complain if they were unhappy or dissatisfied with the service. One person we spoke with said, "There's two staff on the desk you could speak to (if you had a complaint) but I've never needed to." Another person said, "I've never had any cause to complain but we're free to do that if we want to. I would speak to staff." Each complaint that was received had a complaints summary form which included a clear recording of all the action taken and whether any future action was required as a preventative measure.

Is the service well-led?

Our findings

The service had a registered manager who had been in post since August 2015. People who used the service spoke very highly of the manager and told us they thought the service was managed very well. One person we spoke with said, "There's [registered manager] and [administrator] are on the front desk when you need them." Another person told us, "[Registered manager's] good, she's approachable, a nice person. They're (staff) there if you want to ask something. You don't have a worry (as they organise everything for you)." One relative we received feedback from said, "The care my [family member] receives from the home is way above any standards I expected. All the carers take an active interest in them and nothing is ever too much for them. I really cannot recommend this home enough and cannot praise all the staff enough for their excellent care towards my [family member] and other residents." Another relative we received feedback from said, "From walking through the door I was very impressed with the accommodation and all staff members. During the following months my [family member] has settled in well, they are now happy and thriving. The staff take good care of [family member] and always make time to have a chat. I have recommend the home to my family and friends. I know I made the right decision choosing this home."

The registered manager operated an open door policy and emphasised the importance of open communication and transparency within the home. Throughout the inspection the registered manager and deputy manager were available for staff, people who use the service, relatives and visiting professionals to speak to. During the inspection we observed staff approaching the registered manager and deputy manager in the office and around the home with queries. Staff told us management were approachable and they felt comfortable to go to them if they had any issues or queries, or if they required any guidance. One staff member told us, "[Registered manager] is very approachable, she listens. [Deputy manager] is fairly new but they have adapted very well and are very approachable too." Another staff member told us they found it so useful that "[registered manager] has the nursing experience". They went on to say, "Both (the registered manager and deputy manager) are so experienced you can go to them with ideas. It's excellent having someone to bounce ideas off and get good guidance from (who has such experience). [Deputy manager] is quite new but they have been an excellent addition. They've slotted in very well."

We spoke to the deputy manager about their role and what support was available to them when the registered manager was on leave or away from the home for reasons such as training. The deputy manager told us, "I have [registered manager from a sister home] who I can contact and the operational manager is on the end of the phone if I need them." They went on to tell us the service and registered provider are "really good" and "everyone has an open door". They told us, "It really is a home from home and the residents are put first. People are made to feel welcome and family are always invited. They can visit anytime. If relatives want to speak to us after hours we will accommodate."

The provider conducted staff awards every two years. Staff, relatives and people were all able to nominate staff for a variety of awards. The staff at Needham Court had received a number of nominations for the awards from people, their relatives and visiting professionals. We reviewed the nominations and some of the comments included, "[Staff member] is a lovely, kind, caring person. She has a caring attitude to her profession. She will go that extra mile to make sure I'm always comfortable and happy," "...his kindness is

never ending. He is perceptive to the residents' needs and goes above and beyond what he is required to do" and "...it is the finishing touches of everyday care that make him stand out. He truly is gifted as a carer".

Following a nomination period, and shortlisting, the nominees were then interviewed about their role and what they do and a winner was selected. One staff member from Needham Court had won the carer of the year award at the most recent awards in March 2016. The registered manager told us how it was important that the people living at the home were involved in the awards evening. Therefore, all the staff attending the ceremony went to the home in their black tie outfits, and shared canapes and prosecco with the people who lived there. One staff member told us about a care assistant in the home who had won carer of the year and said people "were over the moon to see them (staff) in all their finery" when they visited the home prior to attending the awards event. During the inspection we observed photographs of people enjoying canapes and prosecco with staff members. We noted people looked happy and were smiling.

The provider had a number of staff incentives that were ran nationally. The staff at Needham Court told us these events and opportunities made them feel valued as a staff team as well as gave them opportunities to bond as a team. They told us that every year the provider organised a family day to thank staff. This year the family day was a trip to Scarborough where staff could attend with their partners and children. One staff member told us, "Little things like that make you feel valued." The provider also held season tickets to three local football clubs and each week staff could be entered in to a draw to win a pair of tickets. Staff told us they had won these tickets a number of times and had enjoyed attending football matches with a family member or friend. Most recently the provider had purchased a chalet at the Kielder Trust. There were a number of weeks per year that were available for staff to nominate each other to win. Staff could either go during weekdays or a weekend.

We spoke with a member of staff at Needham Court who had won the opportunity to enjoy a holiday at the chalet. They told us, "I was over the moon. It was quite emotional when [director of service and wellbeing] told me I had been nominated. It was really nice to be appreciated." The staff member went on to tell us they had enjoyed the holiday with their family so much that they planned to book the chalet for a future holiday. They also told us the chalet was adapted for full wheel chair use which meant staff could also enjoy holidays with disabled family members. One staff member told us they also received staff discounts for certain shops. They told us they felt all of the staff incentives made staff feel appreciated and valued by the provider. They told us, "All of these incentives help and impact on the atmosphere of coming to work."

The provider had also introduced a festive staff reward where every staff member received a bottle of bubbly and a locally produced bar of chocolate. Two bars of chocolate contained a golden ticket which rewarded the staff members who won them, with a £100 cheque. Also two bars of chocolate contained golden tickets worth £500. A representative of the provider explained they had implemented the gifts as an additional thank you to staff to show appreciation.

The provider conducted an employee survey, the most recent being in November 2015. We reviewed the results and noted they were positive throughout. Of the staff who took part, 98.5% said they were proud of the work they do, with 91% thought their training and development opportunities helped deliver better care.

The registered manager also organised a survey specifically for the people in Needham Court. The most recent survey took place in May 2015. When asked the question if people were happy living at the home, all responses were either 'agree' or 'strongly agree.' We noted all responses were positive for questions around care, such as whether people felt safe, secure and happy with the care they were received. People's responses were also positive about the staff team, such as were the staff team gentle, sensitive and

responded promptly. Comments from people and relative's survey included, "Excellent home. Staff are amazing, the care they give the residents is second to none" and "always think the staff interact wonderfully, happy with the care given".

The registered manager had also organised a survey in March 2016 to ask all supporting external professionals for their views. Professionals who commented included GPs, district nurses, health care services and community matron/nurse practitioners. We noted all responses were positive.

The registered manager talked us through their audit procedures and how they ensured the service was delivering a high quality service. They, and their staff team, completed regularly audits which included infection control, health and safety, care plans, staff and people's accidents, as well as medication audits. Each day the lead person on each floor completed a daily manager's report; this included any key events, changes in people's health, accidents or incidents. The registered manager showed us that following this daily report they cross checked the care plans for people involved to ensure they were up to date and information was reflected accordingly. They also produced an action plan, which detailed clear timescales and accountability if further action was required. The registered manager's audit process also included a night time visit; they told us they conducted a visit at least every other month. They also attended the home on a weekend at least once a month.

In addition to the registered manager's checks, the provider had a system whereby independent audits and feedback were completed regularly. For example, the provider's compliance manager completed a bi-monthly audit, and in the interim months the operations manager completed a visit.

A representative of the provider told us they had recently appointed a director of well-being, a relatively new role within the organisation. The director of well-being visited every two to three months and focused on the environment and the well-being of people and staff.

The registered manager explained how they could analyse the accidents and incidents that took place within the home. All were recorded on an electronic system and this gave the registered manager the ability to look for trends, such as in specific units and times of day. The provider's operations manager also completed a monthly overview of all incidents and submitted a monthly report to the Head of Elderly Care. We viewed electronic records and saw trends being analysed in practice.

The provider had a number of newsletters it used to communicate with people, relatives and staff. We noted a 'Team Newsletter' was produced for staff members which shared news and developments, as well as useful information for staff. The home also produced a newsletter for all people and relatives. This included pictures from events that had taken place in the home, as well as external and internal events coming up, such as entertainment, people's birthdays and fundraising events.

The registered manager told us how they used reflective practice to support the staff at the home. This was used following events or situations where they discussed the outcomes and actions from the activity/situation. Most recently we saw the tool had been used following staff supporting a person through end of life care, as well as learning from complaints.

The service tried to engage families and friends in the home. We saw the registered manager had arranged an informative session for families on dementia. Following the session relatives filled in feedback forms. We noted one comment recorded, "Content and presentation was excellent. The trainer facilitated very useful participant discussion. I would highly recommend the session to others." The registered manager had also arranged for a representative from the Alzheimer's Society to come to the people and relatives meeting in

May 2016 to talk about dementia and answer any questions.

Staff told us they completed a daily handover twice per day at the end of each shift. One staff member told us, "We record a description of people's day and their mood as well as specific things like if they have had a fall." The staff member went on to tell us, "We come in at half past 7 (half an hour before the start of their shift) and we do the staff handover. We have two reports; one about any visitors such as GP, social workers and DoLS assessors and a managers report." Staff handovers also included a description of each person's day and their mood as well as specific information such as, if they had suffered a fall. Staff told us the handover was useful and prepared them for the shift ahead. Senior care workers completed the handover and relayed the information to care assistants on their shift and floor.

During the inspection we viewed comments received by the home. One of the most recent was a letter from January 2016 from a relative which stated, 'I wish to bring to your attention the outstanding care given to my [family member] during their stay at Needham Court. Not only had [family member] enjoyed their stay but we, as a family, have been incredibly well supported during our difficult time in our lives. The care and consideration given has been nothing short of outstanding. Leadership from [registered manager] is clearly pivotal and indeed, from the first time we set foot in the home, staff training and standards have been very apparent.'

The home had received a number of thank you cards from relatives of people who had previously lived in Needham Court. Some of the most recent comments included, 'It gave us great comfort in knowing that [family member] had been treated with the upmost efficiency, respect and dignity.' And 'I have genuinely felt [family member] has been safe and wonderfully cared for at Needham Court. You really have been so kind and supportive to [family member] and included all of the family.'

Clergy from local places of worship regularly visited the service to deliver a service and speak to people individually. People were supported to visit local shops, libraries and cafes. This meant people were supported to maintain links with the local community.