

Green Light PBS Limited

Fairfield House

Inspection report

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Ratings

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

Summary of findings

Overall summary

About the service

Fairfield House provides accommodation for up to four people with learning disabilities. The service is in a large detached house with extensive outside space. There were three people living at the service at the time of our inspection.

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

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure that people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence. The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

There was a strong person-centred culture in the service. Staff were highly motivated to provide people with tailored opportunities to ensure they achieved the best outcomes. Staff were skilled at using their knowledge of people's preferences to encourage and motivate people to try new things. Staff understood the importance of social inclusion and were creative in developing ways people could be engaged in the local community. People were supported to maintain and develop relationships.

Staff's in-depth knowledge of how people communicated ensured people had maximum control over their lives and how they spent their time. The registered manager and staff were committed to developing people's skills and knowledge so they could make informed choices. Staff had a comprehensive knowledge of the people they supported. They were able to describe each person's character and personality in detail, how this impacted on each aspect of their life and how their care needed to be delivered.

People were valued by staff members, who were keen to see them develop and achieve. Staff were committed to continuously finding ways to improve people's lives. Relatives gave consistently positive feedback about people's lives and opportunities at Fairfield.

People were supported by a staff team who had developed understood people's characters and what could cause them anxiety.

Staff had a comprehensive understanding of how people communicated. This helped ensure people's views were heard and their diverse needs met.

Staff were recruited safely and received regular development opportunities and training. People were supported by staff who had a strong rapport with them and, where possible had similar interests. Staff were encouraged to share their own interests, skills and experiences to benefit people.

People were supported to stay fit and healthy and their medicines were managed safely.

The physical environment reflected each individual's personality and there were plans to involve people in developing the outside space to provide people with further pastimes and opportunities.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

There was an effective quality assurance process in place. The provider's governance systems promoted continuous improvement.

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

Rating at last inspection

The last rating for this service was good (14 September 2017).

Why we inspected This was a planned inspection based on the previous rating.

Follow up We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.
Details are in our safe findings below.

Good ●

Is the service effective?

The service was effective.
Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.
Details are in our caring findings below.

Good ●

Is the service responsive?

The service was exceptionally responsive.
Details are in our responsive findings below.

Outstanding ☆

Is the service well-led?

The service was well-led.
Details are in our well-led findings below.

Good ●

Fairfield House

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

One inspector

Service and service type

Fairfield House is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps support our inspections.

During the inspection

We spoke briefly with two people who used the service. We spoke with seven staff including the registered manager, deputy manager and care workers. Due to people's communication needs we were unable to gain some people's views on the service, therefore we carried out observations of staff interactions with the people who lived there.

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

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at staff feedback and quality assurance records. We spoke with three relatives of people who live at the service.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as good. At this inspection this key question has now remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management

- Staff had gained a comprehensive knowledge of what could cause people anxiety and the limiting effect this could have on their ability to live a full life. This enabled them to support people successfully in all areas of their lives.
- Staff understood what could trigger behaviour that could challenge, how to avoid these triggers and how to support people if their behaviour began to escalate.
- The staff team found ways to resolve any challenges people faced. One person experienced anxiety around anticipation of something they bought. A holistic approach was taken to reducing the person's desire to continue buying the item. Their relative told us, "We really agree with what they're doing. We know it's going to be challenging but they've said, if it causes too much distress, they'll look for another way."
- Staff understood best practice models and how tailoring the support they provided to everyone in each unique situation, could influence the outcome the person experienced. One staff member explained, "[...] works really well with a structured life which is why we plan the week ahead and put it in his folder for him to see. He feels safe with the structure. Within PBS (Positive behavioural support), we know that if we give free choice, he becomes overwhelmed and will not make a choice."

Systems and processes to safeguard people from the risk of abuse

- The service had a proactive approach to promoting people's human rights. Some restrictions were in place for people's safety, but staff understood that these systems should not restrict people's options. The restrictions in place were reviewed on a monthly basis to identify if they were still necessary and if any were having a detrimental effect on people's human rights.
- Staff recognised their responsibility for people's safety included how new staff members were supported. One staff member explained, "When new staff start, they are told to ask any questions they need to. We make it clear to agency too that they can ask as many questions as they like. If we're not approachable it could put people at risk."
- Staff were up to date with their safeguarding training and knew what action to take if they suspected abuse. Staff had completed a questionnaire and held a discussion about safeguarding at a recent team meeting to help refresh their knowledge of safeguarding and the provider's policy.

Learning lessons when things go wrong

- Information and records were monitored to identify if any learning could be made that would help improve people's lives.
- Staff understood the importance of recording any untoward events. One staff member commented, "Anything that is wrong is dealt with, otherwise we won't learn."

Staffing and recruitment

- The provider's recruitment practices continued to be robust and staff confirmed appropriate checks were undertaken before they supported people in the service.
- Due to their needs, people were not directly involved in staff recruitment; however, the provider's PIR stated, "When recruiting we ensure, as much as possible, that we employ individuals who will match the personalities/likes etc. of the individuals they will support." Staff confirmed one person enjoyed going to the organisation's office to meet the new staff who were there for their induction.
- There were enough staff to meet people's needs safely. Staff told us they organised their day so any tasks that did not involve people, were completed before people got up or after they went to bed. This ensured people received staff's full attention throughout their day.

Using medicines safely

- The registered manager and staff were committed to exploring all alternatives to alleviate anxiety or negative behaviour, so people did not take mood altering medicines. The registered manager told us, "We have involved lots of professionals but also really want to look at the activities and staffing levels before we start looking at medicines."
- Medicines were managed, stored and given to people as prescribed. Staff confirmed medicines stocks were checked daily and weekly and that they rarely found errors.
- Staff confirmed they received training before administering medicines. They also told us they observed and completed checks on each other's practice as well as having assessments of their competence.
- People had been prescribed 'as required' (PRN) medicines. Staff understood when people required these but did not consistently record whether they had been effective or not. Following the inspection, the registered manager confirmed they had requested staff now record whether a PRN medicine had worked. They had also requested this requirement be added to the provider's medicines policy.

Preventing and controlling infection

- People were protected from the spread of infection by staff who had received infection control and food hygiene training.
- Staff members confirmed they had plenty of equipment such as gloves and aprons available to them and cleaned the house every day. The registered manager told us cleaning tasks had been increased since the news of a national highly infectious virus.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Supporting people to eat and drink enough to maintain a balanced diet; Supporting people to live healthier lives, access healthcare services and support

- People were supported by staff who were committed to helping people stay fit, active and eat healthily as they understood the benefits these had on people's health. The registered manager told us one person was a little overweight, so they had been involved in creating a plan about their diet.
- Staff understood the importance of encouraging people to eat a balanced diet. Staff used their knowledge of people's tastes and preferences to help improve their diet.
- People were encouraged and motivated to be active. Staff told us, "The staff team here are very health aware. We have brought waterproofs so even if the weather is not good, we still get out exercising." and "When new staff come on shift, it's a really good time to motivate people to get out and do something."
- People were involved in planning the meals for each week. Staff explained the menu was tailored to help ensure it met everyone's needs and preferences.
- People were supported to see healthcare professionals when they needed to. A relative confirmed, "They are very on the ball, they always err on the side of caution."
- Staff confirmed they had received training in oral healthcare and that this had increased their awareness of how to support people in this area. They told us, "It reminded us how important it is and how it relates to other health needs. We are now more aware of how well people brush their teeth and making it fun to get them to do it well."

Staff support: induction, training, skills and experience

- The registered manager and staff used a variety of ways to increase their knowledge and skills. The registered manager told us team meetings were used to discuss topics such as medicines and safeguarding, to increase staff knowledge.
- Staff were encouraged to share their individual experiences and knowledge to benefit people and valued each other's expertise. They told us, "The management are really open to ideas. You feel like your voice is heard" and "It is useful having such a diverse team."
- Staff told us they had enough training for their role and that this was updated regularly. They added that they were regularly asked if there were any further skills or areas of their role they would like to develop further.

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

- People's needs had been considered when planning how the service was used. Each person liked to spend time alone. In addition to their bedrooms upstairs, each person had a lounge downstairs
- Plans were in place to improve the outside space. The plans were all based on each person's interests and

were designed to encourage people to enjoy the outside.

- Staff told us they aimed to make the service as homely as possible for people. Comments included, "It's a very comfortable, homely service. It is their home first and foremost" People's bedrooms and lounges were personalised to suit the tastes of each individual.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- People's needs and choices were regularly reviewed and assessed to identify if any changes were required to ensure care was being delivered in line with guidance and best practice. Reviews were detailed and considered the whole person.
- A variety of health and social care professionals were consulted on a regular basis to help ensure people's support was tailored to their needs and supported them to achieve the best outcomes.

Ensuring consent to care and treatment in line with law and guidance

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA.

- The registered manager had applied for DoLS on behalf of people however, some were awaiting review by the local authority designated officer. Staff knew whose DoLS had been authorised and why it was in place.
- Staff understood which decisions people could make for themselves and which would need to be made in their best interests.
- Staff told us they requested people's consent before commencing any tasks or providing care.

Staff working with other agencies to provide consistent, effective, timely care

- The registered manager and staff were regularly in contact with a range of professionals to help ensure people received effective care. A social care professional confirmed the information provided to them was thorough.
- The provider's PIR stated they were reviewing their policy regarding the support people received when moving out of services explaining this was, "In order to ensure adequate assessment and planning to promote the seamless provision of care."

Is the service caring?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

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

- There was a visible person-centred culture in the service. Staff were focused on ensuring people's wants and wishes were met in the way that suited them best. Staff shared key information effectively throughout the day so the whole team remained up to date with people's needs.
- Staff's knowledge of people helped ensure they were treated equally and their diverse needs were met. One staff member explained, "They have the right to the same as everyone else in society and its making sure all the right things are in place to enable that. They definitely have that here."
- Staff treated people with compassion and empathy. Increasing people's wellbeing was integral to how staff supported each individual. The staff team were committed to ensuring people were as engaged in their lives as possible. A relative confirmed, "It has a wonderful ethos, they really care."
- People's achievements were celebrated by the staff team. One staff member told us, "We know some things can take a long time but it's such an achievement when people get there. Even if it takes 10 years, it'll be worth it."
- People were treated with kindness and valued as individuals by the staff team. Feedback received by the service described the staff as, "Enthusiastic and caring toward the people they care for." A staff member described the team as "Positive, compassionate and empathetic."

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

- Staff interacted with people in a way that was tailored to their needs. People could not always share their opinions verbally and so different methods of communication had been developed. Staff had a comprehensive understanding of these methods which included signs, pictures and objects of reference.
- Staff listened to people's views and ensured these were respected.
- People were provided with information that enabled them to make decisions about their lives. Staff understood the importance of empowering people to make even the smallest of decisions.

Respecting and promoting people's privacy, dignity and independence

- Staff were skilled at identifying when someone was becoming distressed or feeling anxious. They consistently followed guidance in place to help the person feel calm and reassured.
- Treating people with privacy and dignity was embedded in the culture of the service. One staff member explained, "It's everything we do, it starts in a morning with how you greet and speak to them, how they are dressed, how you provide their personal care and make sure they have the right options to choose from. It's just how you should treat people, giving people respect and including them in their home."
- People were supported to do as much for themselves as possible. Staff guided people step by step

through a task but encouraged the person to complete each step themselves. They took time to refocus people when necessary and praise them when they completed each step and the whole task.

- The registered manager had placed a focus on developing people's daily living skills. They told us initially people had been a little reluctant but added, "It's how we encourage them and make it interesting."

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has now improved to outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- People received exceptional support from staff who worked effectively as a team to engage people in activities, hobbies, community contact and voluntary employment. Feedback received about areas of the service that stood out, included, "The amount of activities customers do." Staff used their knowledge of people to suggest innovative ways to engage them in activities. They explained, "Sometimes it's about how we word and present activities. For example, for one person going walking but with a litter picker, makes the activity more interesting to him", "[...] likes to find bugs. We now know where he can get really big slugs so he takes a tub and collects some" and "When they're with friends they can walk for miles without realising. It's the same with [...] with his litter picking; Once he's out he'll walk further than you expect." A relative confirmed, "Sometimes [...] would say he didn't want to do things, but they will cajole him because they know he will love it when he does it. They've got it spot on"
- Where possible people were supported by staff who shared similar interests or a strong rapport. Staff who enjoyed the same key interests and hobbies as an individual were recorded as being able to support the person in that area. This information with people's plans for the week, was used to inform the rota. The registered manager told us, "It helps everyone enjoy their time." Photos of one person's holiday showed staff and the person clearly enjoyed their time equally.
- Staff had taken time to gain a greater understanding of people's preferred hobbies and interests. This enabled them to offer people new and different opportunities tailored . A relative told us, "At Fairfield [...] does things he has never done at with us at home." Based on one person's interests, there were plans to empower them to re develop the garden, Staff told us, "I want him to take photos and decide what he wants in his sensory garden. He will be involved in ordering everything right from the beginning to the end. He will be able to grow some of the sensory plants in the greenhouse, and if he enjoys it and wants to, he can then grow more and maybe sell them to the other homes. It will take patience but that's why we're here to support him. I will do a folder for him and these processes will be in his folder, so he understands it." A relative added, "It's fabulous for him to grow things. We had chickens, and he had them at college, so they are getting some too!" The registered manager told us, "We have great plans for him this year as we believe he could be living a better life. It's about helping people to live the best life they can. It's going to be [...]s year!"
- Staff went out of their way to find the best way to help people achieve their goals. For example, one person was due to start some voluntary work at a hedgehog hospital. They had visited the hospital with staff who had recorded the tasks that the person had been particularly engaged by. The registered manager told us, "We'll have a structure devised, so his time will have been productive, which will help him enjoy it and want to go back next time." Staff celebrated people's achievements. One staff member had supported a person to complete the Ten Tors challenge, they described this as the highlight of their time at the service,

saying "[...] exceeded all my expectations and did amazingly." Another staff member told us the service was going to contact the local council to see if they would formally recognise one person's contribution to the local community.

- Staff were creative and resourceful in promoting social inclusion. A staff member told us how they supported one person to take the bus to the shops rather than driving, explaining "It's about making them part of society." They also listed a wide variety of local attractions people were supported to visit when they wanted to and told us people visited the local pub, a local disco and the gym. One person went to stay with their family but whilst there, became concerned they would miss a shopping trip they particularly enjoyed. They phoned and explained this to staff who supported the person to go ahead with the shopping trip.
- People were regularly supported to take part in opportunities that helped them relax and reduce their anxiety levels. People regularly had massages and some people reacted positively to touch. A staff member told us, "[...] has sensory balls, and tapac (a method of sensory stimulation) to reduce his anxiety. We researched how to do tapac and it soothes him. Sometimes he can do it himself and sometimes wants us to do it." They told us another person liked staff to stroke or do the alphabet on his palm at night time to help them relax.
- People were supported to develop relationships with others. One person found pilates helped them relax, so a pilates teacher visited them at the service. A staff member told us, "It's lovely to see the relationship they have developed." Staff regularly supported and suggested ways for people to maintain and develop contact with people living in other Green Light services. Staff told us, "I suggested we could share details about where [...] is doing his litter picking and when, in case anyone else wants to join him" and "We have been looking at goals or the future and we suggested a rambling club which we can offer to other services and make it a social event too."
- People were supported to plan their days and weeks and their plan was produced in a format they could understand. People were also supported to go on holidays based on their interests. One person's holiday to a theme park had been based on relative's recommendations and carefully planned to ensure any triggers causing the person anxiety were minimised. The registered manager and staff were keen to use holidays as an opportunity to empower people to try new things. The PIR detailed how learning from what people had enjoyed during their holiday was being used to develop ideas for regular, local activities.

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

- People were supported by a staff culture that strived to provide personalised care. Staff's in-depth knowledge of how people communicated ensured people had maximum control over their lives and how they spent their time. One staff member explained, "If people want to go out, they are able to. [...] will squeeze your hand, be repetitive and is fidgety. We ask what he would like, and he might get up and go to the door. We will offer to go out in the garden or ask him if he wants to go out in the car. He has some pictures and will show us the car if that's what he wants. He can also choose where he wants to go, he'll show excitement!"
- People were encouraged to develop their communication skills increase the control they had over their lives. A behavioural analyst was employed by the provider who supported staff to understand people better. One staff member told us, "It encouraged us to wait for him to ask for things rather than pre-empting everything. If he wants something, he is now more able to get what he wants rather than us guessing and sometimes offering the wrong thing." The person's relative confirmed, "Any way to enable him to communicate more, helps him be more involved in his life."
- The registered manager understood that for people to make informed choices, they needed to have the right experiences and develop the right skills. They told us, "We aim to continue with a strong focus on supporting people to continue to build life skills and better tolerate different day to day situations they encounter." A staff member confirmed about one person, "We are trying to increase the choices [...] is aware

of so he doesn't just choose the quick and easy options he knows."

- Staff had a comprehensive knowledge of the people they supported. They were able to describe each person's character and personality in detail, how this impacted on each aspect of their life and how their care needed to be delivered. A relative told us, "We have been so happy. They have been wonderful for [...]. He doesn't want to come home to us. Fairfield is his home now."
- People were supported by staff who were clearly passionate about their work and motivated to continue seeking ways people's lives could be improved. Reviews of people's care were extremely detailed which enabled everyone to see what had been successful and where improvements or changes could be made. Feedback to the service from a professional included, "The staff team are friendly and professional and seem to always seek ways to improve things for their customers." A relative confirmed, "The staff are excellent, there are some absolutely brilliant staff. They are so dedicated to their jobs."
- Technology was used to help meet people's communication needs and preferences. The provider's PIR stated, "One individual also uses the iPad as a tool to find out information they are seeking, such as what book shops are in certain towns, from this he can then communicate to us his desire to visit such places." Another person enjoyed listening to music but did not like listening to the radio because they disliked the talking. They had an electronic assistant that would play whatever music they wanted, when they wanted it.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- The service identified people's information and communication needs by assessing them. These needs were shared appropriately with others.
- Information provided to people was in the correct format for their needs. The provider's PIR stated, "We use visual aids where necessary and social stories to best meet people's needs. We have adapted versions of documentation for the individual to make it simpler and easier for the individual to be able to process the information given and effectively communicate their needs and wishes."
- One person who had a keen interest in France. Staff regularly produced a list of words that were relevant to the person at that time, in English, French and in picture form.

Improving care quality in response to complaints or concerns

- The service had a policy and procedure in place for dealing with any concerns or complaints. There was an easy read version available for those who needed it. The registered manager told us, "We value feedback and want to use it to make things better."
- People were regularly asked for their views of the service and they had an easy read complaints form in their bedrooms.
- A relative told us they would be confident raising a concern or complaint, would know who to contact and was confident they would be listened to. Another relative said, "There's nothing they could improve on."

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question has now remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The provider's stated aim was, "Empowering people with autism to lead a lifestyle they are proud of." It was clear the registered manager aspired to deliver this. Staff feedback to the service included, "There is consistent, positive, empowering support to all customers."
- There was a strong emphasis on continuous improvement within the service. The staff team suggested and embraced ways to improve people's quality of life. One staff member told us, "Now the manager and deputy are here we have more ideas about independence and inclusion." Feedback to the service from a professional confirmed, "The attitude of the staff is always positive, by which I mean they try to look for ways to improve, whether it is in their own personal training, activities for the customer or engaging with other professionals."
- The provider's PIR stated, "Our focus is to maintain a culture of inclusivity." People were seen as part of the 'team' at Fairfield and were empowered to be part of their local community.
- The service was supported by systems and processes that fostered person-centred outcomes. Checks completed gave recommendations about how each aspect of the service, could be improved to produce better outcomes for people.

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

- The registered manager ensured people, their relatives, staff and professionals were regularly consulted in a meaningful way about the service. Staff told us they felt empowered to make suggestions and share their opinions. One staff member confirmed, "Everyone here is very open to ideas." A relative told us, "There are lots of ideas and consultation about anything that is happening."
- Staff clearly felt engaged with the organisation and its aims and were positive about how the service was run. One staff member told us, "I love my job so much because of the company." A relative confirmed, "I think the staff are very happy. You rarely go in and find that the staff aren't positive. It's really good."
- The registered manager recognised the importance of listening to and supporting the staff team. They told us, "We need to show staff we are listening and do things promptly. We need to be able to feedback by the next team meeting what has been achieved and if not, why not" and "We are a caring team and we want to get the best of staff, so we ask how things are, then they know we will be supportive."
- Relatives gave positive feedback about the service and told us they were consulted about the care their family member received. One relative confirmed, "We're just so happy with the service. We are genuinely happy!"

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

- The registered manager regularly used development opportunities to update their knowledge of best practice.
- There was an effective quality assurance system in place to drive continuous improvement within the service. Systems were reviewed and developed to drive improvement within the service.
- Appropriate checks were completed by staff, management and the provider, to help ensure the service remained safe and complied with regulations. Any required changes or updates were shared and acted upon.
- The service had notified the Care Quality Commission (CQC) of all significant events which had occurred in line with their legal obligations.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The registered manager promoted the ethos of honesty, learned from mistakes and admitted when things had gone wrong. This reflected the requirements of the duty of candour. The duty of candour is a legal obligation to act in an open and transparent way in relation to care and treatment.
- A relative confirmed the organisation worked in a transparent way.

Working in partnership with others

- The home worked in partnership with a variety of organisations to support people's needs.
- The staff facilitated regular contact with people living in other services.