

Aspen Place Ltd

Aspen Place

Inspection report

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12 February 2019
13 February 2019

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Ratings

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

Summary of findings

Overall summary

About the service:

Aspen Place was previously known as Greenways Nursing Home. The service has undergone extensive remodelling and refurbishment which included extending the service to accommodate more people. Aspen Place is registered to provide nursing and personal care and support for up to 52 older persons living with dementia or nursing needs. The service provides long term and respite care. At the time of our inspection there were 39 people living at the service.

People's experience of using this service:

We spent time with people during our visits and without exception feedback received from people living in the service was extremely positive. People and their relatives said that the service was of a high standard. People were cared for by genuinely kind and compassionate staff who were dedicated and committed to ensuring that people received the care they needed and wanted.

The remodelling and refurbishment of the service was of a high standard. The service had embraced the use of technology to enhance people's quality of life. Feedback received included, "The open plan kitchen is a fabulous idea. The residents really benefit from it. They can see what's going on and ask for a snack whenever they want. It has more of a restaurant / hotel vibe", and, "There's always someone about. It feels safe. The hustle and bustle is like normal life. The kitchen is great, they like to watch the chef and chat."

People's wishes for their end of life were clearly documented and the care and support provided was exceptional. Staff demonstrated a depth of compassion and empathy and genuinely cared for people they supported.

The management and staff created a warm and relaxed environment and we observed a strong caring relationship between people and all grades of staff. Relationships were professional, but two way and people knew about the registered managers and staff families and interests which helped maintain these relationships.

People received care from a dedicated staff team who were very kind, caring and compassionate. Staff had built very strong relationships with people.

There were quality assurance systems in place to help monitor the quality of the service, and identify any areas which might require improvement. The provider and registered managers listened to feedback and reflected on how the service could be further improved.

The service was well led. The provider's values and vision were embedded into the service, staff and culture. The provider and registered managers were passionate and committed to developing a service where

people received genuinely person-centred care. This was evident throughout our visit.

The service was safe, with systems and processes which ensured that any concerns were reported to appropriate authorities without delay.

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

Rating at last inspection:

At our last inspection we rated the service good. The last inspection report was published 13 June 2016. At the inspection we found that the lack of outside space was an area in need of improvement, this was due to the building work at the time of the inspection. Following the completion of the building work this shortfall has been met.

Why we inspected:

We completed a planned inspection based on the previous rating of Good.

Follow up:

We will review the service in line with our methodology for 'Good' services.

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 responsive

Details are in our Responsive findings below.

Good 

Is the service well-led?

The service was well-led

Details are in our Well-Led findings below.

Good 

Aspen Place

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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

One inspector undertook this inspection.

Service and service type:

Aspen Place 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. Aspen Place is registered to provide nursing and personal care and support for up to 52 older persons living with dementia or nursing needs. The service provides long term and respite care. At the time of our inspection there were 39 people living at the service.

The service had two managers 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:

The comprehensive inspection took place on 5, 12 and 13 February 2019. The visit on the 5 February was unannounced, which meant the provider and staff were not aware that we were coming. Short notice was given for the other days.

What we did:

Before the inspection the provider completed a Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We reviewed previous inspection reports and notifications received from the service before the inspection. A notification is information about important events which the service is required to send us by law. This enabled us to ensure we were addressing any potential areas of concern.

During the inspection we observed the support that people received, spoke with people and staff and gathered information relating to the management of the service.

For example:

- Notifications we received from the service
- Four staff recruitment files
- Training records
- Three people's care records
- Records of accidents, incidents and complaints
- Audits and quality assurance reports
- We spoke with 12 people living at the service and seven visitors
- We spoke with both the registered managers, the provider, and six staff on duty
- We spoke with two healthcare professionals including a visiting GP

After inspection we were sent additional evidence and information that we requested, to corroborate our judgements of 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 our last inspection we found that improvements were required to ensure people received a 'safe' service. At this inspection the service we found that people received a 'safe' service.

Good - People were safe and protected from avoidable harm. Legal requirements were met.

Assessing risk, safety monitoring and management

- At the previous inspection we found that the lack of outside space was an area in need of improvement, this was due to the building work at the time of the inspection. Following the completion of the building work this shortfall had been met.
- Visitors told us that, "Even during all the building work, the care was incredible. Second to none. Their attention to detail is fantastic. They really know everyone well. All of them [staff] do".
- Visitors told us that, "How they managed the challenge of the building work was incredible. The care never faltered".
- Environmental risk assessments had been completed, which assessed the overall safety of the service.
- Staff were clear about their responsibilities regarding premises and equipment.
- Risks to people were assessed on admission to the service and regularly updated. Where risks had been identified these had been assessed and actions were in place to mitigate them. Staff provided support in a way which minimised risk for people. Risk assessments included the risks associated with people going out. Clear individual guidelines were in place for staff to follow to reduce the risk. People were enabled to take positive risks to maximise their control over their care and support. One person had a laminated card with their details on when they left the building to reduce the risk of them getting lost.
- Records were maintained of accidents and incidents that took place at the service. Such events were audited by senior staff. This meant that any patterns or trends would be recognised, addressed and the risk of re-occurrence was reduced. Records showed actions were taken to help reduce any identified risk in the future.

Systems and processes to safeguard people from the risk of abuse

- People benefited from a safe service where staff understood their safeguarding responsibilities.
- The registered managers were clear about when to report concerns. They were able to explain the processes to be followed to inform the local authority and the CQC. The registered managers also made sure staff understood their responsibilities in this area.
- Staff had attended training in safeguarding adults at risk. They told us that they were happy with the training they received.
- Staff had the knowledge and confidence to identify safeguarding concerns and acted on these to keep people safe.

- Staff were able to describe the action they would take to protect people if they suspected they had been harmed or were at risk of harm. This included notifying the local authority.
- Staff had developed positive and trusting relationships with people that help to keep them safe; staff had the time they need to do so.
- Visitors told us that, "There's always someone about. It feels safe. The hustle and bustle is like normal life. The kitchen is great, they like to watch the chef and chat."

Staffing and recruitment

- There were enough staff to provide a regular, consistent service for people. Staff were available and responded quickly to people.
- Visitors told us that, "There are plenty of staff. They are all kind and caring and inclusive" and, "There is always lots of staff".
- Staff supported people in a relaxed manner and spent time with them. People did not wait when they required assistance.
- Staff told us they were happy with the staffing levels and told us that the staffing was sufficient to meet the needs of people using the service.
- The registered managers were available most days and could be contacted out of hours for telephone advice or support.
- Staff were recruited in line with safe practice and we saw three staff files that confirmed this.
- Checks were made to ensure staff were of good character and suitable for their role.
- Checks had been carried out to ensure registered nurses had current registration with the Nursing and Midwifery Council (NMC).

Using medicines safely

- Medicines were stored securely following current guidelines for the storage of medicines. There was a dedicated place for storing people's medicines, which was clean and well organised. The medicines storage was locked when not in use.
- Each person had a medication administration record (MAR) detailing each item of prescribed medicine and the time they should be given.
 - Staff completed the MARs appropriately, for example staff waited to check people had taken their medicines before signing the administration records.
- There were clear guidelines medicines required as needed (PRN). We were told and records confirmed that people's medicines were regularly reviewed.
- Peoples records detailed how people took their medicines, for example, with a glass of water or with thickened fluids due to swallowing difficulties.
- There were safe systems in place for the receipt and disposal of medicines. A record was kept of all medicines received and removed from the service.
- Feedback from a local pharmacist included, "It's very well organised".
- Staff told us of the training they had received in medicines handling which included observation of practice to ensure their competence.
- All the staff we spoke about giving people medicines told us that they felt confident and competent.

Preventing and controlling infection

- The premises and gardens were exceptionally well maintained and well presented.

- There were arrangements in place to ensure the service was kept clean.
- There was an infection control policy and the registered managers carried out infection control audits.
- The registered managers understood who they needed to contact if they need advice or assistance with infection control issues. For example, an outbreak of diarrhoea had been reported and appropriate measures had been put in place for limiting its spread, this included closing the home to visitors.
- Staff received suitable training about infection control, and records showed all staff had received this.
- Staff understood the need to wear protective clothing (PPE) such as aprons and gloves, where this was necessary. We saw staff were able to access aprons and gloves and these were used appropriately throughout the inspection visits.
- Staff understood the importance of food safety, including hygiene, when preparing and handling food.
- Relevant staff had completed food hygiene training.
- Suitable procedures were in place to ensure food preparation and storage meets national guidance.
- The provider had achieved a level five (highest) rating at their last Food Standards Agency check.

Learning lessons when things go wrong

- Records were maintained of accidents and incidents that took place at the service. Such events were audited by the registered managers. This meant that any patterns or trends would be recognised, addressed and the risk of re-occurrence was reduced.
 - A reflective practice approach was adopted by staff which encouraged discussions when incidents had happened. This enabled the team to learn when things had gone wrong.
 - Records showed actions were taken to help reduce any identified risk in the future. For example, motion sensors connected to the call bell system were in place to alert staff if a person assessed as at risk of falls had got out of bed.

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 our last inspection we found that people received an 'effective' service. At this inspection the service continued to be 'Good'.

Good - People's outcomes were consistently good, and people's feedback confirmed this.

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

- Staff demonstrated thorough knowledge of people's needs. They were able to discuss people's care needs without referring to written care documents.
- A visitor told us that, "[Name] gets exactly what she wants".
- The service has been developed and established links with the Alzheimer's Society.
- Visitors told us that, "They have relatives meetings regularly. They are at 7pm so working people can attend. The last one had a dementia expert giving us a talk. It was excellent, really useful. It was really informative, gave us lots to think about."
- People had their care and support needs assessed before they moved in to the service. Information had been sought from the person, their relatives and / or any professionals involved in their care. Information from the assessment had informed the plan of care. This ensured that the staff were able to meet people's needs.

Staff support: induction, training, skills and experience

- Staff were well trained to make sure they had the skills and knowledge to effectively support people.
- People spoke positively about staff and told us they were skilled. They told us they were confident that staff knew them well and understood how to meet their needs.
- People told us they did not feel they had been subject to any discrimination, for example on the grounds of their gender, race, sexuality or age.
- On starting work at the service new staff were supported to understand their role through a period of induction. This ensured that staff had the knowledge needed to provide personalised care to people. Their progress was reviewed on a frequent basis by the managers. The induction which incorporated the Care Certificate Standards consisted of training and competency checks. The Care Certificate was introduced in April 2015 and is a standardised approach to training for new staff working in health and social care. It sets out learning outcomes, competencies and standards of care that care workers are nationally expected to achieve.
- Following induction all staff entered onto an ongoing programme of training specific to their job role.
- Staff received regular training in subjects that were considered mandatory by the provider and best practice national guidance. Staff received regular training in topics including, first aid, moving and handling and health and safety.

- A member of staff told us that, "There is always a five-minute refresher training as part of the shift handover".
- The service provided training focussed on the needs of the people using the service. For example, specialist training for the management of more complex needs. This ensured that staff were able to effectively care for people with less common conditions that they may not have encountered before.
- A trained nurse told us that they were happy with the training provided and particularly liked that, "They could source their own training."
- Records were kept detailing what training individual staff members had received and when they were due for this to be repeated. The staff training records confirmed that the training was up to date. Staff were positive about the training opportunities available. They told us that they were happy with the level of training provided and felt that it gave them the skills and knowledge needed to provide good care.
- People were supported by staff who had regular support, supervisions (one to one meetings) with their line manager and observed practice which ensured they were competent to work with people and provide the care people needed, safely.
- Staff told us there was sufficient time within the working day to speak with the manager. During our inspection we saw good communication between all staff. Staff told us that they could discuss any issues or concerns at any time and that their input was encouraged and valued.
- A trained nurse told us that, "The managers are excellent, so supportive".
- Staff felt that they were inducted, trained and supervised effectively to perform their duties.

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

- People had enough to eat and drink throughout the day.
- Visitors told us that, "People have access to tea and coffee, some of the more able people help themselves".
- Staff were aware of people's individual preferences and patterns of eating and drinking. People with more complex care needs were supported to eat their meals with staff assistance.
- Staff consulted with people on what type of food they preferred and ensured that food was available to meet peoples' diverse needs.
- The chef told us that they, "Loved being able to spend time with the residents".
- Visitors told us that, "You can have different food if you don't like something, or if you have a favourite," and, "[Name] has a cheese omelette everyday, which is exactly what she wants."
- People told us that, "The food is tasty".
- Staff regularly monitored people's food and drink intake to ensure all residents received sufficient amounts each day. Intake charts were completed and contained information regarding people's target intakes. They also contained reasons to support this to ensure that people had a clear understanding of their necessity.
- People's care plans contained information about their dietary needs and / or any swallowing difficulties they may have.
- People's weight was recorded to monitor whether people maintained a healthy weight. Advice and guidance was sought from appropriate professionals to support people with their dietary needs. This was followed in practice by staff. Referrals were made to speech and language therapists if required. This demonstrated that staff were monitoring people and taking action to ensure that their needs were met.

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

- The managers said the service had good links with external professionals.

- The service worked with a wide range of professionals such as general practitioners, physiotherapists and speech and language therapists to ensure people lived comfortably at the service and their medical needs were met.
- Feedback from a visiting GP included, "They monitor [People] well and keep me updated".
- People experienced very good healthcare outcomes and were supported by staff to access healthcare services as they needed them.

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

- The premises and gardens were exceptionally well maintained and well presented.
- Visitors told us that, "The redecoration / building works are excellent. The home is amazing now."
- People's needs were met by the design of the premises. The building was extensively remodelled and redecorated to cater for people living with dementia and / or with a physical disability. It has wheelchair access throughout.
- The building design made good use of natural daylight and was bright and airy. Good lighting is particularly important for people with dementia as it can help them understand their environment.
- Visitors told us that, "It's an amazing place".
- A relative of a person living with dementia told us that, "[Name] likes to stay here as she thinks it's a lovely hotel. People are not anxious about being here. It doesn't feel like a nursing home."
- Visitors told us that, "People have freedom here, they can move about as they wish".
- A visitor told us that, "This is the best nursing home I know. I used to work at a different one and this is amazing".

Supporting people to live healthier lives, access healthcare services and support

- Daily records were consistently completed for people with any changes to their routines being recorded. These provided evidence that staff had supported people in line with their care plans and enabled staff coming on duty to get a quick overview of any changes in people's needs and their general well-being.
- Staff completed a handover at the start of each shift.
- People had their health monitored to help ensure staff would be quickly aware if there was any decline in people's health which might necessitate a change in how their care was delivered. This helped ensure there was a consistent approach between different staff and this meant that people's needs were consistently met. A visiting GP told us that, "Healthcare checks are carried out efficiently."
- Where staff had concerns about somebody's welfare the service had good links with professionals to ensure any changing needs were reassessed.
- People's health conditions were well managed and staff supported people to access healthcare services.
- Feedback from a visiting GP included, "They manage conditions well, diabetes, falls, dementia etc."
- Staff knew people well and care records contained details of multi professional's visits and care plans were updated when advice and guidance was given.

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 with appropriate legal authority. 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.
- Visitors told us that, "[Name] is so happy here. She doesn't ask to leave. I thought she would. She's only said it twice in a year."
- The registered managers understood when an application to deprive someone of their liberty should be made and appropriate applications had been made.
- All staff we spoke with had a good working knowledge on DoLS and mental capacity.
- Staff had received appropriate training for MCA and DoLS.
- Mental capacity assessments were completed for people and their capacity to make decisions had been assumed by staff unless there was an assessment to show otherwise. There were actions to support decision-making with guidance for staff on maximising the decisions people can make for themselves.
- We observed staff seeking people's agreement before supporting them and then waiting for a response before acting.
- Staff maximised people's decision-making capacity by seeking reassurance that people had understood questions asked of them. They repeated questions if necessary in order to be satisfied that the person understood the choice available.
- During our visit we observed that people made their own decisions and staff respected their choices.
- Visitors told us that, "People are so happy here. They can choose what they do."

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 our last inspection we found that people received a 'caring' service. At this inspection the service continued to be 'Good'.

Good - People were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- The caring ethos of the service was evident. There was a strong, visible person-centred culture. We saw people were treated in a caring way by staff who were committed to delivering high standards.
- Visitors told us that the staff were, "Amazing", "Really caring", "Wonderful" and "Lovely".
- Visitors told us that, "Staff always shake your hand and tell you their name. That sort of thing is really important."
- People received care and support from staff who knew them well.
- Staff were skilled in talking to people and had a good rapport with people. All staff were highly motivated, care and support was exceptionally compassionate and kind.
- People told us that, "I like it here".
- The relationships between staff and people receiving support demonstrated dignity and respect at all times.
- Visitors told us that, "Everyone is really involved, not just the carers. The kitchen staff and housekeeping staff are also involved with the residents".
- Throughout our visit staff interacted with people in a warm and friendly manner.

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

- Staff focused their attention on providing support to people. We observed people smiling, chatting and choosing to spend time with the people at the service.
- People told us that, "The staff are kind and nice".
- Staff knew people's individual abilities and capabilities, which assisted staff to give person centred care.
- Visitors told us that, "Staff are really attentive. They are all kind."
- People's care was not rushed enabling staff to spend quality time with them and encourage them to do things for themselves.
- Staff walked with people and when communicating with them they gave eye contact. They spent time listening to them and responded to them. They explained what they were doing and offered reassurance.
- Staff always made sure people were comfortable and had everything they needed. A staff member spent time with a person adjusting the foot rests on their wheelchair as they wanted to make sure that it was, "Just right." Once they had ensured the persons comfort they offered them a hot drink and biscuits.

Respecting and promoting people's privacy, dignity and independence

- Staff chatted with people who appeared to enjoy their company. Staff said that they believed that all staff were caring and were able to meet the needs of people. The overall impression was of a warm, friendly, safe and lively environment where people were happy.
- Visitors told us that, "Everyone is so kind. The food is fantastic. [Name's] very happy here".
- Staff described how they maintained people's privacy and dignity by knocking on doors, waiting to be invited in. We observed staff making sure people's privacy and dignity needs were understood and always respected.
- Staff knew what people could do for themselves and areas where support was needed. Relationships between people and staff were warm, friendly and sincere.
- Visitors told us that their relatives were, "Respected" and that staff were, "Kind", "Helpful" and "Caring".
- Staff recognised the importance of upholding a person's right to equality, recognised diversity, and protected people's human rights. Care planning documentation used by the service helped staff to capture information. This was to ensure the person received the appropriate help and support they needed, to lead a fulfilling life and meet their individual and cultural needs. For example, respecting people's disability, gender, identity, race and religion.
- A visitor told us, "[Name] views are a bit different, out of the ordinary. Staff are fine with it. They haven't judged, they aren't bothered."
- Staff received training on equality and diversity. This helped ensure that staff were aware of their responsibilities in how to protect people from any type of discrimination.
- People told us that, "They [staff] take time to listen".

Is the service responsive?

Our findings

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

At our last inspection we found that people received a 'responsive' service. At this inspection the service continued to be 'Good'.

Good - People's needs were met through good organisation and delivery.

End of life care and support

- The registered managers and staff displayed an exceptionally compassionate and empathetic approach towards people and those important to them at the end of their lives.
- Visitors told us that, "I know my Mum's [end of life] wishes and they are happy to follow them. I was here all day yesterday. They are always checking on me as well as mum. They bring me food and tea and coffee. They look after us all, relatives and residents. I feel really cared for."
- People's wishes for their end of life care were recorded, including whether it was in their best interests to be resuscitated or not. This meant that people could die with dignity.
- Staff knew which people had DNACPRs so that people's wishes were known and respected.
- Visitors told us that, "Mum is on end of life care. I have had a couple of phone calls to check that I am happy with the care and care plan. I am well informed, they always tell me what is going on."
- The service received exceptionally positive feedback from relatives of people who they had supported at the end stages of their lives.
- A visitor told us that their relative, "Had a great life and more importantly a great death."
- Visitors told us that, "I could stay over when dad was dying. They really cared for me".

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- The provider was following the Accessible Information Standard (AI). The Accessible Information Standard is a framework put in place in August 2016 making it a legal requirement for all providers to ensure people with a disability or sensory loss are given information they can understand, and the communication support they need. The registered managers were fully aware of their responsibilities under the AI standard.
- People's assessments included specific details of their communication needs, this included information regarding personal space and the appropriate distance from people when communicating with them. Conversation with staff demonstrated that they were aware of people's individual communication needs and our observations showed that these were put into practice.
- Technology was used to support people's independence. The registered managers described how people were supported to use mobile technology to watch programmes using tablet computers in the communal areas of the home. People could access films stored on a server using the tablet devices provided by the home or using the internet enabled televisions in their bedrooms. People were also able to access streaming services to access media.

- The service had embraced the use of technology to enhance people's quality of life. Background music or radio was available in all areas of the service. Different areas of the service could be controlled individually in order to meet people's individual preferences.
- The service had been fitted with an infra-red sensor wristband system. This is connected to the main call bell system and alerts the staff if a person wearing a wristband is in close proximity of an external door. This system allowed people prone to walking around more freedom and independence whilst maintaining their safety.
- People were provided with a cordless call bell system that they could take with them and request assistance as they moved around the service.
- People received an exceptionally personalised service that was very responsive to their individual needs. Staff worked with dedication and passion to respond to each person and family's personal situations and often went above and beyond to achieve this.
- There was a thorough approach to planning and coordinating people's move to the services. The transition between services took in to account people's individual needs. The registered managers explained the admission process and how a thorough assessment was completed. This included staff visiting the persons previous home to get to know their needs.
- People received care and support that was responsive to their needs because staff had a good knowledge of the people who lived at the service. Staff were able to tell us detailed information about people's current needs as well as their backgrounds. Staff were able to talk about people's likes, dislikes and people important to them without referring to the care plan documentation.
- Visitors told us that, "It's brilliant, the care is responsive. It's great, I'm really impressed".
- People's care and support needs were always placed at the heart of the service.
- Staff were observed being responsive to people's needs and assisting people. Each person had a key worker and staff knew how each person wanted their care to be provided. People were seen being treated as individuals and received care relevant to their needs.
- Peoples care plans contained details of their goals, aspirations and had individual wish lists. We saw clear evidence that goals were achieved. For example, one person's goal was to go to KFC. We saw photos of their visit which demonstrated they had achieved their goal.
- People were engaged and occupied during our visit.
- We saw that people interacted with each other and staff. Staff told us that they liked the people's company.
- Visitors told us that, "They have such attention to detail. Nothing is too much trouble. Only have to suggest something and it's done, they put a bird feeder outside the bedroom window".
- People had a range of activities they could be involved in to allow them to lead as full a life as possible.
- Visitors told us that, "They constantly try to change things [activities] based on people's preferences".
- People were supported to maintain relationships with people that mattered to them and to avoid social isolation. This was based on staff understanding who was important to the person and their cultural background.
- Visitors told us that, "We can visit whenever we like. It's the best place we've seen, it's not like a nursing home. They always offer us tea and coffee."
- Visitors told us that, "We don't feel we get in the way. The relatives are really part of it. We're included."
- A staff member told us, "It's like a big family here. Our children can come and visit and join some of the evening activities", "It's nice for the residents to socialise with younger people", and, "We are really good friends with the relatives, they are like my extended family".

Improving care quality in response to complaints or concerns

- The service had a complaints policy and a complaints log was in place for receiving and handling concerns.
- Staff told us that if there was a concern it would be investigated quickly.
- People told us they were happy with the service.
- Visitors told us that, "They look after [Name] very well. I have no complaints".
- People told us that were confident that any issues raised would be addressed by the registered managers.
- Staff told us that if there was a concern it would be investigated quickly.

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 our last inspection we found that people received a 'well-led' service. At this inspection the service continued to be 'Good'.

Good - The service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- The service had a positive culture that was open and friendly. Staff at all levels were approachable and keen to talk about their work.
- There was a management structure in the service which provided clear lines of responsibility and accountability.
- A senior member of staff told us that they, "Valued the teamwork".
- The registered managers continuously went above and beyond in their roles to make a real difference to people's lives. They ensured they maintained their knowledge and skills in their roles and were aware of their legal responsibilities.
- People knew who the registered managers were and held them in high regard. The registered managers told us that they regularly spent time with people to make sure they were receiving care in line with their wishes and individual preferences.
- Records confirmed that senior staff discussed staff practices within supervision and at staff meetings.
- We observed people approaching the registered managers and vice versa. It was apparent that people felt relaxed in the managers company and that they were used to spending time with them. The registered manager knew people and their needs extremely well.
- A visitor told us that, "One thing that I particularly like is that it's all inclusive. The staff quite often join the residents for meals. It's very sociable."
- People appeared at ease with staff and staff told us they enjoyed working at the service. Staff demonstrated a strong level of commitment and dedication to the service.
- All staff were positive about the inspection process, valued the feedback given and saw it as an opportunity to develop the service.
- People were very positive about the service they received and they said they would recommend the service to others.
- A visitor told us, "I have recommended it. It's perfect for someone with dementia".
- People's care records were kept securely and confidentially, in line with the legal requirements.

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

regulatory requirements

- The registered managers understood their responsibilities to raise concerns, record safety incidents, concerns and near misses, and report these internally and externally as necessary. They were fully aware of their responsibilities under the legislation and ensured that all significant events were notified to the Care Quality Commission. We use this information to monitor the service and ensure they responded appropriately to keep people safe.
- Staff told us if they had concerns management would listen and take suitable action. The registered managers said if they had concerns about people's welfare they liaised with external professionals as necessary and had submitted safeguarding referrals when they felt it was appropriate.
- The registered managers had effective oversight of the service. They were able to provide in-depth information regarding the service without referring to documentation. This demonstrated a thorough knowledge and understanding of the service.
- Without exception, people and visitors spoke very highly of the management and staff at the service.
- Visitors told us that, "Everything is excellent".

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

- The registered managers had an 'open door' approach. Staff came to the office unannounced and the registered managers ensured they were available to listen to any staff concerns and to provide solutions to address these.
- There were consistently high levels of constructive engagement with people and staff.
- Visitors told us that, "They strive to improve," "They want to be the best" and "They are focused on customer care".
- A visitor told us that, "They want to be the best and I think they are, in my experience".
- Everyone spoke highly of the service and felt that it was extremely well-led. People received a consistently outstanding standard of care, because the ethos of the service was to put people first. People's comments were overwhelmingly positive.
- People told us that, "It's a well-oiled machine".
- People were encouraged to contribute to improve the service. People had opportunities to feedback their views about the service and quality of the care they received. This was done during structured care plan reviews, surveys and meetings.
- All relatives described the management of the service as open and approachable. There were regular meetings, which meant they could share their views about the running of the service.
- Visitors told us that, "They are trying to develop and improve".
- The registered managers looked at ways to improve the service through involving all stakeholders in the service.
- Staff were highly motivated. Staff said that everybody had the opportunity to have their views heard and taken into account, they were encouraged to make suggestions to improve the service. Staff meeting minutes demonstrated that changes in good practice guidance and legislation were discussed to ensure that staffs knowledge was up to date.

Continuous learning and improving care

- There was a clear governance framework, which was completed regularly. The auditing system followed the CQC's key lines of enquiry. Any action required was clearly recognised, timescales were identified and progress monitored until compete.

- Quality assurance systems monitored the quality of service being delivered and the running of the service, for example audits of paperwork and unannounced night time visits were conducted. All identified areas for improvement were clearly documented and followed up to ensure they were completed. This demonstrated a commitment to continual development. The registered managers provided regular feedback to the provider in order to ensure operational goals were being achieved.
- Visitors told us that, "They always check we are happy with the care. They phone to check. They encourage us to say if anything needs improving. Also, the owner wants us to speak up."
- Accident and incident forms were completed. These were checked by senior staff who analysed them for trends and patterns. Regular safety checks were carried out including those for the fire alarms, fire extinguishers and portable electric appliances.
- Staff told us that any faults in equipment were rectified promptly.

Working in partnership with others

- The registered managers worked well in partnership with external health and social care professionals to improve outcomes for people.
- A visiting professional told us that the staff team asked for, listened to and acted on advice and that, "They are well organised and maintain good records."
- Feedback from a health and social care professional included, "It's the best care home that I deal with."
- The registered managers said relationships with other agencies were positive. Where appropriate the registered managers ensured suitable information, for example about safeguarding matters, was shared with relevant agencies. This ensured people's needs were met in line with best practice.