

## Elizabeth Finn Homes Limited

# Grove Court

### Inspection report

Beech Way  
Woodbridge  
Suffolk  
IP12 4BW

Tel: 01394446500  
Website: [www.efhl.co.uk](http://www.efhl.co.uk)

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### Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

# Summary of findings

## Overall summary

### About the service

Grove Court is a residential care home providing personal and nursing care to up to 60 people aged 65 and over. At the time of the inspection there were 57 people, some were living with dementia. It is a purpose-built care home consisting of three separate wings, each of which has separate adapted facilities.

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

People received care that was extremely personalised and responsive to their specific needs and preferences. Significant emphasis was placed on providing meaningful activities which promoted people's physical and emotional wellbeing and enriched their lives.

Feedback was overwhelmingly positive from people, relatives, visitors and professionals about the extremely compassionate and caring approach of staff who regularly went above and beyond to care for them.

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.

People were consistently consulted on all aspects of their care and treated with dignity and respect in a way that truly valued them as individuals. When the time came staff respected people's wishes and provided them with exceptional, holistic, dignified, end of life care.

The leadership of the service was exceptional. The registered manager, supported by their senior management team, had established a person-centered culture amongst the staff team, that consistently delivered high quality care. Staff were extremely motivated and passionate about their role and clear on their responsibilities. Robust quality assurance systems had sustained continual development and improvement in the home leading to positive outcomes for people.

Staff were well-informed about people's risks and how to care for them safely. Staff received training in safeguarding adults from harm and had a positive attitude to reporting concerns. The management team regularly reviewed staffing arrangements to ensure there were enough staff with the right skills and experience to care and support people. People's medicines were managed safely. The home was visibly clean throughout.

People, relatives and staff contributed to the development of ongoing care arrangements and the wider issues within the home. Their feedback was valued and acted on by the management team. People, relatives and visitors expressed confidence that they could raise issues or concerns with any member of staff or the management team and that these would be addressed.

Grove Court continued to be an active presence within the local community. Strong community links had been maintained with different community groups regularly visiting and people accessing the local area.

Since our last inspection, under the leadership of the registered manager the home has gone from strength to strength making positive changes that demonstrate the characteristics of an outstanding service.

#### Rating at last inspection

The last rating for this service was Good (published 09 December 2016).

#### 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](http://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 exceptionally well-led.

Details are in our well-Led findings below.

Outstanding ☆

# Grove Court

## Detailed findings

### Background to this inspection

#### The inspection

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

#### Inspection team

The inspection was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

#### Service and service type

Grove Court 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 reviewed information we had received about the home since the last inspection. We sought feedback from the local authority and professionals who work with the home. 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 us support our inspections. We used all this information to plan our inspection.

#### During the inspection

We observed the care and support provided and the interaction between people and staff throughout our

inspection. We spoke with nine people who used the service, seven relatives and one visitor about their experience of the care provided. We spoke with the registered manager, deputy manager and ten members of staff, from the nursing, care, admin and domestic teams.

We reviewed a range of records. This included five people's care records and multiple medication records. We looked at staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including audits, policies and systems were reviewed.

After the inspection

We received electronic feedback from three relatives about the care provided and two members of staff about their experience of working at the home.

# 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 good rating. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse; and assessing risk, safety monitoring and management

- Staff understood their roles and responsibilities in keeping people safe. They continued to be trained and supported to meet people's needs.
- The service raised safeguarding concerns appropriately when they were worried about people's safety.
- Effective policies and procedures in relation to safeguarding and whistleblowing were in place and staff had received training based upon these.
- People told us that they felt safe and secure living in the home. One person said, "I totally feel safe. The building is custom made, there are always enough staff on duty and the home is well maintained." One person's relative commented, "Staff are vigilant and attentive to risks that could befall people without restricting them. They know the [people] well and encourage positive risk taking; people make choices with risks fully considered and managed well." A visitor to the home said, "All three people I visit regularly feel quite safe here I'm sure. The staff definitely listen to people here."
- People's care records included comprehensive risk assessments which guided staff about how the risks in people's lives were reduced. This included risks associated with pressure ulcers, falls, choking, moving and handling and nutrition.
- Nursing staff had good knowledge of the preventative actions to take and how to effectively manage wounds.
- All identified environmental risks had an associated risk assessment in place which guided staff how to mitigate risks within the service.

Staffing and recruitment

- The registered manager reviewed the staffing levels, in a systematic way, to ensure that there were enough staff with the right skills and experience to meet the individual needs of the people who lived in the home.
- People told us that their requests for assistance, including when they used their call bell, were responded to promptly. One person said, "There is always somebody close to hand should you need them. I used my bell once for an emergency and they were ever so quick to come." A visitor to the service said, "Everyone has a call bell which they ring, and the staff come to help."
- The provider continued to have effective systems in place to check that the staff were of good character and were suitable to care for the people who lived in the home. Staff employed at the home told us they had relevant pre-employment checks before they commenced work to check their suitability to work with people. Records we looked at confirmed this.

Using medicines safely

- People and their relatives told us they received their medicines safely and on time. One person said, "The staff have a good routine. I always have my tablets before my breakfast." A relative commented, "They [staff] take care of all the medication which is a god send really as there is a lot to remember and it was becoming too much for [family member] to stay on top of. They make sure nothing is missed and reorder it all when needed."
- People continued to receive their medicines as prescribed with clear records kept.
- Medicines were stored securely in an organised way to help reduce the risk of errors. Systems were in place to ensure the prompt ordering and disposal of medicines.
- Staff received training in medicines management and had their competency regularly assessed.
- The management team undertook checks and audits of the medicines system to ensure it continued to be managed in a safe way.

#### Preventing and controlling infection

- People and relatives were complimentary about the cleanliness of the home. One person said, "It's very clean. They [staff] clean my bathroom every day and do a deep clean regularly." One person's relative said, "It's all very good. I've been coming here for some time to visit my [family member] and you never get any smells; everywhere is clean."
- Staff continued to be trained effectively in infection prevention and control. They had access to personal protective equipment such as disposable gloves and aprons to reduce the risks of cross contamination.

#### Learning lessons when things go wrong

- Details of accidents and incidents were logged, recorded with appropriate actions taken to reduce the risk of re-occurrence.
- There was a culture of continuous learning when things went wrong. The registered manager carried out regular reviews of accidents and incidents in the home as well 'niggles', complaints and concerns to identify if there were any trends or patterns with actions taken to mitigate risk.

# 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 good rating. This meant people's outcomes were consistently good, and people's feedback confirmed this.

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

- Prior to people moving into the home, a comprehensive needs assessment in line with best practice was undertaken by a member of the management team. This was done in consultation with people, their representatives and any appropriate health and social care professionals. This assessment was used to determine if the home could meet the person's individual needs and to inform their care plan.
- People, relatives and staff said people experienced positive outcomes using the service and this was confirmed when we reviewed people's care records.
- Staff continued to work with external bodies and professionals where needs had been identified, to manage risks in line with recognised best practice. This included making appropriate referrals and acting on the advice provided from the falls team and speech and language therapists.

Staff support: induction, training, skills and experience

- People and relatives told us that staff had the skills and knowledge to support them. One person's relative said, "The staff are very good. They [management team] don't let the new staff do anything until they have shadowed other staff and they go on to be supervised when they start working with people."
- Staff gave positive feedback on the support in place when starting to work at Grove Court. They told us about the induction process, including shadowing experienced staff members to aid familiarity with people's support needs.
- Nurses were supported with revalidation by senior staff and had access to relevant clinical skills training. This included diabetes care, tissue viability, venepuncture and wound management.
- The management team had a rolling supervision and performance-based appraisal programme in place. Staff shared with us examples of training opportunities they had accessed in relation to their own development goals. A member of staff said, "We are encouraged by management to professionally develop and learn. I am doing [recognised qualification]. It's been interesting, and I've learnt so much already. I wasn't sure at first if I could do it but [registered manager] supported me and I am glad I did as it's boosted my confidence and knowledge no end."

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

- People enjoyed a positive meal time experience and continued to be supported to have enough to eat and drink and to maintain a balanced diet. Where required staff worked with healthcare professionals to ensure people's specific nutritional needs were fully assessed and met. One person's relative said, "[Family member] been having some difficulty swallowing so changes have been made to their diet. The food now comes [fork mashable] it is softer and easier for them to manage. It still looks appetising."

- People and relatives made positive comments about the quality of the food provided. One person said, "The cooking is very good." Another person told us, "We have so much choice. There's usually something I like. I enjoy the fruit starter and the sweet trolley is amazing."

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

- People continued to be supported to maintain good health. They had regular access to relevant healthcare professionals and records documented who had visited and any action taken. One person said, "The staff get the doctor or the nurse if needed. I get my feet done every few weeks too." Another person commented that a member of staff had, "Made an appointment for me this morning to see the GP as I'm still getting quite a lot of pain in my new hip." They explained how they were due to go home in a couple of days following their respite stay but had been concerned how they would manage. They described how the member of staff was taking them to their appointment and said, "This is great as I'm going home on Friday and seeing a GP will give me peace of mind and practically will make things easier."

- Established systems were in place to share information between services as required. For example, people had a 'hospital passport' in place which included important information about them should they be taken to hospital in an emergency.

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

- The design and layout of the home and garden was accessible and appropriate to meet people's needs. There were communal areas, such as lounges, dining rooms and other spaces throughout the home, where people could meet with their friends and family, in private if required.
- People and relatives were very complimentary of the environment. One person said, "I have an electric wheelchair to get about independently and can navigate the corridors which are kept clear and can go into the garden easily. I like this room as I love trees and can see so many from here." A relative commented, "The building is really nice; perfect for moving around in wheelchairs and using walking frames."

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

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

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- We saw that staff consistently asked for people's consent before providing any care or support. For example, obtaining people's permission before supporting them with their medicines and when safely mobilising people. A relative told us, "The staff always ask people if they want anything doing or want a drink. I hear it all the time I'm here. People certainly have a voice."
- Staff had received training in the MCA and DoLS and understood their responsibilities in these areas.
- Where people were unable to make a decision for themselves their care records included a mental

capacity assessment and/or best interests' decision. This included the person as much as possible in making their own choices with involvement of their family and appropriate professionals where required.

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

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

- People spoke highly about the care they received from Grove Court. One person commented, "I've been here for years. I do feel valued, yes, I do. The staff all listen to me and I can talk to them easily." Another person said, "The staff are jolly good and kind. About six years ago I mis-judged what I was doing and fell over in the bathroom and broke my ankle, A member of staff sat with me and stroked my hand for almost two hours until the ambulance arrived. They [staff] are so kind and caring. If you watch, the staff will often put a gentle hand on people's backs which I think shows how much they care." We saw throughout our inspection that staff used appropriate touch to reassure and comfort people.
- Relatives and visitors were equally complimentary about the staff approach. Comments included, "Friendly and professional, thoughtful and compassionate, go above and beyond" and "I haven't come across any [staff] that are not kind and caring." One relative told us, "I would 100% recommend this place. All care homes should be like this; detailed care, carers speak to people with respect. The kindness here stands out."
- Positive, caring and enabling relationships with people and staff had been fully established in the home. The registered manager supported by their management team and staff held people in the highest regard; consistently addressing them with affection and warmth in their interactions. Emphasis was placed on building relationships of trust and friendships with people to keep them safe and to fully support them in line with their wishes, whilst promoting dignity and respect throughout.
- Staff knew people well and adapted their communication and approach to meet the individual needs of each person.

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

- People and their relatives where appropriate, told us that they were involved in their care arrangements. One person said, "They [staff] are all easy to talk to. I feel my choices are respected and acted on. I am included in all aspects of my care and any decisions are talked through. We had a meeting the other day with my [family member] and they [staff] are going to speak to the GP to follow up on some questions my family had." A visitor said, "The staff listen to people and they [people] can discuss most things with the staff."
- The content of people's care records demonstrated that people had been included in their development.
- Staff spoke to us in detail about people's life histories, their care and support preferences and how they encouraged people to make decisions about their care. One member of staff said, "Name of person] may not be able to get up out of bed and move around so much now and is becoming more and more dependent on us [staff] for all their care needs but we can still offer them choices. Help them choose what they want to

wear, eat, what they want to do. It is so important to give them as much control in their life as possible."

Respecting and promoting people's privacy, dignity and independence

- People told us the staff consistently respected their privacy and dignity. One person said, "They [staff] treat me with huge respect. I've been treated so well." Another person commented, "I didn't think I'd have to talk about such personal things like my water-works, but they're [staff] very understanding." A third person shared with us, "The staff encourage me to do what I can, and privacy is not an issue. The door always gets knocked and I am left to relax in my room as I choose to be." A relative commented, "[People] are treated as grown-ups by the staff, they are never patronised and always treated with the utmost respect."
- Staff were observed knocking on people's bedroom doors before entering and were discreet when asking people if they wished to use the toilet or adjusting their clothing to maintain their dignity.
- Staff consistently encouraged and supported people to be as independent as possible. One person said, "I feel very much in control. I choose what I do and look after myself mostly, with a little help." Another person commented, "I'm looked after how I want to be. I try to do things for myself when I can. If I want to change anything the staff check with the nurse to make sure it'll be okay."
- People's care records contained clear guidance for staff on methods of communication and interaction for people with sensory impairments. The guidance emphasised the need to support people to maintain their independence and levels of involvement in the care provided and decision-making process.

## 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.

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

- People described being highly valued and receiving exceptional care that was personalised and tailored to meet their individual needs and wishes. One person told us, "I want for nothing here. The staff all understand my condition and help me to keep on top of things. They know some days are better than others. They encourage and help me to stay well, are alert to changes and instinctively know when I need that little bit more help or when to call the doctor. It is all done with the utmost consideration, kindness and respect. I would hate to feel a burden and they have never made me feel that way; nothing is ever too much trouble. They treat people properly which goes a long way to making you feel good about yourself."
- Relatives shared their positive experiences with us, a relative said "It is a wonderful place, [family member's] needs are completely met. Our family can't speak highly enough of this place. We feel very involved, included in all decisions. The communication and perseverance from staff and management to try to connect with each person is excellent. We have seen [family member] come on leaps and bounds since moving into Grove Court." They explained how the staff had patiently encouraged the person to participate in a range of activities, trying different things to motivate and stimulate them. This had resulted in new friendships with people who shared similar interests and had reduced the risk of loneliness and isolation. They added, "You can see [family member] has their sparkle back, will now come out of their bedroom. When we visit they are full of all the things going on in the home; the social gatherings, the entertainment, lunch time with friends, things they look forward too. [Family member] has a renewed confidence to try new things and as they are up and about more their [mobility] is much better." Another relative described how their family member frequently helped staff with small jobs around the home which gave them a sense of purpose and belonging. They added, "[Family member] has worked their whole life, raised a family and to suddenly stop doing things was very difficult for them. The staff totally get this and come up with small jobs that [family member] can do but isn't patronising."
- Staff had detailed knowledge of people's needs and preferences and how they wished to be supported. This information was used to care for people in a way that valued them as unique individuals, gave them choice and control in their life and respected them for who they were. Staff shared with us how important it was they spent time with people when they first moved into the home to help them to adjust and to build trust.
- People's needs were regularly reviewed to ensure they remained up to date. When people's needs, and preferences changed their comprehensive care plans were reviewed and updated accordingly.
- Significant emphasis was placed on providing meaningful group and individual activities which promoted people's physical and emotional wellbeing. There was a weekly program of activities that was based on people's interests and preferences. This information was visibly displayed throughout the home and

provided to people in suitable formats such as large print.

- The activities coordinator regularly reviewed and sought feedback from people on how each activity or social event had gone, taking on board suggestions for things people wanted to do in the future. Examples, of popular activities and events included: gardening club, reflexology, the care homes choir, vintage car show and Suffolk Day celebrations.
- There was a shared ownership and commitment across the staff team to ensure people had a sense of purpose and belonging through engagement and interaction, with a willingness to try different things to connect with people. This included setting up a 'Gentleman's club' by a male member of staff for a group of men who previously hadn't engaged in the existing activities, and now came together in the home to socialise. For another person who wanted to buy a pair of slippers but felt unable to leave the home due to their visual impairment and lack of confidence, it was supporting them to go shopping safely. This involved a member of staff the person trusted acting as a critical friend. The positive impact for this person was that were enabled to relive the shopping experience an activity they had previously enjoyed, maintain their independence, improve their confidence and feel assured in what they had bought.
- Staff ensured people who were cared for in bed had the same opportunities for occupation and activities as everyone else. One relative said, "Staff regularly take the time to sit and chat, read the paper, pamper [family member]. They spend quality time, it's not rushed, and the manager is always popping by for a chat."
- People (and or their relatives) shared life histories which were incorporated into people's comprehensive care records. This enabled staff to tailor the care, support and activities to individual personalities and get to know them.

#### End of life care and support

- When people were nearing the end of their lives, they and their families were treated with kindness, compassion, dignity and respect. Staff provided people with exceptional, holistic, person-centered, end of life care. We saw a range of thank you cards and letters from relatives expressing their appreciation and thanks for everything the staff and management team had done to support and help them through sensitive times.
- One relative told us, "The staff led by the manager have been amazing. So thoughtful and considerate in helping us to get everything in place just how [family member] wants it. It's been so difficult to take it all in, but they have taken the pressure off, we are not constantly worrying about things and rushing around. We can concentrate and just enjoy the time we have left with [family member]. They have given us quality time with [family member], you can't put a price on that type of kindness and understanding." Another relative shared with us how the registered manager was supporting them in understanding the palliative care arrangements for their family member. They said, "The manager is very good at explaining everything that's involved, giving us their time, so we can ask questions and try and be prepared."
- A third relative shared with us how the registered manager had been proactive in obtaining advice from the local hospice and relevant healthcare professionals to facilitate their family member's wish to be able to access the home's garden. They said, "[Family member] has been stuck in their bedroom since they moved in six weeks ago due to their complex mobility issues. [Registered manager] was instrumental in getting a bespoke fitted wheelchair so [family member] could see the home and garden for the first time. Yesterday, they [staff] took her on a tour of the home and the garden and she didn't stop smiling."
- People continued to be involved in making advanced decisions and developing any end of life plans if they wanted to. If people did not wish to discuss this their wishes were respected and documented.
- The home had achieved re-accreditation at Platinum level in the Gold Standard Framework (GSF). The GSF is a nationally recognised palliative care training programme for care homes in the UK. The home had fully embedded advance care planning with staff who were confident in caring for people towards the end of their life. In addition, the management team had developed support materials to help families cope with their bereavement.

Improving care quality in response to complaints or concerns

- There was a complaints policy and procedure in place. Complaints and concerns were fully investigated and monitored by the management team via an electronic system.
- In response to people's feedback and as part of continual improvement, Grove Court had become a mixed nursing and residential home, instead of having separate nursing and residential wings. This was to enable people to remain in their current bedrooms and not be relocated even if their medical needs changed. People had expressed concern and distress in having to move bedrooms which they classed as their personal space, when their needs changed and had been reluctant to move. This positive change was welcomed by people and relatives. One relative said, "This is truly a home for life."
- People and relatives told us they did not have any issues or complaints but that they would not hesitate to raise anything with the registered manager and staff. They were all very confident that any concerns or complaints would be fully addressed.

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.

- Accessible communication standards were in place, including provision of information in pictorial format, audio books, tapes and large print. The registered manager advised information could be produced in different languages and formats if required. For example, the activity programme was printed in large print. They shared with us how two staff members whose first language is Welsh support and reassure one person in the home who is Welsh to be able to effectively communicate their needs.

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

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

- Grove Court was led by an exceptionally motivated and dynamic registered manager who in turn was supported by an effective senior management team. Collectively they shared a commitment to providing high quality care that puts people first, resulting in an enabling culture within the home whilst delivering positive outcomes for people. One person said, "If you have to be in a home, you can't do much better than here."
- People and relatives were extremely complimentary about the atmosphere in the home and frequently described a service that went above and beyond their expectations and one which they could depend on. One person commented, "The manager was a nurse and is terribly efficient. I think the home is managed really well." A relative said, "It is an exceptionally well-run home, all the staff know what they are doing and are unbelievably approachable, I would totally recommend it." Another relative commented, "I am incredibly pleased with Grove Court. In fact, the highest praise I could give it is that eventually I would be perfectly happy to move in there myself!"
- Staff across all the different departments in the home were fully committed to the person-centred ethos promoted by the provider and registered manager, spending quality time interacting with people. Staff were visibly proud to work in the home, they were passionate and motivated to providing a high standard of care to people. A member of staff commented, "There's a real desire amongst the staff whatever your role to want to do better, achieve more for the [people] and we work together to achieve this."
- Grove Court was an established part of the Woodbridge community, recognising the importance of enabling people to maintain their local links, as well as taking the opportunity to raise awareness of dementia and issues affecting older people. People were members of the joint care homes choir which had involved visits to other care homes culminating in a public concert. This had provided people with a sense of achievement and accomplishment following the live performance and plans were underway to repeat the positive experience on a bigger scale. Regular social events took place which invited the local community to the home. These were well attended and included Suffolk Day celebrations, Christmas Lunches and a fire work night.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; and how the provider understands and acts on their duty of candour responsibility, which is their legal responsibility to be open and honest with people when something goes wrong.

- An established staff structure and effective communication systems were in place. One person said, "It is a

wonderful place. Very well organised, dependable staff; they seldom leave, which is what you need. Too many changes and its unsettling. I most definitely recommend it here." A relative said, "Roles and responsibilities are well defined. Excellent leadership. All the staff know who to contact when needed and take the time to talk to you and update you on what's going on or to provide reassurance."

- Staff shared numerous examples of feeling valued and listened to by the senior management team. One staff member said, "I feel appreciated and I feel I have developed and continue to develop in my role." Another member of staff said, "There is a real can-do attitude and team approach. We are encouraged to share ideas and to contribute with the running of the home, it's very supportive. The heads of department or [a representative from their team] meet with [registered manager] every morning to give updates about their areas. All the staff on shift feed into this process before-hand, telling their managers key information and this gets shared at the meeting and cascaded afterwards. This helps the different staff teams know what's going on in the home, so we can adapt, and problem solve where needed to support one another."
- The registered manager fully supported and encouraged all staff to professionally develop within the home and the provider's organisation. They had introduced champions roles to further enhance the consistency and quality of care people received. Nurses and care staff attended training in specific areas and were responsible for sharing best practice, monitoring and supporting their colleagues in these areas. Champion roles included, dignity, nutrition and well-being and these areas factored into the day to day running of the home contributing towards positive outcomes for people. For example, the dignity champions promoted awareness and understanding raising the profile of the stigma older people may experience through age, disability and status. Alongside information in the home they advocated for people to have the right to respect, dignity and privacy, irrespective of age, disabilities or social standing. They acted as a point of contact and support for people, relatives and staff to discuss, challenge and resolve dignity related issues.
- The registered manager championed a positive risk-taking approach to safely managing people's identified risks whilst supporting their independence and respecting their wishes.
- Effective and robust quality assurance systems had been embedded to monitor and continually develop the home in line with legal requirements and best practice.
- There was an open and transparent culture in the home that enabled learning from events and supported reflective practice. This was in line with the provider's duty of candour procedures. Root analysis of incidents were integral to the review and evaluation processes carried out by management team and underpinned the continual development of the home.

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

- People and their relatives were given numerous opportunities to share their experiences of Grove Court and to make suggestions on how the home could further develop. For example, frequent quality surveys. Responses received were overwhelmingly positive with feedback acted on. Regular 'resident and relatives' meetings were held. These were well attended and demonstrated that people influenced what happened in their home.
- Feedback was actively encouraged with people, relatives and visitors to the home invited to share their views on an independent care home review website. At the time of the inspection Grove Court had been rated 9.8 out of a score 10. There were 19 complimentary reviews which included, "Excellent care and extremely caring staff." One relative commented, "I cannot speak too highly of the considerate, kind and professional attention that my mother has enjoyed during her time at Grove Court. All of the team from the general manager to all of the nursing, catering, cleaning and facilities staff have demonstrated kindness and courtesy and shown respect for my mother's dignity as well as her medical and personal needs."
- The registered manager had implemented several wellbeing initiatives to establish a culture of self-care

amongst their workforce. This included engaging with local NHS services to visit the home and carry out healthcare checks for interested staff, providing advice on stopping smoking and positive life style changes. A wellbeing board had been introduced which signposted staff to services available to support them if affected by issues such as bereavement, abuse or debt. In addition, staff meetings, supervisions and newsletters included a section on wellbeing to encourage and promote discussion in this area.

- The provider had introduced a staff recognition scheme: 'Grove Court Stars' in acknowledgement of the staff who demonstrated outstanding practice. This had contributed towards staff feeling valued and appreciated in their role. The scheme was used by management to recognise the hard work and commitment of staff and show their appreciation. People who lived in the home were able to identify those staff recognised for their performance by the gold star badge they wore.

Continuous learning and improving care; and working in partnership with others

- As part of continual development and investment in the home the senior management team implemented new IT systems to support effective care planning and electronic medication administration. Consideration had been given to supporting staff during the six month transition period with extra training and assistance provided.

- The registered manager and senior management team worked in partnership with various organisations and professionals, including the local authority, district nurses, GP services, local hospice and mental health services to ensure they were providing a high-quality service. Feedback from professionals involved with the home was complimentary and cited positive and effective working arrangements. One professional commented, "All the staff and management work cooperatively with us and there is strong two-way communication."

- The registered manager was active in the local community championing the rights of the older people and the issues they faced, through attendance at educational events with the local Probus group, Women's Institute, schools and colleges. They had worked closely with BBC Radio Suffolk, commissioners, Healthwatch and Suffolk Carers on various projects to improve outcomes for people and were also the chair of the Residential and Nursing Care Home (R.A.N.C.H) group, working collaboratively at strategic and operational level with other stakeholders in Suffolk, to build a sustainable and resilient residential and nursing care home market.