

Housing 21

Housing 21 – Cambrian Green Court

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

About the service

Housing and Care 21- Cambrian Green Court is an extra care housing scheme for older people, comprising of 60 individual flats in one large building. The CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided. At the time of our inspection, the service supported 35 people with personal care.

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

People received exceptional, person-centred care from the onset. Their wishes were understood and close relationships between people, staff and families had developed. Family members told us the care their relatives received was exceptional and had far exceeded their expectations.

There was a high quality, bespoke and flexible approach towards people's changing needs and preferences. The service was responsive to people's needs and was able to accommodate sudden changes in people's needs. People were empowered to achieve their goals. Activities and social groups had been arranged by the registered manager and staff which was promoted to prevent social isolation.

People received a high level of individualised care and were supported by staff that were kind, caring and compassionate. Staff valued people as individuals and had formed supportive relationships with people. Staff knew how people preferred their care and support to be provided. People were placed at the centre of the service and were consulted on every level. Respect for privacy and dignity was at the heart of culture and values of the service.

The registered manager led by example and used all opportunities to drive continuous improvement at the service. People were very much at the heart of the service. People, staff, relatives were fully involved in developing the service to ensure high quality care. They felt their views were important and opinions acted upon. People and staff spoke highly about the registered manager and felt the service was managed exceptionally well. Staff were motivated and spoke with pride about working at the service.

People had their risks assessed and planned for to help keep them safe. Staff understood their safeguarding responsibilities and knew how to keep people safe. People were supported to have their medicines as prescribed and were protected from the risk of cross infection. Lessons were learned when things had gone wrong. Appropriate recruitment checks took place before staff started work and there were enough staff available to meet people's care and support needs.

The care provided by the service was effective. Staff were well trained and supported by

wider health and social care professionals. The registered manager was committed to upskill staff to enable them to support people to achieve their best outcomes.

Staff had a good understanding of the mental capacity act and knew how to support people to make informed choices about their care. Should people lack capacity this was quickly identified, and measures put in place to support those people in line with their preferences and goals.

The service had established links in the local community and had worked in partnership with key organisations including local authorities and other agencies that provided social care services to improve people's opportunities and experiences.

Rating at last inspection

The last rating for this service was Good (report published in 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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service was safe.

Details are in our Safe findings below.

Is the service effective?

Good ●

The service was effective.

Details are in our Effective findings below.

Is the service caring?

Outstanding ☆

The service was exceptionally caring.

Details are in our Caring findings below.

Is the service responsive?

Outstanding ☆

The service was exceptionally responsive.

Details are in our Responsive findings below.

Is the service well-led?

Outstanding ☆

The service was exceptionally well-led.

Details are in our well-Led findings below.

Housing 21 – Cambrian Green 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 of Housing & Care 21 – Cambrian Green Court was carried out by one Adult Social Care Inspector.

Service and service type

This service provides care and support to people living in specialist 'extra care' housing. Extra care housing is purpose-built or adapted single household accommodation in a shared site or building. The accommodation is rented and is the occupant's own home. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for extra care housing; this inspection looked at people's personal care and support service.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because we needed to be sure that the registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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. We used all of this information to plan our inspection.

During the inspection

We spoke with five people who used the service and two relatives about their experience of the care provided. We spoke with eight members of staff including the registered manager, assistant care managers and care staff.

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

After the inspection

We looked quality assurance records and other information which the registered manager had sent to us.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same Good.

Systems and processes to safeguard people from the risk of abuse

- Staff had received training in how to safeguard people from abuse. Staff could explain what action to take to ensure people were safe and protected from harm and abuse.
- The registered manager held a recent safeguarding session for the people they supported and also invited family and friends that wished to attend.
- The registered manager was trained to deliver safeguarding training to staff. They used much of the same content and knowledge to help educate people. We were told the safeguarding training helped to empower people on not only how to protect themselves but also the people they live with. The training also helped people to understand what the responsibilities of the service was in regard to safeguarding.
- People told us they felt safe and were happy with the care provided. They were able to explain to us how the staff maintained their safety. One person told us, "I have pressed my buzzer several times in the past because I have fallen. I do feel safe as the staff come quickly".
- The registered manager was aware of their responsibilities for reporting concerns to the local authority and to CQC. They had made the appropriate referrals directly to the local safeguarding authority if the service had concerns about people's safety.

Assessing risk, safety monitoring and management

- Risks to people and others were minimised because clear risk assessments were in place. For example, some people had a risk assessment regarding the administration of medicines. The risk assessment provided guidance to minimise the risks to people.
- Risks to people's health and well-being were assessed and measures were put in place to minimise these risks. For example, one person had been assessed as being at high risk of falls and the equipment and supervision needed was recorded.
- Environmental risks were managed. For example, risks within people's flats had been assessed to ensure people and staff were safe. This included if people smoked, had a pet or their flat was cluttered.

Staffing and recruitment

- Staff responded promptly to people's request for additional support and worked as a team to ensure support was provided quickly when requested. This often meant staff responding to the call bell system installed within people's flats.
- Support to people was provided by a well-established team of staff. This meant people received consistent support which fostered trusting relationships. Staff told they had enough time at each visit to

meet people's needs. Their comments included, "Yes we do have enough time", "If a person needs extended support due to being unwell then staff will stay and provide this. I let my team know and they help to pick up extra visits.

- People said they felt safe, confident and happy when being supported by the staff. Each person we spoke with felt staffing levels were appropriate. People spoke positively about receiving care from a consistent team of staff.
- Staff were recruited safely. Appropriate checks were carried out to protect people from the employment of unsuitable staff.

Using medicines safely

- People's medicines were managed safely. Staff that administered people's medicines had received training. Competency checks were carried out by senior staff to ensure staff followed the correct procedures.
- We found medicine records had been appropriately signed for when medicines had been administered, or the reason why they were not given was recorded.
- People told us they were happy with the support they received to take their medicines.
- Medicines audits were carried out each month and action was taken to address any shortfalls identified. A new monitoring system had been introduced and implemented by the current registered manager. This had reduced the number of medicines errors, omissions and recording issues.

Preventing and controlling infection. Learning lessons when things go wrong

- People were protected by the prevention and control of infection. Staff maintained good hygiene, using personal protective equipment (PPE) such as aprons and gloves. Staff showed us they carried a supply of new PPE with them.
- Staff had received infection control and food hygiene training to minimise the risk of cross infection and poor food hygiene practices.
- Through feedback received from staff plans were in place for them to be provided with work bags to carry around aprons and gloves in.
- The registered manager reviewed accident and incidents that happened to improve safety across the service. One example included monitoring the number of accidents and falls which people had. The registered manager completed a trends analysis each month.

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.

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

At the last inspection this key question was rated as Good. At this inspection this key question remained the same Good.

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

- People's needs had been assessed. Assessments were completed by registered manager and senior staff.
- Assessments were comprehensive and ensured the service was able to meet people's specific care and support needs. It also ensured the staff had the required skills and experience to deliver care effectively. From these assessments a plan of care was devised and agreed upon.
- People's needs continued to be assessed and reviewed to ensure the care they received met their needs and helped them to achieve good outcomes.

Staff support: induction, training, skills and experience

- New staff received an induction to the service. This included a range of topics such as learning the role and the policies and procedures. Staff completed all mandatory training before they started within their role.
- As part of the induction staff were given the opportunity to shadow a more experienced member of staff depending on their level of experience and competence.
- Staff were required to undertake and complete the Skills for Care 'Care Certificate' or an equivalent robust induction programme. The Care Certificate identifies a set of care standards and introductory skills that health and social care workers should consistently adhere to.
- Staff received the ongoing relevant training to enable them to acquire the knowledge and skills to meet people's individual needs effectively and safely.
- The registered manager told us that since the last inspection the service were able to offer staff additional training courses in various subjects. An example included training in end of life care. Some staff choose to complete this course. Staff told us this enabled them to have a better understanding when supporting people with end of life care. We were told staff received a level 2 certificate in the course which was recognised with other providers.
- Other courses staff had chosen to complete had also been beneficial when caring for people. This included a level 2 in managing diabetes and another course for common health conditions. This enabled staff to have a better understanding of the conditions people lived with. It also helped to identify when symptoms were displayed so staff could identify when people were not managing a particular condition.
- Staff confirmed that they felt supported within their role. Comments included, "We do have some really good support here" and "I feel supported as we are a good team and support each other".

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

- People were provided with assistance to eat and drink when needed. The level of support each person needed was recorded in people's individual support plan and agreed with them.
- We spoke with people about the support they received to eat and drink. Each person that we spoke with said that they had no concerns with how staff supported them.
- People's support plans contained information relating to their dietary needs. People's individual preferences were recorded within their care records. This gave staff guidance on what people liked to eat and drink and any special requirements.
- Staff encouraged people to follow a balanced diet. The building had an onsite restaurant which provided people with a selection of meals to purchase each day.
- Some people required support from staff to help with their weekly food shop. Other people were able to go shopping themselves or were encouraged to shop online.
- If staff were concerned people were not receiving the appropriate levels of nutrition, this was reported to the office. Professionals were then contacted for advice.

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

- People who received a service from Housing & Care 21- Cambrian Green Court had a separate tenancy and care agreement. The registered manager oversaw the running of the care and housing side of things. The service employed an assistant housing manager to support the registered manager.
- The extra care scheme was accessible for people to use with lifts and automatic doors around the building. The gardens were easily accessible for people.
- Some people's flats had equipment to help meet people's needs. An example being included ceiling hoists and specialised beds.

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

- People were supported to access the healthcare services they required. Care records confirmed that there were good links with local health services.
- People were encouraged to arrange healthcare appointments themselves, however staff assisted those people who were not able to do so.
- The service worked alongside a number of healthcare professionals which included GPs, chiropodist, occupational therapists and other healthcare professionals.
- The registered manager told us they had a good relationship with the local GP surgery. People were encouraged to visit the GP surgery. The GP visited those people who were not able to attend the surgery.
- We observed during the inspection senior staff supporting a person who was unwell. Staff had liaised with the ambulance service and the hospital to help the person access the appropriate treatment they requirement.

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

- When people were assessed to have support from the service, the person's capacity to make decisions for themselves was assessed. This was kept under review.
- Where people lacked the mental capacity to make specific decisions staff liaised with others to make sure decisions made were in the person's best interests.

- Staff knew about people's individual capacity to make decisions and understood their responsibilities for supporting people to make their own decisions.
- People confirmed that staff explained what they were doing and sought their consent before they provided them with personal 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 Outstanding. At this inspection this key question remained the same Outstanding.

This meant people were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service.

We found there were key characteristics that continued to make the service exceptional and distinctive in their caring role. There were many examples where this was demonstrated, and we have included a small selection for the purpose of this report.

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

- People continued to receive outstanding care and support at Cambrian Green Court. People told us, "The staff are absolutely brilliant here. They are angels the lot of them" and "I am certainly very lucky. The staff treat me very well and are very caring", "I would say I am cared for exceptionally well here. They support me very well and we do all have a good laugh here".
- Relatives continued to be exceptionally complimentary about the way their family members were looked after and the caring nature of the staff. They told us, "The staff are all genuinely very lovely and attentive. I know when I leave here they are safe and cared for very well" and "The staff and the management are really nice and caring. Nothing seems to much trouble and they know exactly how she likes to be cared for", "The staff go the extra mile here they are a great bunch of carers".
- The provider maintained a log of all letters and cards sent to the service. We looked through these and made a note of a few of the compliments made: "Thank you for all the love, care and support you gave to my mother over the past seven years and especially during the end of her life. You made her feel secure, safe and happy" and "Thank you for the wonderful care given to mum over the four years and support given to us as a family. At times you have gone the extra mile for her and we are truly grateful".
- The registered manager told us that one person they supported had a cat but unfortunately, they were no longer able to care for this. The family asked if the staff could support them to rehome the cat. The staff and the registered manager considered several options and looked to see if anybody at the service could help. One person that received support from the service lived with a mental health illness which affected their emotional wellbeing. The registered manager spoke with the person to see if looking after the cat was something they were interested in. The person was overjoyed at being asked and agreed. We were told by the staff that since adopting the cat they had really noticed a positive impact on the person. The person's emotional wellbeing had remarkably improved. Staff told us "The cat gives him something to live for".
- People who were supported by the service were able to have pets living within their flats if they chose. The registered manager told us that one person became unwell and was admitted to hospital, which resulted in having to leave their cat. We were told the family found it a struggle going to and from hospital to visit their loved one but also to the flat to feed the cat. The staff decided to leave the care visits originally scheduled in place for the person at no cost. This was so that staff members could together go into the flat and continue

to feed, water and change the cats litter tray. The registered manager told us, "We did this as we recognised the strain on the family and we also knew how much the resident would be worried about the cat whilst in hospital". This had a positive impact on the person as they knew the staff were continuing to care for the cat. The family were able to spend much needed time with their family member.

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

- People were enabled to make choices about the care they received. People the service supported had variable care needs and staff supported them when they needed this. For example, supporting people with personal care, medicines, welfare visits and preparing meals.
- People were supported by a consistent team of staff who they knew well and were supported by regularly. This enabled staff to build relationships with people over time and gain an understanding of people's needs and preferences.
- Staff directed people and their relatives to sources for advice and support. This included advocacy services.

Respecting and promoting people's privacy, dignity and independence

- Since the last inspection the registered manager and assistant care managers had become dignity champions. Becoming a dignity champion meant they were able to discuss with staff how to support people and respect their dignity. The dignity champions had pledged to promote the '10 dignity do's'. This involved challenging poor care and acting as a role model to others. The registered manager told us that one of the pledges to adhere was to challenge poor care where other providers were involved. We were told since making the pledge one of the assistant care managers at the service challenged a local hospital regarding the poor discharge of a person that lived at the service. This was around poor practice where a person had been discharged back to the service unwell and they had not received the appropriate care and treatment. As a result of challenging other professionals, the person was readmitted back into hospital for treatment. The service and the person received a letter of apology from the hospital regarding the shortfalls identified.
- Staff were proud of their approach towards people. We were given various examples where people's dignity and respect had been promoted. It was apparent that staff continued to be exceptionally kind and committed to the people they supported at the service.
- The registered manager told us of an example when one of the staff had gone "above and beyond". They had showed empathy and respect towards a person when they realised they were not able to afford a new bedding set which they needed. The staff took it upon themselves to go out and purchase a new bedding set for the person at their discretion. The person was extremely grateful for this and they thanked the staff member profusely for thinking about them.
- There was a strong culture of empowering people. Independence and autonomy were promoted at all times and was at the centre of all care and support that people received.
- One person the service supported required a wider electric wheelchair to be able to mobilise due to not being able to weight bear. Before they moved to the service, they had spent a long period of time within the hospital. The hospital team supported the person to look at various options of housing. We were told no other housing association were able to accommodate the adaptations required and to support with the care package. The registered manager agreed to accept the person at the service as they wanted to help the person regain their independence. The package included a high level of support which included day and night time visits. They worked closely with professionals which included occupational therapists to provide specialist moving and handling equipment to promote the person's independence. The staff promoted the person's independence daily and slowly introduced simple tasks for them to take back control. Since they received care from the service, the persons care package had reduced considerably. They were able to do

many tasks without support from staff. For example, they were able to attend the restaurant everyday independently. They were are also able to attend to activities at the scheme where previously the person was not able to go out.

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 meet people's needs, preferences, interests and give them choice and control

- The service was exceptionally responsive to people's needs and was able to support people at short notice. They were also able to adapt the service to provide person centred care to people.
- The type of contract the service had with the local authority enabled Cambrian Green Court to respond to people's needs as they changed immediately rather than having to wait for a social worker review. Other services offered to people went beyond the expectations of the service. An example included that the service was able to provide short term care for people when their needs had increased due to ill health. One person returned home with a broken bone following a fall they had whilst out. The person had low care needs prior to their fall and the visits they had were not enough to support them with the sudden changes in their care needs. At very short notice, the same evening the person returned home, the service put in place extra visits. Over a period of weeks, the staff supported the person with visits, evenings and mornings. This was something the person did not have in place previously. Providing the visits enabled the person to continue to live as normal a life as possible. Once the staff had supported the person they were able to carry out other tasks independently during the day.
- One person the service supported lived with significant health problems. We were told their mobility had dramatically reduced. This had resulted in the person being able to mobilise only in their wheelchair. The person's mood had deteriorated as a result of not being able to access the outdoors. The person liked to smoke but preferred not to smoke within their flat. The registered manager told us the landlord had another flat become available. This had access to the garden and had an additional bedroom where equipment could be stored. As people's care and tenancy was commissioned by the local authority the internal transfer needed to be discussed with them. The registered manager put the person's case forward to the local authority and thankfully this was accepted. We were told since the person moved flats their mental wellbeing had dramatically improved. The person told us they had much more room to get around in their electric wheelchair and could smoke outside.
- A relative took the time to speak with us to share their experiences of the service. The relative had nothing but praise for the service. They told us how responsive the service had been towards their loved one. We were told care was personalised and if their relative was unwell or not themselves staff would provide extra welfare calls. An example included a time the person had fallen. Staff had increased calls to check the person was ok post fall.
- During the Christmas period, the management team had recognised that some people wanted to complete Christmas shopping, however this was not part of their support. Some people at the service only had support with their personal care. We were told the management team went out of their way to make Christmas special. They arranged for staff to accompany people if they wished to visit the local shopping

centres to help them purchase their family Christmas presents. The registered manager told us they had a huge impact on the people they supported. They had thought that they would not be able to give presents to their family at Christmas time. In the past their family had completed their shopping for them. The registered manager told us people had a feeling of satisfaction completing their own shopping. This had boosted people's self-esteem and helped people to feel empowered. We were told being able to offer this to people had helped them to have more control over their lives.

- People participated in a range of activities. Within Cambrian Green Court it was the landlord's responsibility to arrange activities for people. The staff recognised activities were not being provided as people wished. The service took it upon themselves to organise activities for people. Although the landlord was able to do this, they were not able to accompany people on trips and days out where people required a carer to support them with certain daily tasks. The service was not funded to provide activities or supply staff to attend activities, but it was recognised it was an important part of people's daily lives. The registered manager told us being able to support with all aspects of their care including activities was highly important.

- The service had arranged for in house activities to be provided along with various trips out where staff went with people to provide support to those people who required assistance. A number of trips had taken place such as canal boats, afternoon tea, shopping trips and visits to the hippodrome.

- The registered manager told us how some people had benefitted from attending activities within the service such as bingo, bowls and dominos. The service helped people to celebrate special occasions such as St Patricks day, Christmas jumper day and Ramadan. Some people were previously isolated and withdrawn and stayed in their flat. With the encouragement from staff they attended activities and met new friends within the group of people. This had ultimately prevented them from being socially isolated.

- The service also encouraged families to be involved with activities. One relative played the guitar to provide entertainment to people. Another relative arranged table top sales and also made personalised gifts for people to purchase.

- The registered manager was passionate at preventing social isolation and had set up a number of groups within the service which people could attend. This included, friendship club, coffee mornings, film afternoons, reading groups and the knit and natter group. They encouraged people to attend the groups to meet up with friends and opened this up to the local community.

- The service had worked hard since the last inspection to encourage people to look at goals which they wanted to achieve. The service sent out forms to people called 'Bucket list ideas'. Some people returned these forms with their wishes stated. The service was able to work with people to complete their bucket lists. An example included one person wanted to go shopping at a local shopping centre. The registered manager responded in writing and said, "We have arranged for you to go shopping for a few hours with a couple of carers". The registered manager told us goals were not necessarily for the service to achieve with people. The service wanted to inspire people by finding literature which gave them information on how they could achieve their goals independently. For example, one person wanted first class tickets to Canada. The registered manager had responded by giving the person information leaflets regarding how they could achieve this. We were told some people had a fabulous outcome as their wishes/goal had been met. The registered manager told us "People generally really enjoyed themselves as it was something they had chosen to do".

- Information was shared with people in formats which met their communication needs in line with the Accessible Information Standard.

Improving care quality in response to complaints or concerns

- The complaints process and information about how people could raise a complaint or concern was available to them in their support file.

- People we spoke with confirmed they knew how to raise a complaint and felt comfortable speaking to

staff and the management if they were unhappy.

- Records showed us complaints were addressed, reviewed and followed up appropriately by staff.

End of life care and support

- The registered manager told us that end of life care was not something the service were fully equipped to provide at Cambrian Green Court, being an Extra Care Scheme. However, working with other organisations and as partners the service was able to support people who wished to remain in their homes.
- At the time of our inspection the service were supporting one person with an end of life care package.
- The service worked closely with district nurses and in the past were able to support people to remain in their own home. The registered manager told us that preventing a person from having to remain in hospital or in a hospice had a positive impact on them.
- People were able to be cared for with an end of life support plan in place along with regular visits from staff to support the person and family. Families were able to visit as often as they liked, and the service offered them a guest suite to stay in free of charge. This was so they could be near to their loved one. The room provided space for them to rest when they needed this.
- The registered manager had introduced a model of care where after a person had died their loved ones were supported through the bereavement process. They did this by keeping the scheduled visits in place to check on people's loved ones. Although they were not funded to provide these visits it helped to support peoples loved one through their bereavement and prevented loneliness. This also gave the staff a level of satisfaction.

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.

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

- The registered manager managed the service alongside another one of the provider's extra care services. They divided their time between both services to ensure they were both managed effectively.
- The service was exceptionally Well Led. The ethos, vision and values were led by the registered manager and provider. This included, current best practice, innovation, plans for the future and striving to be the best. It was evident that the provider and registered managers worked in collaboration with each other. The management and staff team had an excellent working relationship. They each strived to provide the best possible care independently, based on their own merits, in addition to those at organisation level.
- The registered manager was passionate at providing the best possible care to people and strived to achieve excellence. They did this by empowering the staff team with a strong emphasis on the values for continual improvement. At the last inspection we rated the Caring domain as Outstanding. The registered manager had been creative and planned ahead for this inspection. They had taken the time to write some reflective case studies regarding good practice and events that had occurred. They had reflected on the care and support they had given to people and how they had achieved person centred care.
- People benefited from receiving a service that was continually seeking to provide a service that they were at the centre of. There were many examples within the report where this was demonstrated such as identifying people's goals, being responsive to people's changing needs, promoting independence and the prevention of social isolation.
- Staff told us they felt confident in the leadership of the registered manager. Comments included, "She is an excellent manager and is very ambitious. She drives improvements" and "We are lucky to have her as a manager. She wants the best for people and staff and is very driven".
- The registered manager was supported by a team of assistant care managers who managed the day to day running of the service. The assistant care managers shared the same values as the registered manager. As well as overseeing the care that people received the registered manager managed the housing side of things at the scheme.
- The senior management team within the organisation were visible at the service. The Director of Culture, Assurance and Performance had visited the service and shadowed the registered manager for a number of days. After the visit they had taken the time to write an article titled "Nothing is too much trouble". This gave a reflected account of their experience of working with the registered manager at the service. They mentioned in the article, "As part of the experience I saw compassion, patience and care like I have never

witnessed before". The article was published on the internal website within Housing 21 for staff to read.

- An area manager supported the registered manager and visited regularly to meet with people individually and at tenants' meetings. They carried out regular audits of the service and supported the registered manager by phone and email.
- The registered manager understood the responsibilities of their registration with us. They had submitted notifications to us as required by law and the rating of the last inspection was on display in various places throughout the service.

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

- The registered manager had managed the service for a number of years. They had focussed on developing a culture which promoted independence and person-centred care. They told us their aim was to provide a high standard of care to people and to support staff within their role. This was done through a process of assessment, and the identification of goals.
- The registered manager ensured the service provided people with high-quality, individualised care and was aware of their duty of candour responsibilities. There was an open and honest culture at all levels within the organisation.

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

- The provider had a system in place to formally gather feedback about the quality of care people received. Questionnaires were sent out during April 2019 to obtain feedback from people regarding the service they received. Out of 19 people 100% of people felt that staff treated them with dignity, respect and listened to them. 100% of people felt that the service helped to make them feel safe. People made the following comments within the questionnaire, "Enables me to live as independently as possible. Feel very safe and secure, also happy" and "Very good care service". The results from questionnaires were shared with people.
- The service had creative, innovative ways to enable people to feel empowered and voice their opinions.
- The service had a notice board near to the entrance with the headings 'Rate your EGG-Sperience'. Which the registered manager had designed and introduced themselves. The registered manager told us this was based Housing 21's organisational values using eggs to rate the service. People were able to leave feedback by using a good egg, bad egg and 'medi yolker' egg, to rate their experience of the service. The registered manager told us "This is a platform for anyone who associates with Housing 21 to leave feedback including contractors, residents and their families, staff, anyone who visits the building". At the time of our inspection the service had only received positive feedback. Comments left by people included, "Thank you to the carers who are helpful, happy and support", "All the staff are lovely, always ready for a chat and very welcoming". The registered manager regularly checked the board and responded to feedback by leaving a fried egg shape note. An example included, "Thanks for the positive feedback, I will pass on to the team".
- Staff told us their feedback about the quality of care was sought through staff meetings and supervisions. Staff told us that their views were listened to and acted upon to improve the quality of care. The last staff meeting was carried out April 2019 and discussed for example, staff and people updates, medicines and policy updates.
- Staff that worked for Housing 21 received recognition for the number of years that they had worked at the service. Housing 21 provided staff with a star badge which was a different colour for each number of years staff had been employed at the service. For example, a blue star and uniform watch was given to staff after passing their six-month probation, yellow star for 12 months, green star for two to five years of service, red star for seven years of service and a gold star for 10 years of service. The registered manager told us the years of service recognition badges were introduced at the request from staff. Some staff were forum representatives who met on a quarterly basis with the senior management from cross the Southwest. The

suggestion of the badges was made by staff at one of the meetings. After some co production work and further discussion this was introduced across the organisation. The registered manager told us staff that worked at the service really enjoyed this recognition. One member of staff had taken the time to write a letter to the senior management to thank them for their badge and expressed their appreciation. Stars were presented to staff by senior managers who visited the service.

- The registered manager rewarded staff internally for their hard work with a small token of appreciation in the means of a voucher and card to thank them for their hard work.
- The registered manager told us that engagement with others was an important part of their role.
- As well as managing the service the registered manager supported the 'residents association' which had been set up by people who lived within the service. The registered manager attended meetings alongside the chairman, vice chairman and treasurer. After meetings were held the registered manager continued to support the resident's association by escalating concerns raised at the meeting to the appropriate services. For example, concerns were raised about the lack of buses which ran outside of the service. The registered manager had voiced their concerns to the bus company and the local MP. As a result, from escalating the concerns the bus company looked into the bus routes nearby and promised to make amendments to the bus service. The registered manager had also helped to organise a trip to the local hippodrome which was initiated by the resident's association. They arranged transport and provided the staff to support them.

Continuous learning and improving care. Working in partnership with others

- The service worked in partnership with other organisations to ensure they followed current practice and provided a high-quality service. The registered manager worked closely with the local authority and other providers to share good practice. They attended regular 'extra care health and wellbeing groups. At one of the meetings falls prevention was discussed. The service was in the process of looking in to possibility of using a chair raiser to assist people from the floor who had fallen with no injury. We were told this would ease the pressure on the ambulance service. The registered manager was working in partnership with the ambulance service to provide the staff with training on how to use the chair raiser which had already been purchased. They were hopeful training would be provided within the next few months.
- The registered manager was able to tell us about how they learnt from adverse incidents and events which had occurred. The registered manager had introduced a trends analysis system which helped to monitor the service. This included monitoring incidents related to safeguarding, medicines and accidents. As a result of the trends analysis the registered manager was able to take action when trends had been identified to prevent or reduce reoccurrence. For example, the number of recording errors with medicines had reduced at the service over a period of months by implementing a new medicines policy. They also provided extra training to staff and issued warnings when repeated errors were made.
- The registered manager told us a staff member's daughter and friend were completing a Duke of Edinburgh award through the local school. One of the requirements was to volunteer and support people when possible. They discussed this with the registered manager and asked if they were able to support with this in any way to help them achieve their award. The registered manager agreed that they could both visit the service one evening to help out with certain activities. We were told by the registered manager and people that this not only helped the school children to achieve their award, but people also enjoyed taking part knowing they had helped the children during the process.