

Vida Court Limited

Vida 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

Vida Court is large nursing home providing personal and nursing care to up to 100 people across 8 units which are called houses. Each house has its own separate adapted facilities. When we inspected, 4 houses were open, and 42 people were using the service.

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

The service significantly improved people's quality of life and self-esteem. Staff used exceptionally creative ways of following best practice guidance to ensure people's care and support needs were met even when this meant approaching and managing difficult conversations.

Staff spent time exploring people's history to establish how they liked to dress, their favourite perfume/aftershave or jewellery as well as how they would usually spend their day so this could be replicated within the home. This helped people feel good and increase their self-esteem. The registered manager was passionate about ensuring each person could live their life as they wished. They promoted equality and led by example, promoting a strong message that anything was achievable by working together and treating everyone as individuals.

The provider's ethos of ensuring excellence remained at the forefront of everything shone through each and every staff member and their approach to supporting people. Senior leaders and staff underpinned the core values of Vida Healthcare demonstrating respect, dignity, fairness, equality and autonomy. Staff spent meaningful time getting to know each person and things that were important to them.

A truly person-centred approach was adopted in relation to new admissions to the home. This included accommodating several visits to the service so people could get to know staff as well as exploring how people wished for their bedroom to be decorated and furnished or what sentimental items were important to them and why.

Meaningful relationships had been developed which were based on trust and mutual respect. Innovation was led by the use of the latest research and professional literature and fully embedded throughout the service. Staff often thought outside the box to support people to engage in difficult conversations, communicate their needs and understand their preferences.

People, relatives and professionals highly commended staff's ability to respond with patience and knowledge when supporting people. Staff used specialist training to successfully manage situations where people were distressed without the use of physical restraint. This was also recognised by the Restraint Reduction Network whom Vida Court had an accreditation with.

The service regularly reviewed people's needs and worked with relatives and other professionals to ensure any barriers were overcome.

The service truly enriched people's lives by helping people to fulfil wishes and aspirations no matter how big or small. Staff helped people to relive memories, such as festive holidays and special events and encouraged people to make new memories with loved ones, such as organising birthday parties and inviting them to activities taking place in the home.

Collaboration with external professionals had led to significant improvements in people's health. This included increased acceptance of support with personal care leading to a reduction in the use of chemical restraint medication.

Person-centred care was echoed throughout the service, and this included how people wished to be cared for at the end stages of their lives.

People, relatives and staff told us the service was led by an exceptional management team and their visions and values were at the heart of the service. The management team used every opportunity to develop, discuss, promote and implement innovative ways of involving people in developing a high quality, outstanding service.

Staff described an inclusive, open working environment and they were extremely proud to work at Vida Court. There was a strong framework of accountability by the management team to monitor performance and risk.

Staff developed positive, trusting relationships with people that helped to keep them safe. Systems and processes were established and followed to ensure any safeguarding concerns were appropriately reported.

Staff were well supported to ensure they had the skills and knowledge to carry out their role to a high standard. The training facilities available not only provide staff with learning opportunities, but they also allow people living at Vida Court the opportunity to contribute and reflect.

Safe recruitment processes were in place and thoroughly followed to ensure only suitable staff were employed and people were encouraged to be part of the recruitment process. There was enough staff on duty to ensure all aspects of people's care and support needs could be delivered in a person-centred way.

The design and décor of the home had been carefully considered the construction stage to ensure it was reflective of best practice guidance in relation to supporting people living with dementia.

People's cultural and personal needs were fully considered by staff who were kind, caring and showed empathy towards people and their relatives.

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.

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

Rating at last inspection

This service was registered with us on 18 October 2021 and this is the first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

Follow up

We will continue to monitor information we receive about the service, which will help inform when we next inspect.

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 exceptionally caring.

Details are in our caring findings below.

Outstanding 

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 

Vida 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 Health and Social Care Act 2008.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was conducted by 2 inspectors 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

Vida Court is a 'care home'. People in care homes receive accommodation and nursing and/or personal care as a single package under one contractual agreement dependent on their registration with us. Vida Court is a care home with nursing care. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

Registered Manager

This provider is required to have a registered manager to oversee the delivery of regulated activities at this location. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Registered managers and providers are legally responsible for how the service is run, for the quality and safety of the care provided and compliance with regulations.

At the time of our inspection there was a registered manager in post.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the service since they registered with CQC. 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 (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with 6 people who used the service about their experience of the care provided. We also spoke with 2 professionals who were visiting the service, as well as the nominated individual, registered manager, care manager, quality manager, chef and 5 nursing and care staff.

We conducted a tour of the service and looked at a wide variety of records. These included staff recruitment and supervision files, audits used to monitor the service and environmental servicing and checks.

We spent time conducting observations of staff interactions in communal areas as well as observing the lunch time experience and activities on offer. We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

Following the inspection site visit we requested some documents electronically. These included care plans and risk assessments, monitoring documentation, further evidence of quality assurance checks and records relating to achieving outcomes.

We also contacted a further 4 relatives and 3 professionals via email to request feedback on the service provided.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- Thorough systems and processes were established and followed to ensure any safeguarding concerns were appropriately reported.
- Staff had completed safeguarding training and had the confidence in the management team that any concerns would be appropriately investigated.
- People told us they felt safe living at Vida Court. A relative told us, "It's amazing here, it's on a different level to other care homes; it brings me to tears how well they treat everyone. [Person's name] is absolutely safe."
- Staff developed positive and trusting relationships with people that helped to keep them safe.

Assessing risk, safety monitoring and management; Learning lessons when things go wrong

- Risks to people were assessed, recorded and regularly reviewed to ensure they remained up to date and relevant.
- The home was part of the Restraint Reduction Network and all staff completed Positive Interventions in Dementia Care (PIDC) training as part of their comprehensive induction. This provided staff with the tools to use verbal de-escalation skills to reduce signs of distress and reduce risks to people without the use of physical intervention.
- Regular checks were completed to ensure the service and equipment remained safe to use. Any issues identified were promptly addressed.
- Lessons learnt were shared with the full staff team to aid wider learning. The registered manager worked in partnership with other registered managers in the Vida Healthcare group so learning could not only be shared within Vida Court, but the wider Vida group.

Staffing and recruitment

- Safe recruitment processes were in place and thoroughly followed to ensure only suitable staff were employed. Interviews were used to explore candidate's suitability for the role in line with the provider's ethos and values.
- People were encouraged to be part of the recruitment process. The registered manager spent time with people asking them what questions were important to them that could be asked at interview. Any answers given by candidates were shared with people so they could give their opinions on their suitability for the role.
- There was enough staff on duty to ensure all aspects of people's care and support needs could be delivered in a person-centred way. Staffing levels were often adapted to accommodate people's needs. For example, an extra member of staff was allocated on duty the day a new admission moved to the home. This

helped ensure the person settled well whilst having a consistent staff member allocated to them to provide support and reassurance throughout the day.

Using medicines safely

- Medicines were stored and administered safely. Thorough records were in place with regards to medicine management and NICE guidance had been followed.
- A person-centred approach was adopted in relation to medicine management. Each person had a medicine cabinet in their bedroom so people's privacy could be respected.
- Staff were proactive in requesting medicine reviews for anyone who was prescribed antipsychotic medicines to ensure they remained effective. Staff actively explored how the use of antipsychotic medicine could be reduced, such as using recognised distraction techniques and only administering antipsychotic medication as a last resort.
- Staff had been provided with medicines training and had their competencies assessed. People told us they received their medicines as prescribed.

Preventing and controlling infection

- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was supporting people living at the service to minimise the spread of infection.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was responding effectively to risks and signs of infection.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

- Visits to Vida Court were not restricted in any way. We observed a number of visits taking place during the inspection.

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.

This is the first inspection for this newly registered service. This key question has been rated good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Staff working with other agencies to provide consistent, effective, timely care; Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- Staff used creative ways of following best practice guidance to ensure people's care and support needs were met. For example, due to their previous profession, staff identified that one person would only respond to formal, written correspondence from senior professionals. When the person was not willing to engage with personal care, staff wrote to the person inviting them to a discussion about the importance of maintaining personal hygiene. The person engaged with the process and positive outcomes were achieved.
- Collaboration with external professionals, such as occupational therapists, had led to significant improvements in people's health. One person had been unable to have a bath or shower for a number of years due to their mobility and medical condition. With ongoing support, assessment and a dedicated staff team, the person was able to enjoy a bath safely.
- A person-centred approach was used in relation to new admissions to the service. Each person was assessed, and a personalised plan created on how to ensure a smooth transition into the home. For example, one person had been able to visit the home for afternoon tea initially, and the length of subsequent visits had been increased until the person felt comfortable staying overnight. This approach had helped prevent any distress to the person and their relatives.

Staff support: induction, training, skills and experience

- Staff were well supported to ensure they had the skills and knowledge to carry out their role to a high standard. A variety of training was delivered to ensure staff skills remained up to date and in line with best practice guidance. This covered both mandatory training and training specific to people's care and support needs.
- A training academy was based on site which was led by a full time learning and development manager. The learning and development manager was supported by a clinical development lead, a vocational training lead, positive intervention trainer and a moving and handling practitioner. The academy hosted a range of training facilities, and a holistic approach was used to ensure training needs of all staff were met.
- Staff received specialist classroom based training for 7 days prior to completing experiential training for up to 2 weeks to ensure role specific competencies. Staff were continuously encouraged to promote their professional development upholding the company ethos of developing staff internally to allow them to reach their professional goals.
- People who lived at Vida Court were invited to help deliver and present training to staff. This enabled staff to understand training needs and expectations from the perspective of people they would be supporting.
- Vida Healthcare was the first care home in the UK to have received accreditation from the Restraint Reduction Network (RRN) and all staff had completed Positive Intervention in Dementia Care (PIDC) training.

The RRN coupled with PIDC training meant risk reduction strategies were in place that had been scrutinised and audited by an internationally recognised organisation. This training and approach provided staff with the skills, knowledge and tools to identify early signs and use verbal de-escalation to reduce signs of distress.

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

- Staff played an essential role in helping people to live healthier lives, which included eating well again and stabilising their weight. A relative told us, "I have never seen [person's name] look so well as they do now. The staff have worked miracles."
- A person-centred approach was adopted with regards to promoting food and fluid. Staff explored how they could support each person. For example, sourcing appropriate aids to facilitate independence at mealtimes. Themed events were also planned so people could experience food from different countries.

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

- The design and décor of the home had been thoroughly considered at the construction stage to ensure it was reflective of best practice guidance in relation to supporting people living with dementia.
- The home had been designed so people who walked with purpose were able to do so safely within a secure environment. Subtle partition had been used, sensory wall art was in place and items were placed around the houses to promote stimulation and conversations.
- All of the houses were furnished to an extremely high standard. Communal areas included a cinema, grand entertaining room, hairdressers and barbers, beauty salon and flower shop. When people moved to the service, they were asked what their favourite sweets and flowers were; these were then purchased and stocked in the on-site shops for people to enjoy. A café/bar area were also available which promoted hydration and fluids whilst offering people a real-life experience in a safe environment.

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 MCA 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, whether appropriate legal authorisations were in place when needed to deprive a person of their liberty, and whether any conditions relating to those authorisations were being met.

- The service worked within the principles of the MCA and staff and management had excellent knowledge in this area.
- People were actively supported and encouraged to make their own decisions in all aspects of their lives. Where people lacked capacity to make their own decisions, people important to them and relevant professionals were involved in discussions and any decision making.
- Appropriate authorisations were in place to ensure people were not unlawfully deprived of their liberty. These were kept under constant review to ensure any conditions in relation to the DoLS were complied with.

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.

This is the first inspection for this newly registered service. This key question has been rated outstanding. 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

- The service had built a strong and visible person-centred culture, where people were placed at the centre of their care, supported by staff who were compassionate and kind and delivered exceptional care. The care people received enabled them to live fulfilled lives. It exceeded expectations and led to consistently positive outcomes for people.
- Staff thought 'outside the box' to capture people's life histories and cultural needs and worked with them and their loved ones to plan and deliver care which reflected their needs, wishes and preferences. For example, staff recognised one person's anxieties with their dietary intake was linked to past experiences. Staff worked together to come up with ideas, discussing the most powerful ideas with the person. The person agreed to adopt a particular approach using a consistent strategy respecting the person's diverse needs. The person's health significantly improved as a result.
- Staff understood the importance of matching themselves with people with similar interests and personalities. People said this had given them confidence to do more, have more control over their care and positively impacted their well-being. Staff took the time to get to know people. This supported staff to be extremely responsive recognising changes in people's presentations. One person said, "The skills of the staff amaze me." A relative told us, "A significant amount of time and effort went into getting to know [Person's name] and their habits, likes and dislikes. Staff were able to identify triggers for [Person's name] and immediately tailored their care to minimise any further distress. The attention to detail for each resident is outstanding."
- Staff demonstrated real empathy for the people they cared for. We observed heart-warming interactions between staff and people during the inspection; we found staff were particularly sensitive to times when people needed caring and compassionate support. Staff approached and responded to people as individuals, tailoring how to do this based on their in-depth knowledge of the person.
- The provider, in consultation with people and staff had developed a multi-faith room as part of their well-being strategy, recognising the diverse perspectives of the people they cared for and the staff they employed. Supporting staff with time to reflect had developed their resilience and maintained their well-being.

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

- The service was exceptional at helping people to express their views so that staff at all levels understood their views, preferences, wishes and choices. This led to the development of meaningful relationships based on trust and mutual respect. To facilitate the control people had about their care and explore their own options, staff approached them for advice and guidance to support them to make their own decisions. This

empowered people to be independent and take ownership, recognising diverse perspectives. Staff championed people's rights and were skilled in exploring different options for people. They utilised support from advocates and health professionals to support people with their decision making. For example, when a person required a medical procedure, a staff member had supported the person to be heard and to obtain the information they needed about their procedure. The staff member stayed with the person to offer emotional support. The registered manager was also instrumental in supporting the person and the staff member to be comfortable and provided personal items, such as a memory cushion to reduce anxiety and their favourite drinks and snacks.

- Staff recognised the detrimental impact moving from one home to another could have on a person. The examples provided demonstrated how staff exceeded expectations to ensure a person's transition from Vida Court to another home was as smooth as possible and reflected their views. Staff supported with transitional visits, training new staff and continued visits after the person moved to offer a familiar, friendly face. One member of staff said, "I see the residents as my family and if they have to move to another home, I want to make sure they are still receiving a high standard of care. I love visiting them, and yes, it is in my own time, but I couldn't think of anything else I would rather do."

Respecting and promoting people's privacy, dignity and independence

- An equality, diversity and human rights approach to supporting people's privacy and dignity was well embedded in the service. Staff worked tirelessly with people, their relatives, and professionals to deliver person-centred care. For one person, this meant they no longer needed to use a hoist for mobility and increased their independence using a mobility walker. Staff understood the positive impact on people's mental health and well-being if they were able to remain as independent as possible. One person's health had significantly improved, meaning they no longer required palliative care.

- The provider's ethos and values shone through every staff member and their approach to supporting people. Staff not only ensured people could communicate independently with staff, but also with their relatives by exploring the most effective communication aids for them. This enabled people to maintain relationships with people that were important to them.

- Staff spent purposeful time with people, using every opportunity to observe people's interactions so they could truly understand each person as an individual. They understood doll therapy supported people living with dementia to reduce anxiety, agitation and a lack of fulfilment. For one person, they purchased a doll because they identified the person was looking for their children. This individualised approach provided the person with reassurance and comfort, reducing their distress. A relative told us, "I have never seen [Person's name] looking so well. Staff really have got underneath their condition – they just understand [person] so well."

- Thinking outside of the box, staff created a 'home from home' feel for people ensuring their private spaces reflected their preferences. For one person, their bedroom reflected their favourite hotel; they said this brought them joy. For another person they arranged to have the person's furniture from home brought in. These sentimental items were positioned as they would have been in the person's home. This attention to detail supported people's well-being and helped them to remain comfortable.

- Staff cared with dignity and incorporated the values of 'Dignity in Care' in their care of people. As staff knew people extremely well, they were sensitive to subtle signs when people did not wish to be disturbed or wanted to spend time alone. The service recognised their approach to dignity was not just about interpersonal behaviours, but also the systems and processes they followed to deliver a highly effective service which they were proud of.

- The design and layout of the service had been developed in-line with best practice for people living with dementia which supported people to remain as independent as possible. People and relatives commented that the environment had supported people to navigate their way around the building. We observed people walking with purpose were able to do so safely and were able to enjoy different parts of the service, as they

wanted to, and in their own time.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated 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; Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Every element of the service was truly person-centred, even prior to admission. Staff went the extra mile from the initial assessment and understanding how best to support each person with moving to Vida Court, to understanding people's way of life and how they wished to spend their final days. Attention was paid to the smallest of details to ensure people were provided with as much control as possible whilst ensuring their care and support needs were met. This ranged from ensuring people's favourite flowers and sweets were available in the home's shops, to replicating their own living environment in their bedroom at Vida Court.
- The service truly enriched people's lives, as well as making a significant difference to their relatives, by helping people to fulfil wishes and aspirations. For example, one person used to enjoy regular walks out in the community prior to admission. However, they had lost their confidence due to falls. A flagpole was erected in the ground of Vida Court to enable the person to build their confidence when walking outdoors, supervised by staff. This approach had helped improve the persons post fall confidence and gave them a sense of purpose. The person expressed what an honour it was for them being able to lower the flag to half-mast when the Queen passed away.
- The service was remarkable at helping people to relive memories, which enriched their quality of life, mental wellbeing and self-esteem. This included going to exceptional lengths, to ask a football legend to visit the home as a surprise for an avid supporter. A relative described how in-depth personalised planning, coordination of the care and commitment of the staff team meant their loved one was no longer scared, had started eating and smiling again and was supported to make friends within the home.
- People, relatives and professionals highly commended staff's ability to respond with patience and knowledge when people were upset or distressed. Staff described how they had a pro-active rather than reactive approach to supporting people. A professional told us, "The care and responsiveness of staff is exceptional. I have never been to a dementia home like it. This is how care should be. I feel privileged to be able to work alongside such a fantastic team."
- There was a culture at Vida Court which encouraged and promoted social interaction and maintaining relationships that were important to people. People were able to use the cinema room or 'plaza' to celebrate social events with their families and a large variety of stimulating and engaging activities were available daily. This included chair exercises, visits from entertainers such as singers and local community group. Activities were also tailored to individuals. For example, one person had a love of bird watching. A 'bird watching' room had been created which had large floor to ceiling windows facing an open countryside. Binoculars with a stand, appropriate chair and bird books had all been purchased so they person could continue to participate in a pastime they enjoyed.

- The service regularly reviewed people's needs and worked with relatives and other professionals to ensure any barriers were overcome. True consideration was given to people's beliefs and values. For example, Christmas care plans were in place and had been used to identify people's Christmas traditions including what they ate, music they enjoyed and games they would play. People's traditions were then replicated on Christmas day. The registered manager told us, "Just because people are in care homes doesn't mean one size fits all – why shouldn't people be able to celebrate special events in the way they always have."
- Staff often thought outside the box to support people to communicate their needs and understand their preferences. For example, a relative explained to staff about a part of a person's life where they were thriving. Staff took time to explore why the person cherished this part of their life so much and how they could replicate this to allow the person to re-live such happy memories. This was created with great success. The relatives commented, "This is how we remember them. I can't thank staff enough for all they have done. He is now living his life again, not just existing."

Meeting people's communication needs

Since 2016 all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard. The Accessible Information Standard tells organisations what they have to do to help ensure people with a disability or sensory loss, and in some circumstances, their carers, get information in a way they can understand it. It also says that people should get the support they need in relation to communication.

- People's care plans included information of how to best support their communication and understanding. Important information, such as how best to communicate with each person, was subtly displayed in each person's bedroom. This helped overcome any communication barriers and promote positive relationships.
- Staff had a truly holistic approach to aiding effective communication. Their in-depth knowledge of people meant any communication barriers were overcome. For example, staff identified one person was most likely to engage in discussions when they were in a professional, clinical environment. To aid effective communication staff arranged office space to replicate the environment the person would respond well to. This meant the person was fully involved in discussions about their care and support.
- Staff supported people to use computer equipment, such as tablets, to stay in touch with those important to them. The provider recognised the importance of regular communication with relatives. As a result, an App had been developed called 'Family Team Talk.' This is a digital platform where relatives could access pictures and videos of their loved ones on a daily basis. This had resulted in improved communication between staff, people and relatives, and relatives told us they could use the information in the App to stimulate engaging conversations when they visited the home.
- All information was available in different formats so each person had access to the same information, presented in a way they could understand.

Improving care quality in response to complaints or concerns

- People and relatives told us they knew how to raise any complaints but generally 'there was nothing at all to complain about.' A relative told us, "I have never had a complaint, but [Registered manager] really listens to any concerns I may have. To be honest, because they are so proactive in everything they do, minor concerns are usually addressed before they become an issue." Another relative told us, "I was impressed from the start with the care, compassion and professionalism of the staff at Vida Court and that impression has only continued to grow. Anything that I was concerned about was addressed promptly. They (staff) don't just deal with complaints or concerns, they actively listen, and you can see they are always eager to improve in any way they can."
- A system was in place to ensure any complaints or concerns were logged, responded to appropriately and any actions were identified. This ensured the service continuously reviewed their practice and learnt from any mistakes.

- Throughout the inspection we reviewed numerous written letters and cards of thanks, praising staff, the management team and their approach. This high praise was mirrored by people and relatives we spoke with during the inspection.

End of life care and support

- Person-centred care was echoed throughout the service, and this included how people wished to be cared for at the end stages of their lives.
- End of life care plans clearly reflected people's wishes and had been completed in partnership with relatives.
- The registered manager described a truly holistic approach to end of life care. This included providing support, accommodation, meals and personal toiletries for relatives so they could spend their final days with loved ones, and ensuring subtle touches were not overlooked.
- Staff had gone the extra mile to ensure not only people, but relatives received the support they needed during a person's end stages of life. Items such as toiletries, information leaflets and services available within the local area were readily available if relatives required any additional support.

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.

This is the first inspection for this newly registered service. This key question has been rated 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; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- People, relatives and staff told us the service was led by an exceptional management team and their visions and values were at the heart of the service. The values and behaviours of the management team set out clear expectations of the level of care they expected people to receive. Caring values were embedded at every opportunity starting with the interview and induction process.
- The ethos of being committed to providing excellent care meant not only were people's care and support needs catered for, but the whole service was developed by people who were continuously encouraged to contribute in all aspects of the service. From recruitment and training, to fixtures and fitting, people's views were strongly encouraged and acted upon. This helped create an open, inclusive and empowering environment.
- The leadership at Vida Court had created a culture and environment that empowered people in all aspects of their lives. Staff were provided with the knowledge of how to manage difficult conversations to promote empowerment at every opportunity. For example, staff had discussed and supported a person to express their sexual preferences. They took steps to ensure this was managed in a dignified, respectful way whilst the person's wishes were at the centred of all decisions being made.
- The management team used every opportunity to develop, discuss, promote and implement ways of involving people in developing a high quality, outstanding service. The management team recognised that hearing people's personal experiences of receiving care impacted on how care was delivered by staff. As a result, people were encouraging to be actively involved in staff training and the induction process. This had resulted in staff's approach to care and support being positively influenced.
- The management team not only empowered people, but they encouraged staff to continuously improve, think outside of the box and treat every person as an individual. The registered manager truly believed that anything was achievable and this approach positively influenced staff. This had led to high levels of job satisfaction.
- Staff described an inclusive, open working environment and they were extremely proud to work at Vida Court. One member of staff said, "Every day I am amazed at what we, as a staff team, achieve. I have never been in such a rewarding role where I feel motivated and valued every day. Working here I feel like nothing is unachievable."
- The provider, management team and staff took every opportunity to meaningfully engage with people and their relatives. One relative told us, "I cannot fault the management team at all. We have regular contact and they keep us up to date and as far as I am concerned, they always go above and beyond in all aspects of

the care."

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; Continuous learning and improving care

- There was a strong framework of accountability by the management team to monitor performance and risk. Extensive governance systems were in place which reflected best practice and were extremely proactive in identifying any potential shortfalls or areas of concern.
- All homes within the Vida Healthcare group were committed to sharing and learning from any identified shortfalls. Regular governance meetings were held and were used as an opportunity to share innovative practice and successful outcomes to aid wider learning.
- The provider was not only committed to improving the quality of care provided within their own homes, but was passionate about driving up quality across England. They were part of a number of organisations which provided them with the opportunity to share best practice and their expertise on what outstanding care looks like and how to achieve this which had positively impacted the wider community.

Working in partnership with others

- It was clear that the provider, management team and staff all strived for excellence through research, consultation with others and reflective practice. For example, the provider had identified that facilities for people with Huntington's disease were lacking in the area. They had approached relevant professionals and commissioners to establish how they could support in this area. During the inspection, a Huntington's specialist was visiting the service with a view of making recommendations on how the service could be adapted to provide the best possible environment for people living with Huntington's disease in line with best practice.
- Through extensive research the staff team had recognised that external professionals often lacked knowledge with regards to supporting people with dementia which often had a negative impact on people's experiences. As a result of this, a link was established with a local university and a training program had been developed. Nursing and paramedic students were invited to complete a week's placement at the home with the aim of improving their knowledge and skills that they could share with others throughout their professional career. One student paramedic told us, "I will never forget my placement at Vida Court. The training covered everything you need to know to be able to be work safely, effectively, and empathetically in understanding dementia and the residents' individual needs."
- Thorough auditing systems had been used to identify any shortfalls in partnership working. For example, one audit had identified there were potential issues with inconsistent oral healthcare. Further investigation suggested there was an issue in the local area with access to dental facilities. The registered manager and provider spent time engaging with local dental practices to quickly establish how these professional relationships and access to dental services could be improved. The most recent audits evidenced a significant improvement in people's oral health due to this proactive approach.
- Positive, strong working relationships existed between staff and other professionals. The staff team had worked with visiting professionals, such as GP's to establish how they could work effectively to achieve positive outcomes for people in a timely way. The systems in place meant there was clear lines of communication and expectations between staff and professionals and any medical concerns were promptly addressed which had resulted in fewer, unnecessary hospital admissions.

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

- The provider understood their requirements to be open and honest when things went wrong. When things had gone wrong, these were used as a learning opportunity to understand what had gone wrong, why it had gone wrong and what could they do differently to prevent reoccurrence. Any learning was shared with the

staff team, as well as with people, relatives and other professionals.