

HC-One Limited

Appleton Lodge

Inspection report

Lingard Lane
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SK6 2QT

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Ratings

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

Summary of findings

Overall summary

Appleton Lodge is a purpose built care home owned by HC-One Limited. The home is registered to provide residential care and accommodation for up to 30 people with dementia, older people, younger people or people with a physical disability. On the day of our inspection there were 30 people using the service.

Appleton Lodge is a two-storey building situated next to a larger sister building on the same site. All bedrooms are single occupancy and have en-suite facilities. There is an enclosed garden to the rear of the building accessed by a conservatory. Car parking is available within the grounds.

This inspection took place on 5 September 2018 and was unannounced. This meant the staff and the provider did not know we would be visiting.

Appleton Lodge was last inspected by CQC on 23 September 2015 and was rated Good.

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

The home had a registered manager in place. A registered manager is a person who has registered with CQC to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

The registered manager understood their responsibilities with regard to safeguarding and staff had been trained in safeguarding vulnerable adults.

People were protected from the risk of poor nutrition and staff were aware of people's nutritional needs. People had access to healthcare services and received ongoing healthcare support. Appropriate arrangements were in place for the safe management and administration of medicines.

People who used the service and their relatives were complimentary about the standard of care at Appleton Lodge.

Staff treated people with dignity and respect and helped to maintain people's independence by encouraging them to care for themselves where possible. People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible.

Activities were arranged for people who used the service based on their likes and interests and to help meet their social needs, in the home and within the local community. The service used innovative activities to enhance people's lives.

Care records showed people's needs were assessed before they started using the service and care plans were written in a person-centred way and were reviewed regularly. Person-centred is about ensuring the person is at the centre of any care or support and their individual wishes, needs and choices are taken into account. Care plans were in place that recorded people's plans and wishes for their end of life care.

The provider had an effective recruitment and selection procedure in place and carried out relevant checks when they employed staff. There were sufficient numbers of staff on duty to meet the needs of people who used the service.

Staff were supported to provide care to people who used the service through a range of mandatory training, supervision and appraisal. Staff said they felt supported by the registered manager.

The home was clean, spacious and suitable for the people who used the service. The provider had effective procedures in place for managing the maintenance of the premises and appropriate health and safety checks were carried out. Accidents and incidents were appropriately recorded and risk assessments were in place where required.

The provider had an effective complaints procedure in place and people who used the service and their relatives were aware of how to make a complaint.

The provider had a quality assurance process in place. People who used the service, relatives and staff were regularly consulted about the quality of the service through meetings and surveys.

The service exceeded in supporting people to reminisce by completing workbooks called 'remembering together' when they first arrive at the service.

The service was exceptionally skilled in helping people and their families explore and record their wishes about care at the end of their life.

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 remains Good.	Good ●
Is the service effective? The service remains Good.	Good ●
Is the service caring? The service remains Good.	Good ●
Is the service responsive? The service has improved to Outstanding. The service used innovative activities to enhance people's lives. The service excelled in promoting community inclusion by supporting people to be involved in local politics. The service exceeded in supporting people to reminisce by completing workbooks called 'remembering together'. The service was exceptionally skilled in helping people and their families explore and record their wishes about care at the end of their life.	Outstanding ☆
Is the service well-led? The service remains Good.	Good ●

Appleton Lodge

Detailed findings

Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection was planned to check whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

We carried out an inspection at Appleton Lodge on 5 September 2018, the visit was unannounced. The inspection was undertaken by one adult social care inspector. It included visiting the service and speaking with people, visitors, the registered manager and staff.

Before this inspection, we reviewed notifications that we had received from and about the service. A notification is information about important events which the provider is required to tell us about by law. We reviewed the Provider Information Record (PIR) before the inspection. This is a form that asks the provider to give some key information about the service, and tells us what the service does well and the improvements they plan to make. We used this information to help plan the inspection. We also checked with the local authority commissioning and safeguarding teams. They informed us that they did not have any concerns about Appleton Lodge and were satisfied with the level of care provided.

During the inspection we spoke with two people who used the service and four visiting relatives. We also observed interactions between people and staff in communal areas of the home. We spoke with seven members of staff, including the registered manager, deputy manager, four care staff, the wellbeing coordinator and the maintenance man. We also spoke with a visiting healthcare professional.

We checked four people's care records which included pre-admission assessments, care plans and risk assessments. We reviewed documents relating to the assessment of mental capacity and Deprivation of Liberty Safeguards (DoLS). We checked the management and administration of people's medicines. We looked at recruitment records for three staff, staff training and supervision records, complaints, accident and incident records, maintenance records and reviewed the provider's quality assurance systems.

Is the service safe?

Our findings

Staff ensured the service was safe by asking us to present our identification on arrival and asking us to sign into the visitor's book. The entrance to the home was secure, visitors were granted access by a member of staff.

People were protected from harm by trained staff who knew how to keep people safe and knew what action to take if they suspected abuse was happening. Potential risks to people had been identified and assessed appropriately. We saw that safeguarding was discussed in staff supervision and at team meetings. A policy was in place that staff could refer to if they needed to report an incident. A staff member told us, "If I had any concerns at all I would pass them on to [named registered manager]."

The service had a whistleblowing policy so if staff had concerns they could report these and be confident of their concerns being listened to. Any concerns had been robustly investigated by the registered manager.

Risks were managed so that people were protected. Accidents and incidents were recorded and reported promptly to the managers by staff. The manager would then investigate the accident or incident, take any further necessary action and record the information. We saw that any incidents were discussed on a daily basis at each staff handover. Risk assessments were reviewed regularly. The risk assessments we saw put the least restrictive measures in place possible to keep people safe. We looked at four care records and found that they were regularly reviewed and stored securely, whilst being accessible to staff. This meant that the service looked at ways to minimise any risks to enable people to live their lives in a safe way with the least possible impact.

The environment was very clean and the local authority had awarded the home 98% in a recent infection control audit. The service felt very homely. There were systems in place to ensure the prevention and control of infection was managed within the home. We saw that staff wore personal protective equipment such as aprons and gloves to prevent the spread of infection. A professional told us the home was always clean when they visited. We saw that monthly infection control and necessary repairs audits were undertaken to identify any areas for improvement.

We looked at the equipment and facilities at the service and found that the environment was safe for the people who lived and worked there. The water supply was tested regularly to prevent legionella, and safety checks were carried out on the supply of gas and electricity and firefighting equipment.

The building was well maintained and we saw that health and safety checks had been carried out in line with the policy. Staff had been trained in fire safety. Each person had a personal emergency evacuation plan (PEEP). PEEPs set out the specific requirements that each person had, such as staff support or specialist equipment, so they could be evacuated safely in the event of a fire. Fire drills took place on a regular basis so all staff had practical knowledge of knowing what to do in the event of an emergency. A fire safety risk assessment was in place. These safety checks meant that people were kept safe in the event of an emergency.

We observed the lunch time medicine round and saw that people received their medicines safely. We looked at the medication policy and the systems within the home for ordering, administering, storing and disposing of medicines. Senior care staff administered medicines but all staff had been trained in all aspects of medication. Medicines were stored safely in a locked cupboard. Fridge temperatures were taken daily to ensure they were within the manufacturers' recommended temperature range.

The provider had an effective recruitment and selection procedure in place and carried out relevant checks when they employed staff.

There were sufficient staff rostered to provide people's care safely. People told us they did not have to wait long if they needed help. All the relatives with spoke with told us they can always find a member of staff if they need to speak to someone. One relative commented, "There is always a member of staff around to speak to, or someone in the office."

Is the service effective?

Our findings

We saw that the environment was accessible for wheelchair use which enabled people to access all areas of the home freely. There was a passenger lift so people could access the second floor. The home was clean, spacious and uncluttered. Relatives told us they were made to feel welcome, one relative told us, "It's as close to home as you can get, we can make drinks when we like and there are plenty of places to sit when we visit so we can have some privacy."

People said they felt supported by staff understood their needs. One person said, "The carers are wonderful, they always know what to do and take the time to go round and ask each of us how we are every day." People looked comfortable and at ease with staff, and each other.

Some people living at the home were able to make decisions about their own care and support. Where decisions were made on behalf of people who were unable to give their consent, mental capacity assessments had been carried out in accordance with the Mental Capacity Act 2005 (MCA). The MCA provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

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

We checked whether the service was working within the principles of the MCA and whether any conditions on authorisations to deprive a person of their liberty were being met. Applications for DoLS were made where appropriate. Staff were trained in the MCA and had a good awareness of the legislation. We saw staff asked for consent before providing care.

All staff we spoke with told us they were provided with training that enabled them to do their job and meet people's needs. Staff training records showed us that mandatory training was update regularly. Staff had six supervision sessions with a manager each year where they were supported on an individual basis.

People told us they liked the food and that there was a choice. People's nutritional needs were assessed. There was a wide range of options, people were asked what they wanted to eat daily. The cook had worked at Appleton Lodge for several years and knew people well, ensuring people with dietary needs received the correct meals. Fresh fruit and vegetables were provided. Snacks were made available day and night.

The provider and staff liaised effectively with health care services. A visiting health and social care professional told us, "I have every confidence in the staff here to deliver good quality care, I have no concerns."

Regular team meetings were held and staff contributed to the agenda. We looked at the minutes from the meetings and saw that the teams discussed; safeguarding and whistleblowing procedures and staff training, alongside more practical issues such as, the dining experience and service improvements.

Handover meetings were held daily as staff crossed over at the start and finish of their shifts. We saw that staff shared valuable information and recorded what was discussed, to ensure optimal communication and consistent support for those living at the service.

The Accessible Information Standard (AIS) was introduced by the government in 2016 to make sure that people with a disability or sensory loss are given information in a way they can understand. We found the provider was meeting this requirement by identifying, recording and sharing the information and communication needs of people who used the service with carers and staff, where those needs related to a disability, impairment or sensory loss; this meant staff understood how to best communicate with people. People could receive information in formats they could understand such as in easy read or large print and the service could provide information in other languages if required.

Is the service caring?

Our findings

People and their relatives commented on the kindness and compassion of the staff. For example, when we asked one person if they got on well with the staff they replied, "They really are gems." A relative told us, "They care so much here. We looked at many other homes before deciding on Appleton Lodge, it was the best decision we ever made." Another relative said the staff provided companionship for their family member living at the home because they spent time in their bedroom, "Staff sit with [name] and check on them regularly so they don't feel as isolated."

The staff team were recognised for their caring culture. Appleton Lodge was awarded a 'Whole team Kindness in Care' award from the chair of the provider service to reward staff for their hard work and dedication.

Staff were aware of the need to treat people equally irrespective of age or disability or race. Staff had attended training in equality, diversity and inclusion.

We observed staff speaking to people kindly and with respect. Staff knocked on people's bedroom doors and waited for a response before entering, which promoted people's privacy. Staff told us they knocked on bedroom doors prior to entering and waited to be invited in.

The managers and staff ensured special occasions and birthdays were celebrated. For example, a party had been arranged recently for a person's birthday, relatives were invited to Appleton Lodge, the chef had made a cake and an entertainer had been booked for the occasion.

A relative said they were always made welcome, "They are always very warm and welcoming when I visit." We saw staff welcome visitors into the home. We saw visitors come and go as they liked.

We saw people were well presented and dressed appropriately for the weather and looked well cared for. This showed that staff were attentive to people's needs and preferences.

Bedrooms were individually decorated and contained people's own personal possessions such as family photographs. Some people chose to spend time in their rooms, but were invited to join any events that were happening. One person commented, "I spend most of the day in my room, they do invite me to join in activities and check on me, but I like my routine."

We saw that staff knew people well. People's known communication methods were used to determine what it was people wanted but we also saw that where people did not communicate verbally staff appeared to know what the person wanted or waited for a response from the person to see their reaction. We saw a care plan that explained that staff should observe body language and other cues to determine a person's mood. This helped ensure that people received the care they required.

All the records we asked to look at were stored securely. Staff received training in information management

and confidentiality which ensured information would only be shared with people who needed to know people's personal details.

Is the service responsive?

Our findings

At the last comprehensive inspection, we found the service was responsive and awarded a rating of good. At this inspection we found the service continued to be responsive and had improved to outstanding.

People living at the service and their relatives told us staff had outstanding skills and had an excellent understanding of people's life history. People were enabled to reminisce by completing workbooks called 'remembering together' when they first arrive at the service. This information was included in people's care plans to give them depth and make them person centred. The registered manager told us, "One person was a codebreaker during World War II so we contacted Bletchley Park and asked them if there was anything we could do to commemorate the person on their birthday. As a result the person was added to the honour role of the veterans of Bletchley park and was awarded with a commemorative badge. We held a birthday party for the person, their family and other residents and the person had a lovely day. The team went to a lot of effort to mark this special day."

We found people at the service received individualised care from a staff team who showed an exceptional knowledge of their needs. People were supported extensively by a 'key worker' who ensured that their choices were respected and they were actively encouraged to contribute to their own care planning. People's care was centred on achieving the best life possible for them. For example, people living with dementia had walking frames that were decorated with items and colours that were meaningful to them. This meant they were more likely to identify their own frame and be inclined to use it, reducing the risk of falls.

Care plans were reviewed monthly and as people's needs changed to make sure people received the support they required. Care plans and risk assessments for each person were highly detailed and person centred. They provided staff with a comprehensive summary about the person they were supporting including information about their, family history, likes and dislikes and information about their hobbies and interests. The care records also showed specific attention to detail regarding personal care such as, oral health care and people's preferred routines. This enabled staff to deliver highly effective person centred care. People said they were involved in decisions about their care which were included in the care records.

The service demonstrated recognition each service user as an individual and explored each person's self-defined strengths, preferences, aspirations and needs are the basis on which to provide care and support to help them live an independent life. We found that the service effectively implemented these values and some people had made wish list of activities they would like to do which the service had arranged. This work reflects the expectations within the National Institute for Health and Care Excellence (NICE) guidance entitled 'people's experience in adult social care services: improving the experience of care and support for people using adult social care services.' The guideline covers social care received at home, residential care and community care and aims to support people to make decisions about their care and to encourage providers to improve the quality of their services. For example, one person had shared with staff that they had always wanted to sit on a fire engine so the service arranged for the local fire brigade to visit and surprise the person. The registered manager told us, [Name of person] got to sit in the fire engine and wear a

helmet. They were overwhelmed with the gesture and it brought a tear to my eye certainly."

We saw many examples of meaningful interactions between people and staff which promoted their interests. For example, one person reached the important milestone of their 100th birthday and had been interested in astronomy all their life. The care team presented the person with a certificate and map of a star that had been named after them. The person had received a letter and card from the queen and commented, "I felt like a queen myself that day." Staff also explored people's hopes and ambitions.

The service demonstrated a dedication to meaningful activity, social stimulation and maintaining people's family contact and friendships. Many examples of this were shared with us. Residents took part in an Easter project, overseeing the hatching and after care of ten real chicks. A staff member told us, "Pet therapy is proven in recent research to uplift resident's moods and provide engagement and a sense of familiarity." One person told us that the experience took them back to their childhood days and gave them something to look forward to each day.

There was an activities programme which included quizzes, crafts, film afternoons, and musical entertainment. People confirmed they enjoyed the activities on offer. On the day of the inspection, people played bingo in the morning and took part in a lively quiz during the afternoon. The wellbeing coordinator told us, "I try to spend time with everyone and sometimes do activities on a one to one basis in people's bedrooms. We often change the routine and do something different so people don't get bored. It's all about exploring what people want to try out." Residents at Appleton Lodge had recently been to watch a film at the local cinema. The home had a minibus to use for excursions and had visited the seaside earlier in the year.

The service held special birthday celebrations for people at the service, inviting family and friends, arranging musical entertainment and providing a home baked and beautifully decorated birthday cake. We saw photographs of the residents enjoying various parties that had been held to celebrate events like the royal wedding and the world cup.

Staff supported people to use technology to enrich their daily lives and maintain family contact. Appleton Lodge provided a computer and WiFi access which enabled people to use the internet. One person told us they used Skype to keep in touch with a relative living overseas which helped them feel connected to their loved ones despite the distance between them and gave them an event to look forward to each week.

People were encouraged to be connected to the local community and play an integral part within it. We saw photographs of various events that had involved people at Appleton Lodge which demonstrated that Staff were committed to protecting people from the risks of social isolation and promoting the service's engagement with the local community. For example, people were encouraged to engage in local politics and had received a visit from a local MP which gave people the opportunity to ask questions and talk about their experiences of Stockport in their younger years. The service also encouraged contact across the generations by inviting schools to Appleton Lodge and spend time with the residents. One person told us, "It's lovely having the children in, they sing for us and it's an event I look forward to." Children from local schools performed Christmas carols and incorporated the home into their harvest festival. People told us that this marked the start of the festive season and helped them linked to the local area. The registered manager told us that the local school children who visited also benefited from the experience and spent time chatting to residents about years gone by.

Staff were committed to the wellbeing of each and every person at Appleton Lodge, seeking ways to actively involve residents in day to day life. For example, staff provided one person with a badge that improved their

wellbeing. The registered manager told us, "[Name] wanted to be part of the team so the staff ordered them 'conversation starter' badge and they wear this with pride every day." This enabled the person to be included and involved in activities that were important to them.

A complaints policy was provided to people in a format that met their needs. People told us they had no complaints to raise. Complaints received were investigated and resolved. This information was used to enhance the service provided.

We saw that the service carried out continuous customer satisfaction surveys having a tablet in the lobby of the home for visitors and residents to use to improve the quality of the service. One relative said, "We are asked to complete surveys regularly, but they are so approachable here I would rather just speak to the staff or management." Feedback received by the service was overwhelmingly positive. The registered manager explained that the service uses the results of the surveys to improve quality and identify any problems.

The service had received many other compliments from relatives that supported the rating of outstanding by way of positive feedback and used the feedback to further promote the quality of the service. Feedback clearly demonstrated the high satisfaction levels of people using the service, their friends and families. We also saw evidence that health and social care professionals had fed back to the service regarding the high standard of end of life provision and the competence, professionalism and commitment of the staff.

The service was skilled in helping people and those important to them explore and record their wishes about care at the end of their life. The registered manager told us, "We take a holistic approach and look at spiritual needs as well as physical and emotional needs. This includes ensuring the residents have music of their choice playing and their favourite flowers in the room. We are part of the 'six steps end of life' programme and have been working towards our accreditation for the last two years. We sourced "therapy huskies" who visited the home and spent quality time and cuddled with the residents. The huskies were specially trained to work with residents who are cared for palliatively. People responded very well to the experience." People and their relatives told us that the staff and manager at the home supported them with sensitivity and went 'above and beyond' in providing care at the time it was most needed focusing on developing the required skills and competence to ensure that people and their families were supported at a high standard at this crucial time.

Is the service well-led?

Our findings

The service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The manager at Appleton Lodge was registered in November 2015.

Staff met with the registered manager if they required support or to discuss important issues. There were handovers between shifts so information about people's care could be shared, and consistency of care practice could be maintained.

We saw the governance of the service was well embedded. There were clear roles and responsibilities which staff understood. Information had been recorded, reviewed and any improvements implemented to improve the quality of the service. The service had been able to capture information by keeping clear documentation and evidencing consistent and clear quality assurance of systems to identify any areas of concern so they could be addressed effectively.

The law requires that providers of care services send notifications of changes, events or incidents that occur within their services to the Care Quality Commission. The registered manager had met their legal requirements to the CQC including submitting relevant notifications and other information.

From 1 April 2015 it has been a legal requirement of all services that have been inspected by the CQC and awarded a rating to display the rating at the premises and on the service's website, if they have one. Ratings must be displayed legibly and conspicuously to enable the public and people who use the service to see them. During this inspection we saw that the rating from our last inspection was clearly displayed in the reception area and was also on the service website.

The service had a positive and inclusive culture. People said they felt "welcome." The management team encouraged feedback, led by example and were accessible to both people using the service and staff. The home was transparent and open with effective communication in place and information about the service was accessible. People living, working and visiting the service confirmed this in their feedback.

The service promote engagement with the community. The registered manager told us, "Pupils from the local high school visited the home for the day to spend quality time with the residents and then returned with a donated hamper for the resident's raffle at Christmas. The local primary School also visits regularly throughout the year with their school choir and performs well-known songs for a sing-a-long. The wellbeing coordinator and care team arrange the visits regularly to ensure the residents remain involved and engaged in the local community."

The management team were held in high regard by people living at the home, relatives and staff. One member of staff told us, "The managers are great, whether it's a work matter, or a private matter they always

listen and try to help out." The service awarded staff with a monthly 'kindness in care award' to thank them for their outstanding practice. Staff told us that they felt valued by the organisation.

The registered manager told us, "I like to keep up to date with the regulations and training requirements for our home. I recently attended the 'leadership for safety and quality for registered care home managers' programme across three days in Stockport. I attended the three-day session whereby management strategies were looked at and applied to the care sector and the controversial and common themes we face every day. It was an interactive course where I worked alongside professionals both in and out of area, other managers and the quality teams. This training programme provided me with some practical tips and shared good practice around the safe running of a care home. This showed a managerial commitment to ongoing improvement."

The management team at Appleton Lodge held monthly meetings within the home to analyse any falls that have occurred. The team explored trends in times, locations, lighting, environmental issues, physical health issues, medicine side effects order to pro-actively reduce the number of falls at the service. The registered manager told us, "Since completing the monthly falls trend analysis I have found that the number of falls has reduced. I feel that good governance has helped reduce falls across the home. This improved the quality of life for our residents by putting measures into place to help reduce the risk of falls."

The registered manager told us, "I share good practice by attending the bi-monthly care home forums at our local GP surgery to discuss pertinent issues/themes or upcoming schemes within Stockport. This includes DNACPR processes, the pilot of the red bag scheme, reporting of safeguarding incidents and the introduction of the 'pathfinder' service. I have a very good working relationship with the GP practice and have a named GP for the home whom we can contact with any concerns. This provides continuity and a safety of working where the GP knows the residents and their histories, which builds empathetic 'patient' relationships. We have regular six monthly reviews of our residents and their needs to ensure their physical health is optimum."

The service promoted a positive and inclusive culture. People said they felt "welcome." The management team encouraged feedback, led by example and were accessible to both people using the service and staff. The registered manager told us, "We feel feedback is the key to improving practice. We seek feedback from our residents, relatives and visitors continuously. We have a "have your say" feedback tablet in the main entrance and ask visitors to complete a short survey when they visit. We complete annual surveys for staff, residents and relatives. We then review the feedback, complete any actions, and put any improvements into action. We then update staff, residents and relatives at our meetings. We also encourage all our visitors to complete Carehome.co.uk. We saw that feedback received relating to the service was overwhelmingly positive.

The home was transparent and open with effective communication in place and information about the service was accessible. People living, working and visiting the service confirmed this by providing Appleton Lodge with excellent feedback.

We looked at some key policies and procedures including, for example, infection control, health and safety, complaints, medicines administration, safeguarding, whistle blowing and reporting falls. We saw the policies and procedures were updated and available for staff to follow good practice. For example, Incidents and accidents were investigated accordingly and learning had taken place to avoid a recurrence.

We saw spot checks and direct observations were carried out with staff to ensure that standards of care were maintained. Any action taken regarding staff performance issues was also recorded. One staff member

said, "We all get regular observations of practice to test if we are competent as well as spot checks and observations of medicines administration."

We saw that records at the service were kept securely and could be located when needed. This meant only care and management staff had access to them ensuring people's confidentiality.

During the inspection we found the service was managed by professionals with an obvious dedication to the people they support and the staff that work with them.