

Forest Health Care Limited

# Pinehurst Care Centre

## Inspection report

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## Ratings

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

# Summary of findings

## Overall summary

Pinehurst Care Centre is a care home without nursing providing accommodation and personal care to up to 50 older people. Accommodation is located in three units which are spread over two separate buildings. At the time of this inspection there were 31 people living at the service.

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

Processes to deal with risks to people's personal safety had been improved. Care plans showed risk assessments were monitored and kept up to date and plans were in place to minimise identified risks. Improvements had been made so that medicines were handled correctly and safely. People were protected from the risks of abuse and said they felt safe with the staff providing their support and care. Staff recruitment and staffing levels supported people to stay safe.

Staff training had been improved and people received care and support from staff who were well trained and knew them well. People received effective health care and support. People's rights to make their own decisions were protected. They were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People benefitted from staff who were happy in their work and felt well managed and supported. Governance systems had been improved and the provider was able to ensure and demonstrate their compliance with their legal obligations. The service had an open and inclusive culture and encouraged suggestions and ideas for improvement from people who use the service, their relatives and staff. The quality assurance systems were successful in ensuring the quality of the service was maintained.

People were treated with care and kindness. They were consulted about their care and support and could change how things were done if they wanted to. People were treated with respect and their dignity was upheld. This was confirmed by people and relatives who provided feedback. People's diverse needs were identified and met and their right to confidentiality was protected.

People received support that was individualised to their personal preferences and needs. They were able to enjoy a number of activities, based on their likes and preferences. People said staff and management responded well to any concerns they raised.

For more information, please read the detailed findings section of this report. If you are reading this as a separate summary, the full report can be found on the Care Quality Commission (CQC) website at [www.cqc.org.uk](http://www.cqc.org.uk).

Rating at last inspection and update

The last rating for this service was requires improvement (published 18 April 2019).

At our last inspection we found breaches of the regulations in relation to the safe handling of medicines, risk handling and mitigation and governance of the service. The provider completed an action plan to tell us what they would do and by when to improve.

At this inspection we found the provider had made improvements and was no longer in breach of regulations.

Why we inspected

This was a planned inspection based on the previous rating.

What happens next?

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.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

The service was safe.

Details are in our safe findings below.

Good 

### Is the service effective?

The service was effective.

Details are in our effective findings below.

Good 

### Is the service caring?

The service was caring.

Details are in our caring findings below.

Good 

### Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good 

### Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good 

# Pinehurst Care Centre

## Detailed findings

### Background to this inspection

#### Inspection team

The inspection was carried out by one inspector, one specialist nurse advisor and one 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

Pinehurst Care Centre is a 'care home'. People in care homes receive accommodation and nursing or personal care as a single package under one contractual agreement. The Care Quality Commission (CQC) regulates both the premises and the care provided, and we looked at both during this inspection.

The service had a manager registered with the Care Quality Commission. Registered managers and providers have legal responsibilities for how they run the service and for the quality and safety of the care provided.

#### Notice of inspection

This inspection was unannounced.

#### What we did before the inspection

We reviewed information we had received about the service since the last inspection. We did not ask the provider to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information we require providers to send us annually following their first inspection to give us some key information about the service, what the service does well and improvements they plan to make. We took this into account when we inspected the service and made the judgements in this report. We used all of this information to plan our inspection.

#### During the inspection

We spoke with 11 people who use the service and two visiting relatives about their experience of the care provided. We spoke with the registered manager, the deputy manager and the administrator. We also spoke with nine care staff, one domestic staff, an activity coordinator, a chef and the maintenance person.

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

After the inspection

We continued to seek clarification from the provider to validate evidence found. We sought feedback from seven local authority and health and social care professionals who work with the service and received replies from five.

# Is the service safe?

## Our findings

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

At our last inspection we rated this key question requires improvement. At this inspection we have rated this key question good. This meant people were safe and protected from avoidable harm.

### Using medicines safely

At our last inspection the provider had failed to ensure the safe and proper handling and recording of medicines. At this inspection we found the provider had made improvements and this was no longer a concern.

- In order to address concerns raised at our last inspection, an audit process had been introduced to ensure medicines were given as prescribed and that details of medicines administered were accurately recorded. The signatures were checked on an audit after each medicine round and there was a final check at the end of the day to prevent missed doses. We saw the audit system was successful and actions were taken if any errors were identified.
- There were robust processes in place and followed by staff, for ordering, storing, administering and disposing of medicines including controlled drugs.
- People's medicines were stored and handled safely. Only staff trained in administering medicines and assessed as competent were allowed to do so.
- We saw staff followed their training and current best practice guidelines when administering medicines.
- Medicines administration record sheets were up to date and had been completed by the staff administering the medicines.

### Assessing and managing risks

At our last inspection the provider had failed to ensure mobility and falls risk assessments were reviewed and updated following an incident. At this inspection we found the provider had made improvements and this was no longer a concern.

- People were protected from risks associated with their health and care provision. Staff assessed risks such as moving and handling, and care plans incorporated measures to reduce or prevent potential risks to individuals.
- Following our last inspection the service worked hard to improve their management of risks and the documentation and maintenance of risk assessments. In the care plans there were a number of risk assessments in place related to people's health and welfare. These included nutritional risk assessments, assessments of the risks of skin breakdown and falls. Risk assessments were up to date and had been reviewed and amended when needed. An effective audit system to ensure the accuracy of risk assessments had also been introduced.
- Professionals thought the service and risks to individuals were managed so that people were protected.

One professional told us, "I am happy that the service manages risk to individuals proactively according to the needs of each [person]. I think the level of personal knowledge of the residents is good and this helps to manage risks safely."

#### Staffing; Recruitment

- People told us staff were available when they needed them and had time to support them without rushing. Relatives also felt staff were available when needed. Staff told us there were usually enough staff at all times to enable them to do their job safely and efficiently.
- Professionals thought the service made sure there were sufficient numbers of suitable staff to keep people safe and meet their needs. One professional commented, "I believe that having sufficient staff to keep the residents safe and to meet their needs is a priority at Pinehurst."
- People were protected by the recruitment processes in place and followed at the service. These made sure, as far as possible, that people were protected from staff being employed who were not suitable.
- Staff files included most, but not all, of the required recruitment information. For example, in two recruitment files the employment histories had gaps which had not been explained in writing as required. In another file, evidence of conduct at a previous employment working with children had not been obtained.
- The registered manager obtained the missing information promptly after the inspection. The registered manager explained that, going forward, they would make sure they checked that all required recruitment information was obtained before new staff were rostered to work with people living at the service.

#### Safeguarding people from the risk from abuse; Learning lessons when things go wrong

- People said they felt safe living at the service. One person, when asked if they felt safe, commented, "Very safe, yes" and another said, "Yes, definitely, because there is always someone around".
- Relatives felt their family members were safe at the service. One relative told us, "Mum is always happy. I always have the peace of mind that she is well looked after when I leave."
- Staff knew how to recognise and protect people from the risk of abuse and had received training in safeguarding adults. They knew what actions to take if they felt people were at risk of harm.
- Procedures were in place to ensure any incidents or accidents were recorded, together with details of actions taken and the outcome of any investigation. Steps were then taken to ensure lessons could be learnt when things went wrong. Records showed the procedures were followed.

#### Ensuring equipment and premises are safe; Preventing and controlling infection including the cleanliness of premises

- Emergency plans were in place and staff were aware of their content. For example, there were emergency procedures in case of fire. The provider company had also developed and circulated, to all of their homes, a Covid-19 contingency plan. We saw the measures had been introduced at the home and the plan was in line with the latest government guidelines on the action providers should take. Appropriate equipment and instructions to staff, visitors and people living at the service were apparent throughout the service.
- Environmental risks to the safety of people, staff and visitors had been assessed and actions had been taken to minimise those risks. Safety checks of the premises were carried out regularly. For example, hot water temperature checks, fire safety checks and fire equipment checks. During our observations we saw staff were aware of the risk reduction measures in place and were carrying out activities in a way that protected people from harm.
- Health and safety risk assessments had been carried out, such as for fire and legionella control. We saw that any recommendations had been acted upon to ensure identified risks were removed or reduced. Staff training for managers and maintenance staff in the management of legionella and the servicing of temperature monitoring valves was scheduled to take place the week after our inspection.
- The premises were clean and tidy. Staff had been trained in infection control and we saw they put their

training into practise when working with people who use the service.

# Is the service effective?

## Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At our last inspection we rated this key question requires improvement. At this inspection we have rated this key question good. This meant people's outcomes were consistently good, and people's feedback confirmed this.

### Staff support, training, skills and experience

At our last inspection the provider had failed to ensure that staff training was up to date. At this inspection we found the provider had made improvements and this was no longer a concern.

- People received care from staff that had the necessary knowledge, skills and experience to perform their roles. People and their relatives thought staff had the training and skills they needed when supporting them.
- The service provided training in topics they considered mandatory, such as moving and handling, first aid and fire safety. All training the provider considered to be mandatory was up to date or plans were in place for training that was due to be updated.
- Staff received additional training in specialist areas relevant to the needs of individual people, such as training in caring for people living with dementia.
- Staff felt they received the training they needed to enable them to meet people's needs, choices and preferences.
- Professionals felt people received effective care, from staff who had the knowledge and skills they needed to carry out their roles and responsibilities. Comments from professionals included, "The staff I have worked with seem keen to learn and I know that management organises appropriate training for staff. I find staff knowledgeable about the residents and are aware of managing risk in various situations", and "[The registered manager] and her team have worked on their documentation and have progressed with their training. Staff are keen to progress and we have no concerns on the support and skills of the staff".
- Staff received formal supervision every two to three months to discuss their work and how they felt about it. Staff felt this enhanced their skills. Once a year staff had a formal appraisal of their performance over the previous 12 months.

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

- People received effective care and support from staff who knew how they liked things done.
- Each care plan was based on a full assessment, included individual preferences and choices, and demonstrated the person had been involved in drawing up their plan.
- The care plans and actions were based on current best practice and showed the registered manager and staff had a good understanding of each person's individual needs.
- Staff demonstrated the necessary skills to meet the care as set out in the care plans in a professional manner. For example, in the management and prevention of pressure ulcers. Staff were aware of the skin care needs of individuals and were able to explain what measures were in place to reduce the risk of skin

breakdown.

- The care plans were kept under review and amended when changes occurred or if new information came to light.
- The registered manager and deputy manager were aware of the latest best practice guidance on oral care. Oral care and associated risk assessments were included in each care plan. Staff confirmed they had received training in providing oral care.

Meeting people's needs and preferences in relation to eating and drinking

- People told us they enjoyed the food at the service and could always choose something different on the day if they did not like what was planned. One person explained, "The food is very good. We get a choice. I like salads, they'll always produce a salad for me if I do not like the choice [of meals]." Drinks and snacks were available on each unit and were easily accessible.
- Where people were at risk of dehydration this was reflected in their care plan and records were kept of the person's fluid intake.
- People were weighed monthly or more often if their weight indicated a concern. Referrals were made to the GP where there was a concern that someone was losing weight or was putting on too much weight. We saw staff always made sure foods were available to meet people's diverse and cultural needs and preferences.
- At lunch time on both days of our inspection, some people chose to eat in the dining room and some chose to eat in other areas or their bedrooms. They were offered choices of food and drink from the options available. There were enough staff to ensure all people received the support they needed with their meal.

Supporting people to live healthier lives and access healthcare services and support; Working together and with other organisations to provide effective and coordinated care

- People received effective health care support from their GP and via GP referrals for other professional services, such as community mental health teams. We saw a comment left on a national care home review site from a relative who wrote, "My mother has lived at Pinehurst for almost [number] years. She is professionally cared for with respect and kindness, and the staff are most attentive to her health needs."
- The care plans incorporated advice from professionals when received. Professionals felt the service supported people to maintain good health, have access to healthcare services and receive ongoing healthcare support. One professional told us, "Staff have always responded well to the introduction of health guidelines. Most recently we have changed the way in which we deal with suspected urinary tract infections (UTI) to come in line with national guidance. This has been handled efficiently and well by all staff and has reduced the instance of antibiotic prescribing for UTI. (appropriately)."
- Staff worked well with other agencies to understand and meet people's individual and changing needs. One professional told us the service worked well with local agencies and added, "Especially the community mental health team, the memory service and district nurses." Another professional commented, "I have a very good working relationship with the service. We work well to support each other, exchanging and sharing information to best support the residents with their health requirements."

Adapting the design and decoration of the premises to meet people's needs

- Work was underway redecorating all areas of the service. At the time of our inspection the registered manager was planning the work for one unit where all people were living with dementia. The registered manager was aware of the latest best practice guidance on dementia friendly environments. She planned to assess and implement, where possible, dementia friendly adaptations and aids to enable people to be as independent as possible and maintain the skills they had as long as they could.

Consent to care and treatment

- The service was meeting the requirements of the Mental Capacity Act 2005 (MCA). The MCA is a law designed to protect people who are unable to make decisions about their own care and support.
- The service was providing care that could deprive people of their liberty. They had followed the correct processes to ensure people were only deprived of their liberty when this was in their best interests and authorised under the Deprivation of Liberty Safeguards (DoLS). DoLS provides legal protection for people in hospitals or care homes who are unable to make decisions about their own care and support and who need to be deprived of their liberty in their best interests.
- Staff received training in the MCA and were clear on how it should be reflected in their day-to-day work.
- People's rights to make their own decisions were protected. The records seen demonstrated that people were involved in making decisions regarding their care and support as well as their everyday life.
- People confirmed, and we observed, staff asked people for their permission before any support or care was carried out.

# Is the service caring?

## Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Treating people with kindness, respect and compassion

- People said, and we observed, they were treated with care and kindness. One person told us, "They spoil me, whatever I want they give me. I love them all." Another person commented, "They know their job and are happy doing it."
- Relatives said staff were caring when they supported their family members and treated them with respect and dignity. One relative left a comment on a care home review site in February 2020 saying, "The results are amazing. In 2 years Mum has gone from barely existing to being a happy, cheerful (and cheeky) person due entirely to the loving care she has received. All of the staff do their paid jobs well, but they go out of their way to interact socially with the residents."
- Professionals thought the service was successful in developing positive, caring relationships with people. One told us, "I believe that the provider develops a positive caring relationship with the residents. The staff are respectful of the varying needs of the residents and of their different personalities."

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

- People's views on the support they received was regularly sought. People confirmed they were asked their opinion on how things were run at the service.
- The care plans were drawn up with people, using input from their relatives, health and social care professionals and from the staff teams' knowledge from working with them in the service.
- People's equality and diversity needs were identified and set out in their care plans. Staff provided support to meet the diverse needs of people using the service including those related to disability, gender, ethnicity and faith.

Respecting and promoting people's privacy, dignity and independence

- Rights to privacy and dignity were supported. All interactions observed between staff and people who live at the service were respectful and professional. Staff knocked on bedroom doors and waited for a response before entering. Professionals said the service promoted and respected people's privacy and dignity.
- People and their relatives said staff treated them with dignity and respect. We saw a comment posted on a care home review website by a relative in February 2020. They said, "In the years that my [family member] has been a resident of Pinehurst Care Centre, she has always been treated with dignity and respect. In recent years her dementia has deteriorated but this has not changed the standard of care provided by the staff at Pinehurst, even though her condition is much more challenging."
- People's care plans focused on what they could do and how staff could help them to maintain and increase their independence and protect their safety wherever possible. People's abilities were kept under

review and any change in independence was noted and investigated, with changes made to their care plan and support as necessary. People told us staff encouraged them to be as independent as they could be.

- People's right to confidentiality was protected. All personal records were kept locked away and not left in public areas of the home.

# Is the service responsive?

## Our findings

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

At our last inspection we rated this key question good. The rating for this key question has remained good. This meant people's needs were met through good organisation and delivery.

### Planning personalised care

- People received support that was individualised to their personal needs. People and relatives said staff knew how they liked things done. One relative told us, "The staff are excellent, they are empathetic, they treat every resident as an individual." Another relative told us, "[Family member] is always immaculate, wearing jewellery, which is really important to her."
- Professionals thought the service provided personalised care that was responsive to people's needs. Comments received from professionals included, "I feel that the residents are treated as individuals, each with their own personality and individual needs. I find this personalised care and genuine interest in the residents creates a very warm family feel" and "I have seen residents responded to as individuals in such a way that it is easy to tell that the staff know the residents very well."
- People's care plans were based on a full assessment, with information gathered from the person and others who knew them well. The assessments and care plans captured details of people's abilities and wishes regarding their personal and future care.
- People's needs and care plans were regularly assessed for any changes. People's changing needs were monitored, and their care plan was adjusted to meet those needs if necessary.
- Staff displayed a good knowledge of people they were working with and were able to tell us what different individuals preferred and liked to do. We saw a number of occasions where staff quickly recognised where someone was becoming anxious and successfully intervened to help the person. For example, one person was in a corridor and looking lost and confused. By speaking in a quiet, calm and reassuring way the staff member found out what was worrying the person and helped them to get to where they wanted to be.

### Meeting people's communication needs

- The service was meeting the requirements of the Accessible Information Standard (AIS). The AIS tells organisations what they have to do to help ensure people with a disability or sensory loss get information in a way they can understand it. It also says that people should get the support they need in relation to communication.
- The service identified people's information and communication needs by assessing them and recording this in their care plans. Staff were aware of the communication needs of people living at the service and we saw them using this knowledge with individuals successfully.

### Supporting people to develop and maintain relationships and to avoid social isolation

- People were supported to maintain contact with people important to them. Visitors and relatives were welcomed. One relative commented, "Mum joins in and likes doing the activities. I have joined in myself sometimes, everybody is welcome!"
- One relative commented on a care home review website in November 2019, "I call in frequently and have

found the staff consistently warm, friendly and welcoming. All residents are treated with care... and [they] generally try to create as normal a home/family situation as possible." On the same website a relative left a comment in February 2020 saying, "When I go into see my mother, I am always greeted with happy smiles from all the staff and I am always asked if I would like a drink. My mum has been a resident for [number] years and has been very well cared for. The activities are very good and I enjoy joining in with my mum."

Support to follow interests and take part in activities that are socially and culturally relevant

- People had access to activities that took into account their individual interests and links with different communities. Activities inside the service included, crafts, jigsaws, music, singing and games. The activity coordinator spent one to one time with people in their rooms where they were not able to participate in activities in the lounges.
- The activities coordinator explained how they were working on developing the activities at the service and also explained the current activity provision and how they involved the local community. They told us, "We have contacts with the local schools and children visit regularly. We recently had world book day and the children sat with the residents. Some residents felt like they were helping the children to read and there was a comment from a relative on the Facebook page that her relative felt she was really helping and contributing towards the children reading. One of the residents recently gave a talk to the children about Remembrance Day. They really enjoyed it and he told a great story. We are currently planning a Victory in Europe day party and we will be asking this particular resident if they can help us to plan it, we will invite the local children."
- Relatives made a point of commenting on the activity provision at the service. Comments on a care home review website included, "I am particularly impressed with the quality of the activities and entertainment provided for the residents" and "The activities are frequent and perfectly appropriate for the residents, and there is a social media page for closed group members where we can see the activities that have taken place".
- One relative in particular was very complimentary saying, "My Dad has been living at Pinehurst for nearly two years and every day he is cheerful, happy and enjoying the various activities that are organised, from chats, exotic animals visiting and days out, to Zumba, Pilates and singing. He loves to sing and play his keyboard; every day there is an opportunity to use his voice, from organised events to impromptu singing with the staff."

Improving the quality of care in response to complaints or concerns

- People and relatives knew what to do and who they would talk to if they had any concerns. They were confident action would be taken if they did raise concerns with the staff or the registered manager.
- Staff were aware of the provider's complaints procedure and knew what to do if anyone raised a concern.
- There had been no complaints since the last inspection. Processes were in place to ensure any complaints would be looked into in line with the provider's policy and procedure. Complaints would be investigated and recorded, together with actions taken and the outcome.

End of life care and support

- At the time of our inspection there were no people receiving end of life care. People's preferences on end of life care and support were sought as part of the assessment process and recorded in their care plans. End of life care plans were developed and implemented when applicable and included all information and preferences needed for the person to have a peaceful and comfortable death.
- Staff received training in end of life care and the service was aware of the latest best practice guidance. Staff worked closely with the local district nurses, rapid response team and other local professionals to ensure people received the best palliative care possible. One professional told us, "Staff are very effective in the immediate end of life period when a resident has to be cared for in bed."

# Is the service well-led?

## Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At our last inspection we rated this key question requires improvement. At this inspection we have rated this key question good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Managing the quality of the service, meeting legal requirements and staff and managers being clear about their responsibilities

At our last inspection the provider had failed to establish an effective system to enable them to ensure compliance with their legal obligations and the regulations. The provider had also failed to establish an effective system to enable them to assess, monitor and improve the quality and safety of the service provided. This was a breach of regulation 17 (Good governance) of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014.

At this inspection we found the provider had made improvements and was now meeting this regulation.

- Since the last inspection there had been many changes which staff felt had improved the service. The registered manager, with support from the staff and the provider's regional team, had developed and worked through an action plan relating to areas of improvement needed at the service.
- An audit system had been introduced and operated effectively so that the registered manager was able to ensure the fundamental standards were being met.
- The registered manager was clear about their role. All the registration requirements were met and the registered manager knew what incidents required to be notified to the Care Quality Commission and made sure notifications were made when needed.
- Records were up to date and were kept confidential where required.

Acting with honesty and transparency if something goes wrong

- The service was meeting the requirements of the duty of candour. The duty of candour is a legal duty for providers to act openly and honestly, and to provide an apology if something goes wrong.
- The registered manager was clear in their understanding of the duty of candour and knew the action to take should something go wrong. The provider had a policy that set out the actions staff should take in situations where the duty of candour would apply.

Leadership vision, values and culture; Engaging and involving people using the service, the public and staff

- Staff told us they enjoyed working with people who use the service and were positive about the improvements made at the home since the last inspection. They felt they were provided with training that helped them provide care and support to a good standard.
- People received a service from staff who worked in an open and friendly culture. Staff said their managers

were accessible and approachable and dealt effectively with any concerns they raised.

- There were a number of different ways that the views of people, staff and professionals were sought and used in the monitoring and development of the service. For example, annual surveys of people and their relatives.
- There were three to four monthly staff meetings and residents and relative meetings every four to six months where views were sought on any proposed changes, as well as suggestions requested for any improvements.
- Staff confirmed they were asked for suggestions on how to improve the service and felt any suggestions they made were taken seriously. One staff member told us, "The team work and support of the [registered] manager is excellent."
- People and their relatives felt the service was well managed and that the management listened and acted on what they said. One relative commented on a care home review website, "Pinehurst is a very well-run home with excellent management and very caring lovely staff."

Continuous learning, innovation and improving the quality of care; Working in partnership with others

- There was an effective audit system in place that included audits of different aspects of the running of the service. The audits included care plans, medicines and the health and safety of people and the premises. Where issues were identified, actions were taken to ensure everything met the required standard.
- Professionals felt the service delivered good quality care and worked in partnership with them and other agencies. They felt the service demonstrated good management and leadership and one professional commented, "[The registered manager] leads by example and has now been a registered manager for many years. She encourages her deputy to develop and embrace her role fully. Training and communication are paramount for her and her staff."