

K&K Homecare Ltd

Right at Home Welwyn, Hatfield & St Albans

Inspection report

Kennelwood House
Kennelwood Lane
Hatfield
Hertfordshire
AL10 0LG

Tel: 01707682100
Website: www.rightathomeuk.com/hatfield

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

About the service: Right at home (RAH) Welwyn and Hatfield is a domiciliary (home care) care agency. It provides personal care to people living in their own homes in the community. At the time of the inspection seven people were being supported with a regulated activity of personal care.

People's experience of using this service: People told us they felt the care and support they received was excellent. They told us the staff provided care that was safe. Staff received training in safeguarding and they knew how to report their concerns to safeguarding authorities.

People told us they the staff were reliable, always came at the agreed times, and stayed for the duration of the visit. People told us they were contacted by the office staff if staff were running late. The registered manager told us they allocated travel time to ensure care staff had adequate time to travel to their next visit. Staff received regular training, relevant to their roles. The registered manager observed their practice to help ensure staff provided care that was in being with the company's core values.

People and relatives told us they were happy with the care provided by Right at home (RAH) Welwyn and Hatfield. We received consistently positive feedback.

They told us staff were exceptionally kind and caring, and regularly done things over and above what was expected of them. People`s dignity and privacy were promoted and respected.

People and their relatives were consistently complimentary about the care they received and how staff and management worked together to achieve the best outcomes for people. The service was exceptionally caring, kind and compassionate to the people it supported.

People were involved in the development and ongoing review of their care and support plans. Risks were assessed and measures put in place to help minimise or reduce the risk of harm.

People and their relatives told us the provider and registered manager were extremely supportive and listened to any feedback or concerns. Complaints were fully investigated and resolved to the satisfaction of the complainant. The service had received many compliments and positive feedback.

People told us the service was extremely flexible staff were responsive to their needs and were very inclusive making sure people received their care in a personalised way.

The provider and registered manager ensured they were up to date with any changes in legislation and that these were implemented into everyday good practice. Staff received regular updates and information through meetings and regular information sharing forums.

The provider and registered manager had robust quality monitoring systems and processes in place. Feedback was regularly sought to drive continuous improvement. The management were well supported by

the regional office staff.

Rating at last inspection: This was the first inspection of the service since they registered with the Care Quality Commission on 16 February 2018.

Why we inspected: This was a planned inspection.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If any concerning information is received, 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 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 ☆

Right at Home Welwyn, Hatfield & St Albans

Detailed findings

Background to this 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. This inspection was planned to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

The service had a manager registered with the Care Quality Commission. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Inspection team: Two inspectors carried out this inspection.

Service and service type:

Right at Home Welwyn, Hatfield & St Albans is a domiciliary care service providing care and support to people living in their own homes.

Notice of inspection:

This inspection was announced. We gave the provider 48 hours' notice of our inspection to make sure senior staff would be available to support the inspection. Inspection site visit activity started on 26 February 2019 and ended on 12 March 2019. We visited the service on 26 February 2019 to meet the service manager, people and staff and to review care records and policies and procedures. We contacted people and staff for feedback and received supporting evidence from the provider to confirm what we reviewed during the inspection.

What we did:

Before the inspection we considered all the information we held in relation to the service, including statutory notifications. This information helps support our inspections. We also requested feedback from professionals.

During the inspection we:

- Spoke to three people who used the service.
- Spoke with three care staff, the registered manager, two directors and a senior support manager from regional office. We received feedback from two relatives of people via email.
- We reviewed information from two care files which included all aspects of care and risk assessments. which included their medicine records.
- We reviewed three staff recruitment files. We looked staff support arrangements including supervisions, and training records.
- Health and safety and servicing records.
- Records of accidents, incidents and complaints.
- Audits and surveys.
- We reviewed case studies relating to special moments people had experienced.

Is the service safe?

Our findings

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

Good: People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse.

- Staff demonstrated a good knowledge on how to identify and report any potential concerns, and protect people from avoidable harm. One staff member told us "I would report any concerns to our registered manager." We saw records confirming regular training, refresher and discussions at staff meetings.

Assessing risk, safety monitoring and management

- The provider and registered manager had robust systems and processes in place to assess individual risks to people. Measures were put in place to help mitigate any identified risks.
- Staff were aware of where to locate information, and report any changes in people's conditions or abilities which would trigger an immediate review.

Staffing and recruitment.

- During the winter months staff helped people to keep safe. For example, during Halloween the registered manager recognised that some people were vulnerable and could be startled by 'Trick or Treaters', in particular a couple of their service users who lived with dementia. The staff therefore put up a sign on the front door which stated, 'Be aware of who you scare'. This meant that people did not knock on their doors keeping them safe and undisturbed that evening.
- The provider and registered manager had a well-developed recruitment process in place. The Recruitment process was 'values' based. In addition to disclosure and barring checks (DBS) and the taking up and validation of a minimum of two references.
- Part of the recruitment process included a psychometric profile assessment, which helped to match prospective carers to the individual service users, and demonstrated a person-centred approach

Using medicines safely

- People received support to take their medicines safely. Staff have had medication training, and competency checks.
- Medication audits had been completed. At time of inspection one person was being supported with their medication. Medicine administration records were completed correctly and audited by the registered manager.
- Any potential concerns were picked up quickly and were addressed. Staff were aware of the difference between administering and prompting medication.

Preventing and controlling infection

- Staff had training and were aware of infection control measures when supporting people in their own homes. For example, wearing gloves when assisting people with personal care. Good hand washing techniques and safe disposal of waste materials which could be a risk of cross infection.

Learning lessons when things go wrong

- The provider and registered manager were very proactive in reflecting when things go wrong. The provider told us how they analyse and learn from accident incidents or events. Lessons learnt were shared with staff to help ensure good practice prevailed. Although at the time of the inspection they had not had any formal or serious events, but there was a process to deal with such events.

Is the service effective?

Our findings

Our findings - Is the service effective? = Good

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

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

- People had a comprehensive assessment of their needs completed following an initial enquiry, to establish if the service could meet their holistic needs. One person told us, "They meet all our needs very well indeed."
- Care plans were developed from the assessments for each identified area of need people had and provided staff with clear instruction about how people liked to be supported.
- Care and support plans were regularly reviewed. This helped to ensure that if people's needs changed this was appropriately documented so that staff were aware of any changes and people continued to receive care that was effective.

Staff support: induction, training, skills and experience

- Staff were very well supported through a range of forums and events. A comprehensive induction was completed when staff started working at the service. There was then a continual programme of ongoing training and support.
- This included attendance at team meetings, individual supervisions and 'informal' catch up sessions in the office. In addition, the registered manager had an 'open door' policy which enable staff to pop in regularly or to call the office for a catch up, to share information or seek clarity.
- Staff all provided positive feedback and confirmed they felt motivated and valued and all worked well as part of a small team.

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

- People were supported where required to access food and drink. This included help with preparation and planning. Staff told us they encouraged people to drink adequate amounts and monitored food and fluid intake if people were at risk of dehydration or had other dietary risk factors.

Staff working with other agencies to provide consistent, effective, timely care.

- Staff and management knew people well and were able to promptly identify when people's needs changed and seek appropriate advice.
- Staff worked in partnership with health and social care professionals appropriately sharing information about people to ensure that the care and support provided was effective and in people's best interest.

Supporting people to live healthier lives, access healthcare services and support

- People had access to health professionals to help them live a healthier life. Staff were proactive in identifying if people were unwell and contacted appropriate healthcare professionals as needed.

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

- People told us staff asked for their consent before they provided care or support. They took into account people's wishes, offered choices and sought appropriate advice when people had fluctuating capacity such as obtaining best interest decisions or confirmation from healthcare colleagues.

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.

Outstanding: □ People were truly respected and valued as individuals; and empowered as partners in their care in an exceptional service

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

- All the people received exceptional care from staff who supported people to pursue their individual cultural, ethnic and religious preferences, all of which had been embedded into all aspects of the service. For example, one person was supported to say a prayer at night and supported to observe Lent because this was important to them.
- Staff members told us that equality diversity and human rights (EDHR) was one of their core values and staff were committed to ensuring people received the support required to enable them to fully engage in their chosen faith, cultures and beliefs.
- People provided consistently positive feedback about staff. People and their relatives told us staff were always going the extra mile and doing over and above what was expected of them. For example, when people went into hospital the care staff continued to visit them and helped arranged their homecoming.
- People and their family members consistently told us they found each staff member to be kind and compassionate in their dealings with them. For example, one relative told us "There is absolutely no question that the quality of my father's daily life was significantly enhanced by the support of the Right at Home team – he greatly appreciated them, as did the rest of the family knowing that he was in good, safe, and compassionate hands."
- The providers equal opportunities policy was implemented and closely monitored to ensure its efficacy.

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

- Staff used innovative and creative ways of involving people and their relatives in the creation of their care and support plans, which enabled them to feel empowered and valued. Prior to the service commencing the registered manager visited people several times to get to know them better and engaged them in meaningful conversations about how they would like their care delivered.
- People were extensively involved in all aspects of decision making. People were at the heart of the service and the ethos promoted and embraced a people first culture, a vision shared by all stakeholders. The service was a small family run business with staff handpicked because of their caring attributes and a commitment to 'make a difference' and make 'magic moments' for all the people they supported.
- The provider and registered manager went to great efforts to obtain information relating to people's life histories, which helped match care workers to people. The initial assessment captured information from people, families and others who knew the person well. However, care staff continued to engage with people to gain further insight into what they enjoyed and what was important in their lives.
- The provider told us that their staff's caring nature was evident in all aspects of the care workers lives. They

told us, "That while [Name] was on route to support a service user. They saw a member of the public had suffered an accident and was losing a lot of blood and looked quite unwell. The care worker called 999 and took instructions from the emergency services operator over the telephone. They stayed with the person offering reassurance and helped to keep the person safe and calm until the ambulance arrived. The care worker prevented serious injury including preservation of a body part which could have resulted in permanent disability. The care worker told us "I had my first aid training the week before and it was a great opportunity to put my learning into practice."

- During the bad winter weather staff went over and beyond to ensure everybody received their care. In addition, staff ensured people had provisions and hot food available. One staff member telling us "I made sure the people we looked after were kept warm. Another staff member told us how she made and delivered cakes for people to enjoy.

- People and their relatives told us about all the little extra things staff done to enhance people's wellbeing and happiness. For example, one person with poor mobility and at risk of their skin breaking down was assisted by staff to visit a local nursing home where specialist equipment was available. They were supported to have a bath which they had been unable to achieve in many years. This improved the persons wellbeing and physical condition as well. The persons main care worker told us, "This was such a wonderful experience to see how happy it made [Name] feel. We are already planning another bathing session." The care worker told us, "The next morning [Name] was so much more relaxed the bath had done so much good and the person told them, "It was lovely just to be able to see my legs floating in the water."

- One person who was being supported had visual impairment which meant they could no longer see their beloved animal's eyes. Staff took a photo of the animal's face and then had the eyes enlarged so the person could see the outline of the animal's eyes. This made the person extremely happy and meant that they were able to see the pets' eyes whenever they wished which was something they had greatly missed.

- Another person was supported by staff to attend a special family wedding. The persons regular care worker agreed to escort the person to the wedding. The staff member arrived early in the morning to help get the person ready in their 'wedding' outfit and got them all groomed for the day. The person was so emotional to be able to attend and join in all the festivities of the day. A day they will never forget.

- One person told us "My care worker has stirred lovely memories from my past, I feel invigorated. I am so happy and contented to have experienced such happy memories. She has a fantastic sense of humour. I have not laughed so much in years.

Respecting and promoting people's privacy, dignity and independence.

- People received care and support which was provided in a respectful way which both promoted and maintained people's dignity. People told us they were very happy with the way staff treated them. One person told us "They [Staff] chat to me and help to make me feel comfortable as well as covering me to preserve my dignity."

- Staff told us how they respected that they were working in people's own homes. They talked about supporting people to retain their independence for example, by asking the person what they would like help with, and then enabling them to do the tasks they can themselves and then supported them with the rest. One person, with support of care staff had over a period of time regained significant mobility and independence with personal care. This had made a marked difference to the person's quality of life and wellbeing and had enabled them to attend social events which were important to them.

- People and their relatives told us the staff who visited them were respectful and maintained professional boundaries.

- Peoples personal and confidential records were stored securely. Many records were paperless on an IT system. Other records were locked in cabinets within a secure office environment. This ensured that peoples confidentiality was maintained.

Is the service responsive?

Our findings

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

Outstanding: Services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control.

- People, their families and healthcare professionals were extensively involved in developing care plans. The care plans contained detail about how staff should support people's personal preferences. For example, the service worked around people's preferences for visit times as opposed to being led by the availability of staff. One person told us, "They fit round my needs. I feel involved in my care, yes for sure. They really do go beyond what is required".
- Staff were required to log in and out of people's homes so that visit times were monitored. A 'real time' account of the visit was recorded by staff. Daily records provided detailed information of care and support given, and were of a good quality ensuring that people received the care and support they needed.
- The service was extremely responsive to people's needs. For example, one person was hard of hearing. The registered manager contacted the fire service to carry out a safety check of the person's home and install the required fire safety equipment. This service was offered to all people and had proved invaluable for all the people who were supported by the service.
- Another person was concerned about not hearing the smoke alarms in the event of a fire. The registered manager contacted the fire service who provided a vibrating device to be placed under their pillow to alert them in the event of a fire.
- The registered manager also arranged for a person to get their topical creams changed to a non- paraffin base, because the person smoked, thus enabling the person continuing to live their life as they wished but by reducing the risk of harm at the same time.
- The registered manager told us how they had supported a person to obtain some much-needed equipment to help support them to improve their physical strength through regular use of the equipment which improved their mobility to the point that the person now enjoys a much better quality of life and has fewer debilitating symptoms which used to exhaust the person.
- Relationships had been developed with the local community and council. For example, the provider set up a marquee in the local town square where they provided advice about many local services not just their own, and ran fun activities and a raffle with prizes donated by local businesses. This was an event not only for people who used the services of Right at Home Welwyn and Hatfield but also for the wider community.
- People were encouraged and supported to maintain links with the community to reduce the risk of social isolation. For example, the provider had arranged for people and their family members to attend events in the community such as coffee mornings at Dementia cafes.
- People's support visits were planned to enable them to attend these events if they wished. Support was also on hand for family members, for example, if they needed staff to assist them to get their family member ready to enable them to attend or stay with their loved one while they attended the event, or if they needed help with transport.

- Information was provided in a way people could understand it. The provider looked at ways to make sure people had access to the information they needed for example, in the event of a sensory loss such as hearing or visual they were able to get information in large font to enable the person to see it. The provider had also completed training to be able to support people with simple repairs to hearing devices which included changing batteries. If staff felt there were problems with people's hearing aids they would arrange for the provider to look at it for them.

- It was obvious that the high-quality care people received had a positive impact on their quality of lives. One person told us, "They even visited me in hospital and helped with the arrangements to get me home. Nothing is ever too much trouble. They do it willingly and with a good heart."

Improving care quality in response to complaints or concerns.

- People knew how to raise concerns and were confident action would be taken to resolve any problems. Although no formal complaints the provider and registered manager were very positive about encouraging people to share concerns in order to help them make improvements.

- People were encouraged and supported to talk about anything that might improve their 'care experience' and aspired to be the best. The provider told us "We see any feedback as a positive interaction and if things improve as a result they it is good for everyone."

- It was clear the provider went above and beyond to ensure people were satisfied with the care provided by staff. They were open honest and transparent in all their dealings with people and their families.

- RAH Welwyn and Hatfield had systems in place to record, investigate and resolve complaints. The service's complaints policy was available to all people, and a copy was kept within people's care records in their homes.

- The service had received many compliments and thank-you cards and letters from people and their family members, clearly demonstrating their overwhelming satisfaction and gratitude for all that the service offered and achieved.

End of life care and support.

- The service was not supporting anyone with end of life care at the time of our inspection. However, staff told us they had received training and knew how to support people during end of life care (EOLC). They talked about how they would maintain people's dignity and support families during these difficult times. One family member told us "We were overwhelmed with the response from the entire staff team when [Name] suddenly became seriously unwell. Their professionalism, kindness and compassion that was shown was exceptional. The staff team were responsive and caring and went over and above the call of duty."

- The registered manager and provider had discussed people's end of life wishes so that they (Staff) knew in advance how they could best support people and their families. For example, if people preferred to remain at home and receive care from staff who knew them well and were able to fulfil their final wishes in familiar surroundings.

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.

Outstanding: Service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

This was the first inspection since the service registered in on 16 February 2018. We found excellent leadership values embedded in the service.

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

- People, relatives and healthcare professionals all told us the service was exceptionally well managed. Comments included. "They have a good reputation and have been professional in any dealings I've had with them." "I am confident with them looking after one of my family." "I feel because they're quite a small service, they know their care staff and clients well and are able to match accordingly"
- Staff repeatedly described feeling supported, respected and valued by the management team and were committed to providing people with the highest standards of care.
- The provider and registered manager demonstrated a comprehensive knowledge in relation to duty of candour responsibilities, which places a duty on staff, the registered manager and the provider to act in an open and transparent way.
- The providers and manager told us they had been really looking forward to the inspection and were keen to show us all they had achieved and how their team provided excellent care to people. They welcomed the inspection process and saw it as an integral part of holding the service to account, and learning from any feedback given.
- Managers and staff were clear about their roles, and understanding quality performance, risks and regulatory requirements.
- The provider demonstrated absolute compassion when talking about what motivated them to strive for excellence. They told us, "I wanted to give something back, when [Name] of family member needed care we got the best it was a wonderful experience and my family member was so well cared for." The provider was overcome with emotion just reflecting on the experience but never forgot how the care their family member received made them feel and what a difference it had made to their lives.
- The providers demonstrated throughout the inspection that they had considered and researched all aspects of the care industry long before they started operating as a care provider.
- People who used the service had been with the service since it started operating, and without exception all said they would recommend the service to anyone needing high quality care.
- The registered manager had direct support from hands-on providers. They were passionate about their roles and had a clear vision for continuous improvement in the quality of the service. This ethos was shared throughout the service.
- Staff told us they felt very well supported and looked after by the providers and registered manager. Staff

told us "This makes us want to give more." An example of this being that during the winter months the providers supplied each staff member with 'Winter packs'. These packs included hot drinks mugs, vitamins, windscreen scraper, de-icer, throat lozenges, tissues, a torch and many other items of use. These packs proved invaluable in keeping staff mobile and well

- Staff told us that when they started working at the service they were given a very useful 'Starter' pack. This ensured staff were fully equipped from the offset and to go out to their first call with all the equipment they would need. The packs includes: Hand sanitizer, Aprons, Hand cream, Lip Balm, a 1st aid kit, gloves, face shield, shoes covers, and ID Badge.
- The providers ensured all aspects of the service were risk assessed, were fit for purpose and were used to maximum effect.

Engaging and involving people using the service, the public and staff and promoting person-centred, high-quality care and support

- The provider and registered manager valued and recognised staff contributions. As part of their staff recognition scheme, they celebrated care staff who had gone above and beyond the call of duty. Staff received certificates and a meaningful present, to recognise staff going the extra mile.
- The management team had got to know about staff lifestyles and their gift was reflective of their hobbies and interests, such as a new plant for care staff who enjoyed gardening and a baking hamper for another member of the team who loved baking and sharing her baking delights with everyone at the service.
- Feedback from people and community healthcare professionals spoke highly of the provider's and registered manager's influence and leadership within the service. We found they had embedded a positive, inclusive, open and transparent culture, focusing on delivering exceptional care. People experienced a service that went above and beyond their expectations and was reliable.
- Relatives' feedback was consistently positive and full of praise for the way the service operated which resulted in people receiving personalised care of the highest quality from a small consistent workforce.
- We saw clear examples for each person of how they had benefited from using the service and the improvements to the quality of their lives.

Working in partnership with others.

- The provider, registered manager and staff worked in partnership with other organisations and agencies to help promote best practice and leadership skills. For example, through shared learning and offering shared resources, facilities and training.
- The provider told us about some of the initiatives they had implemented to help engage with the community. For example, they volunteer at a local Day Centre.
- The service was an important part of the community. The provider had developed excellent community links to reflect the changing needs and preferences of the people who used the service. For example, they worked closely with organisations such as Herts hearing advisory service, the local Council Health Fest and the local dementia café sessions. This enabled people to benefit from the support offered by these organisations as well as the social contact.
- Additionally, relationships had been developed with some of the local Community Church's. They allowed the management team to use some of the facilities for community events and training. To reciprocate the favour members of the church were invited to join training sessions sharing much needed skills such as Basic Life Support Training. This meant that members of the community had basic life support skills should they need it.

- The provider and registered manager told us they worked in partnership with two local care homes, where the provider attended Breakfast meetings with local businesses to see how they could best support each other and the wider community. The registered manager attended focus groups run by a local home care association. The focus groups consisted of a number of local registered managers from different areas of Social Care, working towards a leadership framework, sharing information, learning and supporting each other.

Continuous learning and improving care

- Leadership at the service was exceptional and the vision and values of the service put people at the heart of everything they did. The registered manager had been in post for just under a year. They had developed within the service and had vast experience in relation to all roles within the service. This meant the registered manager had an in depth knowledge of what was expected of care staff, and fully supported them to develop them in line with the core values and culture of the service.

- The registered manager demonstrated they had developed their skills base in the relatively short time they had been at the service for example by completing not only core training but also doing specialist training which included a local care providers Falls Prevention Pathway, which included 'Train the Trainer.' During this training information was shared in relation to 'Polypharmacy'. This is the concurrent use of multiple medications by people which could mean they are more at risk of falls. This information was shared widely within the organisation and larger company Franchise group so that everyone could benefit from it. The provider told us "We are now able to look at people's medication which assists us in identifying if a medication review with the GP was necessary."

- There were a wide range of audits and quality assurance systems and processes in place. These quickly identified any shortfalls as they occurred, allowing any action that needed to be taken to be done quickly without compromising the quality of the service. The provider also had regular audits completed by senior staff from their 'regional' office to monitor the quality of care.

- All staff members spoken to repeatedly told us the management team were supportive and approachable. One staff member told us "This is by far the best company I have ever worked for." Another staff member told us "They are very supportive management team that we can talk to them anytime, about anything", "Brilliant teamwork. In fact, the staff member was close to tears when describing her experience of working at RAH Welwyn and Hatfield.

- The service was a member of several national organisations such as Skills for Care and Social Care Excellence of Institute (SCIE). This allowed them to keep up to date with latest knowledge and information around best practice care. This was in addition to all the support from RAH regional office which kept policies and legislative changes updated and under regular review.

- Services that provide health and social care to people are required to inform the Care Quality Commission (CQC), of important events that happen in the service. The registered manager was aware of their responsibilities and had systems in place to report appropriately to CQC about reportable events.