

Greensleeves Homes Trust

Broadlands

Inspection report

Borrow Road
Oulton Broad
Lowestoft
Suffolk
NR32 3PW





Date of inspection visit:
25 June 2019

Date of publication:
06 August 2019

Tel: 01502512895

Website: www.greensleeves.org.uk

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

Broadlands is a residential care home providing personal care to up to 52 people. At the time of the inspection there were 51 people living in the home. Most of these people were older adults with needs associated with physical disability, dementia or long-term conditions.

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

People continued to receive exceptional high-quality care that met and exceeded their individual needs, expectations, and enriched their daily lives. Without exception, feedback was overwhelmingly positive from people, relatives, visitors and professionals about the extremely compassionate and caring approach of dedicated and enthusiastic staff, who repeatedly went above and beyond to ensure people's lives were filled with enjoyment, meaningful occupation, engagement and involvement in the place they called home.

People were consistently treated with dignity and respect in a way that truly valued them as individuals. They continued to be supported to maintain their health and to access relevant services. Staff were knowledgeable about people's risks and how to care for them safely. They understood how to protect and safeguard people and had a positive attitude to reporting concerns.

Staff were extremely motivated and passionate about their role and understood their responsibilities. They actively involved people and their relatives in the ongoing design and delivery of their care in line with their identified needs and with the wider issues within the home.

Feedback was actively encouraged, valued and acted on. People, relatives and professionals expressed confidence that they could raise issues or concerns with any member of staff or the management team and that these would be addressed.

People were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

People's medicines were managed safely. The home was visibly clean throughout. There continued to be enough staff with the right skills and experience to care and support people. When the time came staff respected people's wishes and provided them with holistic, dignified, end of life care.

Broadlands continued to be an active presence within the local community. Strong community links had been established with different community groups regularly visiting and people accessing the local area.

Since our last inspection, under the leadership of the registered manager, Broadlands has gone from strength to strength, consistently developing and improving through its robust quality assurance systems to ensure it succeeds in delivering positive outcomes for people. A visibly person-centered culture had been

firmly embedded, reinforced by the provider's principles, values and expectations of staff. This underpin the characteristics of an outstanding service.

Rating at last inspection

The last rating for this service was Outstanding (published 10 November 2016).

Why we inspected

This was a planned inspection based on the previous rating.

Follow up

We will continue to monitor information we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we may inspect sooner.

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

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 ☆

Broadlands

Detailed findings

Background to this inspection

The inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 (the Act) as part of our regulatory functions. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Care Act 2014.

Inspection team

The inspection was carried out by one inspector and an Expert by Experience. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service.

Service and service type

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

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.

Notice of inspection

This inspection was unannounced.

What we did before the inspection

We reviewed information we had received about the home since the last inspection. We sought feedback from the local authority and professionals who work with the home. We used the information the provider sent us in the provider information return. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This information helps us support our inspections. We used all this information to plan our inspection.

During the inspection

We observed the care and support provided and the interaction between people and staff throughout our

inspection. We spoke with nine people who used the service, five relatives and two visiting professionals about their experience of the care provided. We spoke with the registered manager, deputy manager and eight members of staff, from the care, activities, catering and domestic teams.

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

After the inspection

We spoke with two relatives about their experiences of Broadlands. We received electronic feedback from two people who lived in Broadlands and from 12 relatives about the care provided. We received electronic feedback from 18 members of staff about their experience of working at the home and seven professionals involved with the home.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Assessing risk, safety monitoring and management; Systems and processes to safeguard people from the risk of abuse

- People told us that they felt safe and secure living in the home. One person said, "I've always felt very safe here." Another person commented, "The whole set up here makes you feel safe."
- Effective policies and procedures in relation to safeguarding and whistleblowing were in place and staff had received training based upon these.
- Staff fully understood their roles and responsibilities in keeping people safe from harm. They raised safeguarding concerns appropriately when they were worried about people's safety.
- People's care records included detailed risk assessments which informed staff about how the risks in people's lives were reduced. This included risks associated with pressure ulcers, falls, choking, moving and handling and nutrition.
- All identified environmental risks had an associated risk assessment in place which guided staff how to mitigate risks within the service.

Staffing and recruitment

- There continued to be enough staff with the right skills and experience to meet the individual needs of the people who lived in the home.
- Effective systems ensured that the staff were of good character and were suitable to care for the people who lived in the home. Staff employed at the home told us they had relevant pre-employment checks before they commenced work to check their suitability to work with people. Records we looked at confirmed this.

Using medicines safely

- Effective systems and processes were in place to make sure people received their medicines as they had been prescribed with clear records kept. One person said, "The staff know what I take and give my tablets to me in the morning and in the evening." A relative commented, "[Family member's] medicines are locked in the cupboard on the [bed]room wall. The staff come in routinely to give him his medication."
- Staff received training in medicines management and had their competency regularly assessed.
- The management team undertook regular checks and audits of the medicines system to ensure it continued to be managed in a safe way.

Preventing and controlling infection

- People and relatives were complimentary about the cleanliness of the home. One person said, "The cleaning staff work very hard." A relative said, "Everywhere is lovely and clean and the whole place is well-maintained. It's great here."

- Staff continued to be trained effectively in infection prevention and control. They had access to personal protective equipment such as disposable gloves and aprons to reduce the risks of cross contamination.

Learning lessons when things go wrong

- Details of accidents and incidents were logged, recorded with appropriate actions taken to reduce the risk of re-occurrence.
- There was a culture of continuous learning when things went wrong. The registered manager carried out regular reviews of accidents and incidents in the home as well 'grumbles', complaints and concerns to identify if there were any trends or patterns, with actions taken to mitigate risk and prevent reoccurrence.

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 the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law; Staff working with other agencies to provide consistent, effective, timely care; Supporting people to live healthier lives, access healthcare services and support

- People's needs were comprehensively assessed before admission to the home. Family members and significant others were involved in the entire process. Staff worked with external bodies and professionals where needs had been identified, to manage risks in line with recognised best practice and this was reflected in their care records.
- People continued to be supported to maintain good health. One person said, "The doctor comes if needed, the chiropodist comes very six weeks or so." Another person commented, "The nurse practitioner generally comes from the surgery. He sorts out for you to see the doctor if needs be."
- An established weekly 'wellbeing' clinic supported people to maintain good health with regular checks on people's hearing aids, height, weight, blood pressure, skin integrity and diabetes management. A community matron attended the clinic, so staff could highlight concerns on to them and the GP if necessary. This enabled collaborative working and early intervention and had proved successful in reducing the number of falls and urine infections for people. One relative commented, "Since being at Broadlands I have noticed a huge improvement in [family member's] health. [They are] a type 2 diabetic and no longer needs insulin due to a regular, healthy diet."
- Systems were in place to share information between services as required. For example, important documentation about people should they be taken to hospital in an emergency.

Staff support: induction, training, skills and experience

- People and relatives told us that staff had the skills and knowledge to support them. One person said, "I think they're [staff] trained well. The young ones [staff] are very capable too. We each have a key worker [designated member of staff] which is really good." A relative told us, "The staff have lots of days training and it pays off. The staff know what they're doing."
- New staff completed a detailed induction and did not work unsupervised until they were confident they could do so.
- The management team had a rolling supervision and performance-based appraisal programme in place. Staff gave examples of training opportunities they had accessed in relation to their own development goals. Such as achieving professional qualifications in care. One member of staff who had done this told us, "When I started at Broadlands I didn't have any experience within the care sector and I am very proud of this achievement."

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

- People enjoyed a positive meal time experience and continued to be supported to have enough to eat and drink and to maintain a balanced diet. Where required staff worked with healthcare professionals to ensure people's specific nutritional needs were fully assessed and met.
- People and relatives were complimentary about the quality of the food provided. One person said, "On average the food's pretty good. You can't please everyone. You get a choice of two main at lunchtime and they'll [kitchen staff] do you something else if you ask. I like to eat in the dining room mostly. We get drinks brought up to us here [bedroom] when we want." A relative told us, "[Family member's] on a soft diet, not pureed. The kitchen staff are very sensitive to his needs." They described how the catering team accommodated their family member's food preferences including their love of fish and chips on a Friday.

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

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that, as far as possible, people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible.

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

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff consistently asked for people's consent before providing any care or support. For example, obtaining people's permission before supporting them with their medicines and when safely mobilising people. One person said, "I have always felt very much in control. The staff are always polite and kind."
- Staff had received training in the MCA and DoLS and understood their responsibilities in these areas.
- Where people were unable to make a decision for themselves their care records included a mental capacity assessment and/or best interests' decision. This included the person as much as possible in making their own choices with involvement of their family and appropriate professionals where required.

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

- People and relatives were very complimentary of the environment. One person said, "Every where's well looked after. Both inside and out, I often go for a walk to the jetty [end of the garden] with my walker. The view from here is lovely, over the gardens and down to the Broad."
- The design and layout of the home and garden was accessible and appropriate to meet people's needs. There were communal areas, such as lounges, dining rooms and other spaces throughout the home, where people could meet with their friends and family, in private if required.

Is the service caring?

Our findings

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

At the last inspection this key question was rated as good. At this inspection this key question has now improved to outstanding. This meant people were truly respected and valued as individual; and empowered as partners in their care in an exceptional service.

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

- People were proud to live in the home and repeatedly spoke with happiness and fondness about their encounters and experiences of living at Broadlands. They spoke highly about the care they received and were complimentary about the staff approach. One person commented, "The staff know me well. They are excellent; kind and caring and friendly and yes, they always listen to you." Another person told us, "I decide on everything, I am really happy with the activities, the food, my room and the exceptional care that I have, the carers are lovely and deliver a high standard of care and I am really happy here at Broadlands."
- Relatives and visiting professionals were equally complimentary about the staff approach. Comments included, "Truly exceptional; sympathetic, compassionate and kindness personified." One relative told us, "The staff are the gentlest, kindest and most sincere people. They genuinely respond to [family member] and show him the greatest respect." Another relative shared with us how their family member had been supported through difficult times coping with bereavement and depression. They said, "One carer in particular really took time to think about his mental health and suggested an approach to his medication that the doctors subsequently approved." A third relative commented on the positive impact and change they had seen in their family member's wellbeing since moving into the home, "I have seen her flourish and enjoy life to the full. She now has a lovely friendship group which she never had, and a caring, attentive and professional team of carers and support staff looking after her."
- People and staff took an active interest in one another's lives and firm friendships had developed. They shared their lives with one another. On occasions, staff brought their young children and grandchildren in to visit and they mixed with people and their relatives. One person told us, "It is one big happy family here."
- Staff had an in-depth knowledge of people and adapted their communication and approach to meet the individual needs of each person. Throughout our inspection staff were seen smiling and laughing with people and when needed, they used appropriate touch to reassure and comfort, such as when safely mobilising people.
- Staff frequently went 'above and beyond' for people. For example, buying flowers for people on important anniversaries when they knew people may need extra emotional support. There were instances where staff had chosen to come in on their day off to spend time with people to celebrate a special occasion or to take them out and enjoy shared interests such as motor biking, visiting the pub and going shopping. One relative commented, "A short time ago, one of the care staff and their partner took [family member] to the [name of local pub] for a beer. This was such a kind thing to do and [family member] really perked up as a result." Another relative shared with us the thoughtful gesture carried out by the home following a stay in hospital for their family member, they said, "My [family member] was desperate to get back "home" and the senior staff arranged an early discharge with all follow up treatment taking place at Broadlands. One of the staff

had written a poster to put on her pillow welcoming her back and telling her she had been missed."

- People were actively encouraged to maintain relationships with their friends and families and to make new friends with people living in the home. Visitors were made welcome and could come to the home at any time and stay as long as they wanted. One relative said, "Whenever I visit I am made to feel very comfortable, I stay all day and have all my meals there. It is not just a care home, it is my [family member's] home. She is always cheerful, clean, hair done, manicured nails, and none of these she can do herself, this shows that the staff care and take a lot of pride in how their residents look."
- The registered manager, supported by their staff team, held people in the highest affection; consistently addressing them with friendliness and warmth in their interactions. Importance was placed on establishing relationships of trust and friendships with people, enabling them to live fulfilled lives whilst keeping them safe and promoting dignity and respect throughout. A relative told us, "The staff are kind and supportive and listen to concerns my [family member] raises about her health, even though some of these at times are minor. They never make her feel undervalued or silly for asking. [Family member] often has tears of joy in her eyes as she tells me how happy she is, referring to staff as her friends."
- Consistently delivering high quality care to people were both a priority and a shared responsibility within the home. We saw several examples of staff including domestic and catering teams going out of their way to improve someone's day by taking the time to engage meaningfully with them and offer support if needed. This included a reassuring cuddle at meal time when one person had become upset. A relative told us, "My [family member] is treated with kindness, care and respect by all of the employees, whether carers, maintenance staff, catering staff or management. My [family member] regularly praises the way she is treated. She knows she is safe and well looked after. I have noticed that she is not only cared for physically but there is also support for her emotionally. The staff notice unhappiness and will help if it is within their power."

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

- Without exception, people and their relatives where appropriate, told us that they were fully consulted in their care arrangements. One person said, "They [staff] explain everything to me and together we talk through the options available and agree what needs to be done. They respect my views. I am not a silent partner in this arrangement. This is my life we are talking about." A relative commented, "The staff listen and respond well to [family member]. We speak to the staff all the time. We are completely involved in [family member's] care. We have seen his care plan and can look at it any time. The folder is in his room and we have access to his key worker which works well. We like the fact that it's a very open organisation."
- Staff spoke to us in detail about people's life histories, their care and support preferences and shared examples of how they enhanced people's lives by enabling them to do things that mattered to them. Such as, for one person arranging a trip to a pub from their childhood where their family member used to be the publican and for another person taking them to the deli shop to buy their favourite Asian bread and cheeses.
- People were empowered to make their own decisions and shared numerous examples of this with us. They told us they were free to do what they wanted throughout the day and their choices respected. People's routines and preferences were reflected in their care records demonstrating their ongoing participation.

Respecting and promoting people's privacy, dignity and independence

- People told us the staff consistently respected their privacy and dignity. One person said, "The staff are very good. I've never felt uncomfortable. We are very much in control of our lives here. Our affairs are private to us." Another person commented, "The staff encourage me to do what I can, and step in when needed. They respect my modesty, so privacy has never been an issue." A relative commented, "[Family member] is high dependency. We are both grateful for their [staff] un-ending patience. The staff here are polite,

courteous, respectful, cheerful and take the time that's necessary to really care for him."

- Staff were observed knocking on people's bedroom doors before entering and were discreet when asking people if they wished to use the toilet or adjusting their clothing to maintain their dignity.
- Staff consistently encouraged and supported people to be as independent as possible. One person said, "The staff encourage me to walk as much as I can. I use my frame. I've never fallen since I've lived here." Another person commented, "We are left to do as much as we want. The staff always help like they do with my bath, but we remain as independent as we can when we are well."
- People's care records contained detailed guidance for staff on methods of communication and interaction for people with sensory impairments. The guidance emphasised the need to support people to maintain their independence and levels of involvement in the care provided and decision-making process.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as outstanding. At this inspection this key question has remained the same. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences; Supporting people to develop and maintain relationships to avoid social isolation; Support to follow interests and to take part in activities that are socially and culturally relevant to them

- People continued to receive an exceptionally high standard of personalised care that was responsive to their individual needs and respected their preferences. One person said, "I make the decisions about my care needs. They [staff] give me the information I need to make the right choice for me."
- People were supported by staff to live well and to achieve what they wanted to do in line with their personal goals. Examples included for one person, a published academic author helping them to access and use technology to learn about their family history and showing them how to use the internet to be able to read their published work online. We were told the person, "Hadn't slept all night he was so excited to be able to do this." For a couple living in the home, staff had arranged a 'date night' including a meal of their choice, drinks and a quiet room for themselves with mood lighting.
- Relatives described working in partnership with the staff regarding ongoing care arrangements. One relative commented, "The home is very proactive in including family members in the care of the residents." Another relative said, "[Family member] has had a few health problems since moving to Broadlands and these have been quickly and thoroughly dealt with. I have been informed from the outset and kept informed at all stages of any treatment, referral to the Doctor etc."
- The delivery of care, including significant attention to detail around people's needs and wishes, ensured that people received outstanding care that increased their sense of worth, improved their wellbeing and enhanced their enjoyment of living at the home. Staff demonstrated in-depth knowledge of people's needs and preferences and cared for people in a way that valued them, gave them choice and control in their life and respected them for who they were.
- People's needs were regularly reviewed and were updated accordingly. Their care records contained detailed life histories which enabled staff to tailor the care, support and activities to individual personalities and get to know them.
- People continued to be provided with a stimulating range of social and recreational activities that promoted their physical and emotional wellbeing. They were encouraged and supported to continue their interests both within and outside the home and this contributed to a sense of purpose and belonging. One person said, "There are lots of activities and if you are physically able I think you should try to join in. The staff try so hard and there's always something going on. We go out on outings you know. We went to the Cathedral in Norwich, I loved that. We've been to garden centres and Gorleston Beach, which was lovely for me to see again."
- Staff ensured people who were cared for in bed had the same opportunities for occupation and activities as everyone else with protected one to one time.

- There was a shared ownership and commitment across the staff team to ensure people enjoyed a fulfilling life. Staff supported people to complete wishes from their 'bucket list' recognising this was important to them'. This had included helping one person to buy Christmas presents for their family and to leave them letters, watching fireworks, afternoon tea, arranging specific trips and holidays for people. For one person, with an interest in motor bikes, staff arranged for their friends to visit on 'Harley Davidson's and spend quality time with them.
- People were given the opportunity to observe their faith and any religious or cultural requirements documented in their care records.
- Professionals spoke extremely highly of the home and shared numerous examples of how the staff supported people to have excellent outcomes. One professional commented, "This is without doubt the best home I visit. People are held in the highest esteem by the manager and staff. People are well looked after with staff quick to act if they spot any changes. The staff pay attention to people and do everything they can to give them a quality life."
- The home held regular events to welcome the wider community including coffee mornings, children and toddler groups, charity and fund-raising events and had participated in National Care Home Open Day. People shared with us how much they had recently enjoyed a musical concert held in the homes garden complete with marquee and dancing.

End of life care and support

- When people were nearing the end of their lives, they and their families were treated with kindness, compassion, dignity and respect. Staff provided people with exceptional, holistic, person-centered, end of life care. We saw an extensive range of thank you cards from relatives expressing their appreciation for everything the staff and management team had done to support their family member and them through sensitive times.
- No-one at the time of our inspection was at the end of their life, however we saw people and where appropriate their relatives continued to be involved in making advanced decisions and developing any end of life plans if they wanted to. If people did not wish to discuss this their wishes were respected and documented. The registered manager shared with us how they had facilitated one person's funeral as requested and had 'brought them home', scattering their ashes in the gardens of Broadlands.
- The home had achieved re-accreditation in the Gold Standard Framework (GSF). The GSF is a nationally recognised palliative care training programme for care homes in the UK. The home had fully embedded advance care planning with staff who were confident in caring for people towards the end of their life. End of life champions had developed support materials for staff to ensure best practice and information to help families cope with their bereavement.

Improving care quality in response to complaints or concerns

- There was a comprehensive complaints procedure in place. The registered manager dealt with concerns and these were rarely escalated to formal complaints. We saw this was because all feedback was taken seriously and acted on promptly. Staff were accountable and took responsibility if there were errors or mistakes and reviewed how things could have been handled differently.
- People and relatives told us they did not have any issues or complaints but that they would not hesitate to raise anything with the registered manager and staff. They were all very confident that any concerns or complaints would be fully addressed.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability,

impairment or sensory loss and in some circumstances to their carers.

- Accessible communication standards were in place, including provision of information in pictorial format, audio books, tapes and large print. The registered manager advised information could be produced in different languages and formats if required.

Is the service well-led?

Our findings

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

At the last inspection this key question was rated as outstanding. At this inspection this key question has remained outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- Broadlands had a proven track record of dynamic leadership and effective management, providing responsive care and quality outcomes for people. At this inspection we found the home had maintained and further improved the high standards of person-centred care, meaningful engagement, and end of life care that people received and continued to demonstrate outstanding leadership and management.
- People and relatives were extremely complimentary about their experiences of Broadlands, with themes emerging of 'family' and 'sense of togetherness' that went above and beyond their expectations. One person commented, "It's excellent here. Feels as much as it can like a real home. The setting is lovely, and the building is beautiful. The atmosphere's very good. Plenty to do if you want to or if you just want to do your own thing, that's fine too. I'm safe and cared about here. Wonderful care, the staff are excellent." A relative said, "I have been nothing but impressed with the individualised care that has been provided to my [family member]."
- Staff across all the different departments in the home were fully committed to the person-centred philosophy promoted by the provider and registered manager, spending quality time interacting with people. Staff were visibly proud to work in the home, they were passionate and motivated to providing a high standard of care to people. A member of staff commented, "There's a real desire amongst the staff whatever your role to want to do better, achieve more for the [people] and we work together to achieve this."
- People had numerous opportunities to share their experiences of Broadlands and to contribute to how the home could further develop. People were involved in the running of Broadlands in a meaningful way. For example, with recruitment of staff and volunteers at the home. One person shared their experience of this saying, "We like to put our shillings worth in. I was one of the [people] who interviewed for the job in the office. There were three of us and we chose the right person for the job. We interviewed one of the new gardeners too. We made the right choice there too."
- Feedback was actively encouraged, with people, relatives and visitors to the home invited to share their views on an independent care home review website. At the time of the inspection Broadlands had been recognised as a top 20 recommended care home in the East of England. The home had been rated 9.9 out of a score 10 with 33 complimentary reviews. One relative commented, "The manager and the staff provided exceptional care for our [family member] and support to the family. At every change in his circumstances over the years their caring, engaging and supportive approach for his best needs has always been paramount. A lovely 'home from home'."

- Broadlands was an established part of the community, recognising the importance of enabling people to maintain their local links, as well as taking the opportunity to raise awareness of dementia and issues affecting older people. Regular social events including fundraising activities took place which invited the local community to the home. These were well attended.
- Staff feedback was frequently sought through surveys and team meetings and they were encouraged to make suggestions and share ideas. One staff member said, "I have been listened to and my choices have been acted on, even ideas that might not of made a difference, I was still given the opportunity to test my ideas out, this shows me that I am a valued member of staff."
- Staff had a good understanding of equality, diversity and human rights and explained how they would make sure that nobody at the home experienced any kind of discrimination. The protection of people's rights was embedded into practice, for both people and staff, living and working at the service. A member of staff told us, "We treat everyone with the utmost respect and as human beings."
- Success and accomplishment were routinely celebrated, and staff were encouraged to be proud of the work they did. This had contributed towards staff feeling valued and appreciated in their role.

Managers and staff being clear about their roles, and understanding quality performance, risks and regulatory requirements; and how the provider understands and acts on their duty of candour responsibility, which is their legal responsibility to be open and honest with people when something goes wrong

- The home continued to be exceptionally well led and managed. The registered manager supported by their highly effective senior team were passionate and exceptionally motivated. They shared an ethos to ensuring people were at the heart of everything, resulting in an enabling culture within the home that consistently delivered high quality care and exceptional outcomes for people.
- Without exception, feedback about the registered manager and their senior team was complimentary. People's comments included, "First class and do everything they can to be helpful." One person said, "This is my home. I couldn't be anywhere better than this. [Registered manager and deputy manager] are marvellous."
- The registered manager was an active and visible presence in the home. One person described how the registered manager had stepped up to ensure people did not miss out on a meal time favourite. They said, "There were problems with the cooker [gas supply] so the manager took the meat home, cooked it and brought it back [for the Sunday roast]. I think that shows how dedicated they are here."
- Relatives were equally complimentary about the management and leadership arrangements. A relative said, "The management and administration team are a credit to the home, always helpful, clearly have a strong work ethic and spend many extra hours making the home and social events run smoothly. The Broadlands home offers a standard of care that should be available to so many more in need." Another relative commented, "The management and administration teams are excellent. They are always helpful, reassuring, and quick to provide any answers to queries. The manager appears to be available 24/7 as I have on occasion emailed on a Sunday evening and immediately get a response. Any concerns we have had have been listened to carefully and action taken to help us. For example, recently we asked if we could modify care home furniture to meet [family members] needs and this was immediately agreed and done."
- There was an established staff structure with a low turn-over of staff that ensured continuity of care. Morale was high amongst the workforce with staff proud to work in the home and towards the provider's vision and values. Staff shared numerous examples of being respected and appreciated by the senior management team.
- Staff were highly motivated within their roles and told us about their increased responsibilities in relation to their champion roles. They were knowledgeable about their respective specialisms which included dignity, infection control, continence, end of life care and wellbeing.
- The registered manager fully supported and encouraged staff to professionally develop within the home and the provider's organisation. Up to date sector specific information was made available for staff

including details of managing specific health conditions, such as oral healthcare and maintaining skin integrity to ensure they understood and had knowledge of people's needs.

- Robust quality assurance systems underpinned the governance and oversight of the home. These had been embedded to monitor and develop the home in line with legal requirements and best practice.
- There was an open and transparent culture in the home that enabled learning from events and supported reflective practice. Root analysis of incidents were integral to the review and evaluation processes carried out by management team and reinforced continual improvement of the home.
- The registered manager was aware of their responsibilities under the Duty of Candour. The Duty of Candour is a regulation that all providers must adhere to. Under the Duty of Candour, providers must be open and transparent, and it sets out specific guidelines' providers must follow if things go wrong with care and treatment.

Continuous learning and improving care; and working in partnership with others

- The home worked closely with organisations within the local community to share information and learning around local issues and best practice in care delivery.
- Feedback from professionals cited positive and collaborative working arrangements. One professional commented about the registered manager and staff team, "They really are a wonderful bunch of people and care enormously for [people]. I have been working in the local community for the last 40 years and after attending many homes in the area I can safely say that Broadlands is certainly amongst the best. I have witnessed the care taken, training courses undertaken, occupational therapy at work, visits outside the home for the residents, entertainments put on for the residents. Nothing seems to be too much trouble."
- The registered manager attended numerous forums to promote and celebrate best practice with others, their success in helping people achieve positive outcomes was shared with other managers to help drive improvement in other homes.
- Broadlands had participated in several initiatives, accreditation schemes and research projects, often including the people living in the home, to share their experiences and contribute to making positive changes in the care sector.