

Mrs T Rayner

# Badgers Holt Residential Care Home

## Inspection report

Butts Ash Lane  
Hythe  
Southampton  
Hampshire  
SO45 3QY

Tel: 02380849310

Website: [www.badgersholtresidential.co.uk](http://www.badgersholtresidential.co.uk)

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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: Badgers Holt is a residential care home that was providing personal and nursing care to 25 people aged 65 and over at the time of our inspection.

People's experience of using this service:

At this inspection the service met the characteristics for a rating of "outstanding" in three of the five questions we inspected. Therefore, our overall rating for the service after this inspection was "outstanding".

At our last inspection in March 2017 we rated the effective domain as 'Outstanding'. Our inspection findings, and the feedback received, at this inspection now supported a rating of 'Good'.

People felt safe living at Badgers Holt and they were very much at the heart of the service. We received consistent positive feedback from people, their relatives and health professionals. People received excellent care that was based around their individual needs and that ensured care was personalised and responsive.

Staff working at Badgers Holt understood the needs of people using the service and supported people in an exceptionally personalised way. Staff knew people well and we saw that care was provided respectfully and sensitively, taking into account people's different needs. The impact this had on people was outstanding and had resulted in people living an active life with choice evident throughout.

People received outstanding levels of care. Staff developed exceptionally positive and caring relationships with people and their families. Staff were highly motivated and demonstrated a commitment to providing the best quality care to people in an individualised and compassionate way. People's privacy and dignity was maintained at all times.

People were cared for by a motivated and well-trained staff team, who always put people first. Staff had the specialist knowledge and skills required to meet people's needs.

Relevant recruitment checks were conducted before staff started working at the service to make sure they were of good character and had the necessary skills. Staff had received training in safeguarding adults and knew how to identify, prevent and report abuse. There were enough staff to keep people safe. People involved in the recruitment process and had an input in staff employed at the home.

The service developed and promoted community involvement within the home. Staff worked closely with the local college supporting new students into care which benefited the college and people at the home.

Rating at last inspection: At the last inspection the service was rated as outstanding. (Report published 03 April 2017).

Why we inspected: This was a planned inspection based on previous rating.

Follow up: We will follow up on this inspection as per our re-inspection programme, and through ongoing monitoring of information received about the service.

For more details, please see the full report which is on the CQC website at [www.cqc.org.uk](http://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 ☆

# Badgers Holt Residential Care Home

## **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. 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.

#### Inspection team:

Our inspection was completed 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:

Badgers Holt is a care home. People in care homes receive accommodation and nursing or personal care under one contractual arrangement. CQC regulates both the premises and the care provided, and both were looked at during the 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:

We did not give notice of our inspection.

#### What we did:

Before the inspection, we reviewed information we had received about the service, including previous inspection reports and notifications. Notifications are information about specific important events the service is legally required to send to us. We considered information the provider sent us in the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give

some key information about the service, what the service does well and improvements they plan to make.

During the inspection, we gathered information from:

- 14 people who used the service and 14 relatives.
- Four health or social care professionals who had regular contact with the service.
- Four people's care records.
- Records of accidents, incidents and complaints.
- Audits and quality assurance reports.
- The provider and registered manager.
- The head of care, activity co-ordinator, chef and five care staff.

# Is the service safe?

## Our findings

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

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

Systems and processes to safeguard people from the risk of abuse

- All the people we spoke with told us they felt safe living at the home. One person told us, "I love it here. I feel safe and content, the carers are so lovely and look after me". A relative said, "We think this place is amazing. The atmosphere is friendly, homely and welcoming. I know the residents are safe here".
- People were kept safe as staff had been trained and had the knowledge and confidence to identify safeguarding concerns and acted on these to keep people safe.
- The home had suitable policies in place to protect people; they followed local safeguarding processes and responded appropriately to any allegation of abuse.
- People benefited from staff that understood and were confident about using whistleblowing procedures. Whistleblowing is where a member of staff can report concerns to a senior manager in the organisation, or directly to external organisations.

Staffing and recruitment

- There were sufficient staff to meet people's care needs. We observed that staff were not rushed and responded promptly and compassionately to people's requests for support.
- People and their relatives felt there were sufficient staff. One person told us, "I feel safe in here because there's always staff around and I like the company". A relative told us, "I like the fact that many of the staff have been here for years...and I have never seen any agency staff here, which is good".
- Staff rotas were planned in advance and reflected the target staffing ratio which we observed during the inspection.
- During the inspection we saw that staff were not rushed and responded promptly and compassionately to people's requests for support.
- Staffing levels was determined by the number of people using the service and their needs.
- The provider was very proud that they have never had to use agency staff and absence and sickness were covered by permanent staff working additional hours. This meant people were cared for by staff who knew them and understood their needs.

Assessing risk, safety monitoring and management

- Individual risk assessments identified potential risks and provided information for staff to help them avoid or reduce the risk of harm to people.
- Staff understood people's risk assessments which were monitored and reviewed monthly. These highlighted included any risks due to the health and the support needs of the person. Risk assessments seen

included moving and handling, use of equipment, medicines, and falls.

- Risk assessments had been completed for the environment and safety checks were conducted regularly on electrical equipment. People had Personal Emergency Evacuation Plans (PEEPs) in place to provide information on how people would need to be supported in the event of an emergency in the home.
- A fire risk assessment was in place and weekly checks of the fire alarm; fire doors and emergency lighting were carried out. Records showed staff had received fire safety training. Staff were aware of the action to take in the event of a fire and fire safety equipment was maintained appropriately.
- The home had a business continuity plan in case of emergencies. These covered eventualities in case people had to leave the home due to an emergency.

#### Using medicines safely

- There were appropriate arrangements in place for the recording and administering of prescribed medicines.
- Medicine administration records (MARs) confirmed people had received their medicines as prescribed.
- There were effective processes for the ordering of stock and checking stock into the home to ensure the medicines provided for people were correct.
- Training records showed staff were suitably trained and assessed as competent to administer medicines.
- Staff supporting people to take their medicine did so in a gentle and unhurried way. They explained the medicines they were giving in a way the person could understand and sought their consent before giving it to them.

#### Preventing and controlling infection

- Staff demonstrated a good understanding of infection control procedures. Staff had completed infection control training.
- People told us they were happy with the cleanliness of the home.
- Staff followed a daily cleaning schedule and areas of the home were visibly clean.
- Staff had ready access to personal protective equipment (PPE), such as disposable gloves and aprons.

#### Learning lessons when things go wrong

- Records were maintained of accidents and incidents which occurred. However, there was no documented evidence to show that these had been reviewed to ensure that appropriate action had been taken to reduce any on-going risks and keep people safe. We spoke with the registered manager and head of care who told us that this did happen but had not previously been recorded. A system has now been put in place to clearly document this and to demonstrate how learning from such incidents is shared with staff.



# 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

People's outcomes were consistently good, and people's feedback confirmed this.

Supporting people to live healthier lives, access healthcare services and support; Staff working with other agencies to provide consistent, effective, timely care

- Health care professionals told us the service delivered high quality care.. One health care professional told us, "I have found the staff have always been very welcoming and knowledgeable about the residents that they have in their care and it is my impression that they manage risks safely and effectively and support their residents to maintain good health".
- People were supported to access healthcare services when needed. Records showed people were seen regularly by doctors, district nurses and chiropractors.
- Staff monitored people's health care needs and reported any changes in their health or well-being to their GP or district nurse. A relative told us they were, "Very happy with the care here. [Staff are] very good at getting the doctor out and the community health team [at the] slightest concern they get people out straight away and let me know". Another relative said, "Staff here are all really nice. If I come in and mum's not right staff all seem to know what's going on with her. All seem to be on the ball and notice if [person is] not well and will get the doctor out".

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

- When people moved to the home, they and their families, where appropriate, were involved in assessing, planning and agreeing the care and support they received.
- The care plans seen were holistic, detailed and described people's needs in a range of areas including personal care, and daily living activities.
- Staff applied learning effectively in line with best practice, which led to good outcomes for people and supported a good quality of life.

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

- People told us they enjoyed the food. One person told us, "I like the food; my favourite is the roasts". Another person said, "The food is excellent, cottage pie today". A third person told us, "The food here is very good indeed".
  - Care plans detailed the support people required from staff at mealtimes and we observed staff assisting people to eat appropriately.
  - Staff made mealtimes a positive and sociable experience for people.
- . There was a relaxed atmosphere in the dining room, the meal was unhurried and people chatted with each other and with staff.

- We spoke with the chef who were passionate about their role. They were aware of people's dietary needs and preferences. They were in the process of changing the menus and introducing more choices and had recently completed further training in this area.
- People were asked at resident meetings if they were happy with the food and what they would like to see on the menu and this was acted upon?

#### Staff support: induction, training, skills and experience

- New staff confirmed they completed a comprehensive induction programme before working on their own.
- Arrangements were in place for staff who were new to care to complete the Care Certificate. The Care Certificate is awarded to staff that complete a learning programme designed to enable them to provide safe and compassionate support to people.
- People were supported by staff who had completed a wide range of training to develop the skills and knowledge they needed to meet people's needs and to understand their roles and responsibilities. Staff praised the training provided.
- Staff were offered the opportunity to complete national vocational qualifications in health and social care.
- Staff told us they received effective supervision. Supervisions provide an opportunity for managers to meet with staff, feedback on their performance, identify any concerns, offer support, assurances and learning opportunities to help them develop. Some supervisions had fallen behind but these were now planned in with relevant staff.

#### 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 with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations were being met.

- Most people had capacity to make their own day to day decisions and they told us that their choices and wishes were respected by staff.
- We observed staff seeking consent from people before providing care and support. Staff showed an understanding of the MCA. Staff were aware people were able to change their minds about care and had the right to refuse care at any point.
- Some DoLS authorisations had been made and others were awaiting assessment by the local authority. The registered manager had a system to ensure that DoLS were reapplied for when required and that any conditions on DoLS were complied with.

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

- People and their relatives told us they were happy living at the home and all felt it was homely and comfortable. One person told us, "I have a lovely room here and I'm very happy here". A relative said, "It's a

homely place and suits people of this generation I think".

- The home had three small lounges and a large dining area and conservatory which is where most people spent their time.
- A staff member told us, "We like to try and make this place homely, that's why the majority of residents stay around the dining area as, I reckon, it represents the kitchen table for them, where they and their families considered as the centre of the home".
- The environment had been decorated and accessorised to provide a positive and suitable environment, including for those people living with dementia. For example, specialist lighting had been installed to improve the independence of people living with dementia and sight loss.
- The main rear garden provided a secure and tranquil area with seated areas and gazebos with canopies for shade.

## 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

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; respecting equality and diversity

- We received overwhelming praise from people, their relatives and health professionals on how caring the service was. People and relatives provided numerous examples of the level of the compassion in the care provided.
- One person told us, "The carers are all lovely people, I don't need much help, but they are about if I did need assistance". Another person said, "I can't fault the care my wife is being given, she gets the best care I think...the staff here are lovely". A relative told us, "Think the rating last year was well deserved [outstanding rating]. Think my mother is safe and well looked after and in the best place she can possibly be". Another relative said, "All the staff are very caring, always friendly and helpful".
- We viewed a letter from a university student on finishing a recent workplace experience to thank the service for their support. The letter noted, 'The staff at Badgers Holt are quite simply some of the kindest and most attentive people I've ever met... It was clear from day one that the staff care deeply about the residents, at all levels of staff hierarchy. I found it heart-warming to see the proprietor check in regularly with many of the residents to see how they were doing and that their needs were being seen to-every resident was delighted to see her again. Her passion and genuine care for the care home shines through.
- The service had a strong, person centred, culture and staff regularly went that extra mile for the people and their relatives. The quality of relationships between staff members and service users was such that staff wanted to spend their time with people outside their normal working hours. For example, staff supported people to visit a pub once a week. Relatives were also welcome. This had proved popular and if people wanted to come back early there were enough staff to support people back to the home. Staff told us this was a great opportunity to talk to people and their families and they had all got to know each other really well and become friends.
- People told us their friends and families were made very welcome and could visit at any time. One person told us, "My daughter comes in to see me, she comes in at any time and the staff make her feel welcome". A relative told us, "[Staff are] always welcoming and no concerns about visiting, [I] always get a cup of tea. [providers name] runs this as her own home and expects staff to treat residents as their family which they do".
- Staff demonstrated a good understanding of equality and diversity and respected people's differences. Staff valued people's beliefs, life choices and cultural needs. Holy communion and a church service were held in the home every fortnight and staff also supported one person to attend church in the community once a week.
- Staff had built up positive relationships with people. One staff member told us, "I enjoy working here, I thought I would stay temporarily while looking for other work, that was ten years ago! I like interacting with

the residents, I like to think I can make a difference".

- Staff spoke about their work with passion and spoke about people warmly. Staff demonstrated a detailed knowledge of people as individuals and knew what their personal likes and dislikes were.
- The registered manager displayed the same passion and commitment to providing person-centred care. They told us how the residents always came first, saying, "Having the support from the staff and resident's families is what makes it feel like a little family. Not a day has gone by where I thought I don't want to go to work. I feel proud very proud".
- During our inspection we observed many caring and positive interactions between people and staff. We observed one staff member supporting one person using a 'fiddle muff'. A 'fiddle muff' is an effective way in minimizing agitation with people living with dementia. The staff member told us, "I do like to help where I can and this gentleman responds to attention, whereas, he will normally watch TV or sleep all day".
- A relative told us, "Godsend we got him here some of the other places we looked at were not nearly as nice. It was amazing through clubs I attend people said to me, you got him in the best place and I believe I have. He knows everybody and they know him it's very important. Staff are absolutely caring, no song or dance, just professional done with a smile and nothing too much bother".
- There was frequent laughter between staff and people. It was clear that all staff made a huge amount of effort to make sure people had a fulfilling day. This was no matter what the staff member's role was. They all understood how their role contributed to people's care and wellbeing.
- Staff interacted with people throughout the day in a happy and cheerful manner. Staff organised their day flexibly around people's needs and wishes. They checked regularly on each person, and listened attentively to what they had to say.
- Staff offered people comfort through gentle touch, held people's hands and hugged people who looked sad or reached out for that level of comfort. None of the interactions were rushed and staff waited until people had finished what they were saying or were relaxed before they left them.

Respecting and promoting people's privacy, dignity and independence

- Health care professionals told us the service always respected people's dignity. A health professional told us, "Staff are always pleasant and helpful and know why I'm coming. They are respectful of residents always find somewhere private to go. I'm very happy with the care here. No concerns it's always good here".
- Staff understood the importance of respecting people's privacy and dignity, particularly when supporting them with personal care. Staff were observed to knock on people's doors and identify themselves before entering. Staff ensured doors were closed and people were covered when they were delivering personal care.
- People were encouraged to be independent as possible. Care staff knew the level of support each person needed and what aspects of their care they could complete themselves. For example, the registered manager told us they had provided one person with a plate guard around their meal which meant they could eat independently without support from staff. However, staff had noticed the plate guard stood out. Instead staff had suggested the use of a large white bowl which was more discreet and promoted the person's dignity.
- The registered manager and staff were very passionate about promoting people's dignity and independence which was very evident throughout our inspection. The registered manager told us because of the person-centred care provided and not letting people wait to use the bathroom we have managed to get people from incontinent to becoming dry through a regular routine. They told us, "We would never let anyone wait for the toilet here not fair wouldn't want that for my family".

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

- People and their relatives, where appropriate, were involved in developing all parts of their care plan. One

relative told us, "We have been involved in her care plan from the very beginning and we are totally happy that she is being well cared for". This was confirmed by a second relative.

## Is the service responsive?

### Our findings

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

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 received outstanding person-centred care and were supported to follow their interests and make choices about how they spent their time. One person told us, "I love the garden here... I help pick up the leaves when the weather is good enough, I love to help the man [maintenance staff member] he doesn't mind". A relative told us, "I can't fault this place, the team here are great, they can't do enough for my parents".
- Records showed many positive comments from health professionals following a recent quality survey. One comment stated, 'honestly I can't think of anything that could be better, can I book my place now, but seriously I would have no hesitation in recommending Badgers Holt to my own family'. Another comment stated, 'I feel my patient has been given outstanding support'.
- The service recognised and responded to people's needs for social interaction and mental stimulation and many person-centred activities took place daily.
- We spoke with one of the activity coordinators who specialised in training exercises for older people and was qualified in a national exercise programme. They held an exercise group weekly at the home. They told us, "On Monday I had twenty people coming in to attend exercise's. I know what they can and can't do and staff keep me updated with their medical conditions. One lady I worked with had a frozen shoulder and I worked with her and noticed an improvement". They also told us when people come back from hospital, "I work with the closely and if I notice any swelling of the ankles encourage them to do ankle exercises to reduce the swelling".
- Other activities included flower arranging, arts and crafts and quizzes. Activities were held in the mornings and afternoon and since our last inspection had been introduced into the evenings as well. The service also had a bar that people could attend in the evenings. A relative told us, "Sometimes we can't get in to visit until after teatime when residents are often in their dressing gowns and drinking cocoa while some activity or another is going on...we feel like we're disturbing it, but we're make welcome by the staff even though its after dark".
- People were supported to access activities in the community. The service hired a mini bus and driver and provided outings every other weekend. These included trips to the New Forest, restaurants for cream teas, garden centres and the local beaches. Some people attended a weekly luncheon club in the local community to meet other people. One person attended a weekly knitting group locally and others enjoyed a local dementia huddle monthly.
- As well as planned group activities we observed that the staff were, in quieter times, actively seeking out residents and having interactive time with them including playing card games, doing jigsaws and reading material. One person was being assisted by a staff member to complete a jigsaw they told us, "I like to do puzzles, it keeps my brain working, but I do need help". Another person said, "I love my jigsaws, I've got one

going now in my room, the staff don't mind the table being in there...I'm off to do a bit now".

- As well as staff the service encouraged students to visit and engage with people at the home. A relative told us that a student from the local college visited weekly and involved them in puzzles or singing and dancing.
- The staff were flexible and responsive to people's needs and preferences, often finding creative ways to enable people to live as full a life as possible.
- People experienced care that was personalised and care plans contained detailed daily routines specific to each person.
- Health care professionals told us, that care plans were person centred and put people at the heart of the service. We saw written feedback from a recent health professional visit which stated, 'care plans I have seen were comprehensive and person centred, always taking into consideration residents interests and the persons history and interests'.
- The service had thought of creative and productive ways to develop their staff to deliver exceptional dementia care. For example, Badgers Holt had several 'Dementia Friend Champions'. A dementia friend champion is a volunteer who encourages others to make a positive difference to people living in the community and in care homes. They do this by giving them information about the personal impact of dementia and talking about what they can do to help.
- Before people moved into the home they were able to come in for day visits to see if they liked the home. We spoke to one person who was visiting and they told us, "I'm looking at care homes for the future. they all seem so very nice and have made me feel welcome". A relative told us, how their relative had come in for days and told us they were happier here than at home as they felt comfortable with the staff. They then moved into the home they said, "Never said want to go home or want to leave. Happy here. Can't fault them on anything".
- The registered manager told us about a day care gentleman where his wife phoned up one day very distraught and the provider and the registered manager went around to visit them as they could hear the desperation in their voice, and the registered manager said how could they not help so they visited and helped calm the gentleman for which the wife was very thankful.
- The Accessible Information Standard is a framework put in place from August 2016 making it a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information they are given. We spoke to the registered manager about how they ensured information was accessible for all people using the service. They told us, about different communication styles in place to support people. For example, for one person they are living with a sight impairment so staff read their care plan to them and talk to them about it.
- We observed picture communication boards hung up around the home for ease of use. These were used for people who were living with dementia as a visual aid to help overcome communication difficulties and to help identify pain.

#### End of life care and support

- Badgers Holt staff provided outstanding end of life care and worked extremely closely with healthcare professionals.
- The provider had the Gold Standards Framework (GSF) quality hallmark award in End of Life care. The Gold Standards Framework is a form of proactive palliative care and is nationally accredited. This helped to ensure that staff were equipped with up to date skills and knowledge in end of life care.
- Staff worked closely with a range of healthcare professionals to ensure that people received a pain free and dignified death.
- Care plans were in place to provide staff with guidance on people's preferences and wishes including religious, cultural and spiritual needs in the event they required end of life care.



- Do not attempt cardio-pulmonary resuscitation (DNACPR) decisions were recorded where appropriate.
- Relatives were provided with a place to stay and home comforts and refreshments so that they could be close to their family members in their days.
- The provider had produced a small information leaflet called, 'Bereavement information for families'. This contained information about arranging the funeral and registering the death as well as a list of organisations that might provide support and assistance.

#### Improving care quality in response to complaints or concerns

- People and their relatives told us they knew how to make a complaint. One relative told us, "We know who to complain to if we had any concerns...but we don't".
- The service had a complaints policy and procedure in place which was displayed in the home. This detailed the timeframes within which the complaints would be acknowledged and investigated.
- The provider and registered manager told us every effort was made to resolve any issues or concerns as quickly and informally, as possible, but that people were always reminded of their right to instigate the formal complaints procedure, if they so choose.
- No formal complaints had been made, however any suggestions on how to improve the quality of care were dealt with verbally, during a residents meeting or through a discussion with a relative

## 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

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

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility

- People and their relatives told us the service was extremely well led. One person told us, "I haven't been in here for long and I'm still settling in, but the carers are lovely". A relative said, "We chose this home out of ten others. When we came here to view, we were greeted by the manager and immediately made to feel at home here. [family member] has been here several weeks now and she has settled in well, thanks to the team here". Another relative said, "We chose this home because its local, but more importantly because it had good reports from yourselves (CQC) and from local recommendations; we made the right choice! The manager and staff here are wonderful". Other comments included, "Compared to other homes this is the best. Wouldn't stay anywhere else". As well as, "[family member] moved in three years ago. When we looked around there was no question that this outshone all the other homes".
- The provider and their team had recently won the prestigious blue rose award 2018 which is given by Hampshire Care Association in recognition and commitment to care for being an example and inspiration to others. This was backed up by all the positive praise we received about the service and the observations we saw throughout the inspection.
- There was an open and transparent culture in the home. The previous inspection report and rating was displayed prominently in the reception area.
- The provider had appropriate policies in place as well as a policy on Duty of Candour to ensure staff acted in an open and transparent way in relation to care and treatment when people came to harm.

Engaging and involving people using the service, the public and staff, fully considering their equality characteristics

- The provider and the registered manager were outstanding role models who inspired the local community to learn about Health and Social Care. For example, Badgers Holt worked with the National Citizens Service (NCS) to provide 15 to 17-year olds with opportunities to learn and develop their skills. NCS is a not-for profit social enterprise established to shape, support, and champion and lead a thriving national citizen service.
- We spoke with the staff member who coordinates the NCS project. They told us, "I teach the children in the morning about dementia through role play and fun play exercises. The children get to work with the service users at the home it has always been a fabulous time. [Providers name] lets me bring in children that don't fit in and they say it has changed their life. ... One boy played chess with one service user here, they did that for six weeks. This had a positive impact both for the students and the people living at the home.
- The service had built strong links with the local infant and primary school who came to visit the people at

the home for planned events. We saw written feedback from one of the schools which stated, 'excellent pupil interaction'. Records showed the school felt it was the perfect choice for their young children. They also praised the provider and staff and stated that they could not praise the staff enough for the warmth and understanding displayed towards the young people.

- The provider also worked in partnership with the local careers adviser for young children. The provider invited in children who were interested in a career in Health and Social Care and provided them with information and guidance. We saw feedback which stated, 'I can honestly say this is one of the best employer sessions that I have sat on. Your knowledge and passion for the care industry / your workplace shone through and I know that the pupils that attended gained a great deal.'
- The management were also involved in providing mock interviews in conjunction with the careers service to support young adults in interviewing skills.
- The provider also supported students who wanted to gain work experience by attending work placements at the home. We saw written feedback from a local college, thanking the team at Badgers Holt which stated, '[Student] has had such a positive working experience due to your team offering continued support and, subsequently, she has enjoyed her time with you'. We were told that this had a positive impact on people who enjoyed the company of the students.
- Feedback from a university student stated, having the opportunity to shadow the carers, before assisting with hands-on care provision myself, proved to me that this mentality and work ethic is something at the core of everyone working at Badgers Holt. The level of detail for which [registered managers name and head of care name] understood the care plans of each individual residents was truly inspirational. I hope to employ the attitudes and practices I've had the opportunity to witness at Badgers Holt in my future healthcare career'.
- Meetings were held with people and their relatives. These were held to ensure everyone was kept informed about what was happening in the service and to ask for their views and suggestions.
- The provider also sought feedback on the quality of the service through the use of an annual quality assurance survey sent to people and their families. The feedback from the latest survey in January 2019 was all positive. Comments from families included, 'always friendly and welcoming'. Warmly welcomed with a smile'. Badgers holt is very homely with exceptionally kind and caring staff. Mum is treated with much dignity and respect.
- The provider also sought feedback from health professionals who visited the home. The latest results showed lots of very positive feedback were received. These included, 'an excellent residential home that is always a pleasure to visit. The residents are very well cared for and staff are very professional and helpful'. As well as, 'staff are unfailing kind, professional and work with the best interests of their residents'.
- Staff meetings were held and minutes showed these had been used to reinforce the values, vision and purpose of the service.
- The provider told us they were very proud of the team and the care they give. They told us about how they had listened to staff and changed the working hours at night so staff with families were able to put their children to bed. They said this had made a difference and encouraged staff to stay as it fitted in with their family life.

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

- People and their relatives told us that management were very supportive. One relative told us, "My sister seems quite happy here, she's been in here for quite a few years now. I wasn't sure she'd settle but the staff and Manager have done a great job".
- Staff were positive about the support they received from the registered manager and management within the home. They told us this helped them to perform their role effectively. One staff member told us, "I

haven't been here long, but I really enjoy this job, the staff and manager have helped me a lot". Another staff member said, "I love working here and I'm supported by [provides name], the manager and everyone else really.

#### Working in partnership with others

- The service worked in partnership with the local authority and the local doctor's surgeries and district nursing team. All the health professionals were very positive about the service provided and the staff.
- We saw feedback from a health professional which stated, 'One of my patients had respite at Badger's Holt under quite challenging circumstances. Staff worked hard and with care to understand her needs as rapidly as possible and to good effect. They showed a professional understanding of the situation, were extremely flexible in terms of her best interests and liaised clearly with the future care home.

#### Continuous learning and improving care

- There were a number of systems and processes in place for monitoring the quality of care. These included: direct observations, night observations, medicines observations, and staff supervisions and appraisals. People's views and comments were collated, considered and used to develop the service.
- Throughout the inspection it was evident that the leadership team were all extremely passionate about their role and took ownership of ensuring improvements were continually being made for the quality and safety of the care provided.