

Care UK Community Partnerships Ltd

Mills Meadow

Inspection report

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Tel: 01728724580

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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?

Good 

Summary of findings

Overall summary

About the service

Mills Meadow is a registered care home with nursing providing personal care to up to 60 people. At the time of the inspection there were 53 people living in the home. Most of these people were older adults with needs associated with physical disability, dementia or long-term conditions. The home was not providing nursing care and was in the process of removing this regulated activity from its registration.

Mills Meadow is a purpose-built care home consisting of four separate wings; Queen Mary (residential dementia), Pembroke (residential), Castle Moat (residential) and Sheeran (dementia nursing care), each of which has separate adapted facilities.

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

People were exceptionally happy with the outstanding care they received from Mills Meadow. They shared numerous examples of the high-quality care that met and exceeded their individual needs, expectations, and enhanced their daily lives.

Feedback from relatives, visitors and professionals was equally complimentary describing dedicated and compassionate staff, who repeatedly went the extra mile to ensure people's lives were filled with enjoyment, meaningful engagement and inclusion in the place they called home.

People were consistently treated with dignity and respect in a way that celebrated and championed 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 demonstrated a positive attitude to reporting concerns.

Mills Meadow was a visible presence within the local community. Effective community links had been established, with different community groups regularly visiting the home and people accessing the local area through a wide range of activities. This contributed towards their enhanced wellbeing and sense of belonging.

Staff clearly understood their responsibilities and were passionate and dedicated in their roles. They actively engaged and included people and their relatives in the ongoing design and delivery of their care. This was in line with identified needs, best practice and continual developments in the home.

Feedback was welcomed, 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 continued to be managed safely. The home was visibly clean throughout. There were 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.

Since our last inspection, a visibly person-centered culture that consistently delivers high quality care and positive outcomes for people had been firmly established in Mills Meadow. People were held in the highest regard and at the centre of everything in the home. This was underpinned by the provider's principles, values and expectations of staff and demonstrates the characteristics of an outstanding service.

Rating at last inspection

The last rating for this service was Good (published 07 September 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 well-led.

Details are in our well-Led findings below.

Good ●

Mills Meadow

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 an inspector, an assistant 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

Mills Meadow 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.

A registered manager was not in post. The deputy manager was currently acting up as general manager. The previous registered manager had recently left the home and a new manager had been appointed. Plans were in place to register them with the Care Quality Commission. A registered manager 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 eleven people who used the service, ten relatives, two visitors and one visiting professional about their experience of the care provided. We spoke with the deputy manager who was acting manager, the provider's regional director and twelve members of staff, from the care, activities, catering and domestic teams. We also spoke with the previously registered manager who came to support the deputy manager during the inspection and still works for the provider.

We reviewed a range of records. This included five people's care records and medication records. We looked at four 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 received information requested as part of the inspection and electronic feedback from three professionals involved with the home and four relatives about the care provided.

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. Staff are on hand so feel secure, Discreet call system if you need help and staff come quickly.
- Established 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.
- Systems checked 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, "They [staff] know what tablets I have to take and bring them to me with a drink to help wash them down. They always ask how I am feeling and if I am in any pain will give me something to make me comfortable."
- 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, "Its lovely here, everything is clean, virtually spotless in fact and always smells nice. The staff take pride in doing a good job and work hard to keep things spic and span."

- 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 management team carried out regular reviews of accidents and incidents in the home as well 'as complaints and concerns to identify if there were any trends or patterns. These were discussed with the provider's regional director to ensure effective oversight, 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 assessed before admission to the home with family members and significant others involved in the process. Staff worked well with relevant professionals where specific needs had been identified, managing risks in line with recognised best practice and this was reflected in people's care records.
- People continued to be supported to maintain good health. One relative shared how the staff had quickly acted when they noticed a change in their family member's health and arranged for them to go to hospital. They told us that they appreciated that the member of staff accompanied them and their family member to the hospital as well.
- 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, "Staff are properly trained and know what they are doing."
- New staff completed a detailed induction and did not work unsupervised until they were confident they could do so.
- The management team had an ongoing 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, "The training is good, helps you to develop your skills and knowledge. I was supported to do [recognised qualification] in care and it consolidated all what I had learnt and increased my confidence."

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 portion sizes, selection and quality of the food provided. One person said, "Food is beautifully presented, we get two or three choices, good variety, they [staff] dish up for you what your appetite is; that is good." A relative shared with us how the staff had good knowledge of people's preferences. "We came back one day after I had taken [family member] out and she told them [staff] that she was not very hungry, so they did her a toasted tea cake without asking as they

know she likes that, and she ate it all."

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, "The staff always ask me, how are you? Can I get you anything? If I need help they always check I am ready."
- 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 complimentary of the environment. One person said, "It is lovely here the décor is homely but smart and tasteful and to a high standard. There are lots of different rooms to use to socialise with friends or family or quiet places if you want to be on your own and not in your [bed]room. I like to get out and about not be stuck in. On bad days I sometimes need a wheelchair to get about and that's not a problem as the home and garden accommodate wheelchairs."
- 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 individuals and empowered as partners in their care in an exceptional service.

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

- People were extremely proud to live at Mills Meadow and described it as a 'home from home'. In sharing numerous encounters and experiences of living at Mills Meadow, they spoke with happiness and fondness. One person was keen to show us their bedroom and the attention to detail that staff had shown in ensuring their preferences were met. They told us, "Nothing was too much trouble. I chose the colours and [maintenance person] took the time to put up all my [personal objects]. They never complained, not once, even when I got them to move things around till it was just right. I like having my own things here; it has helped me settle in."
- People were extremely complimentary about the staff approach. One person commented, "You are not a number here, treated as an individual." Another person told us, "I am pretty lucky to live here. I want for nothing, the food is delicious, the care is first rate, staff understand me and know what I need sometimes before I do, plenty to keep me entertained. Nothing is too much trouble. I consider myself blessed to live here." A third person commented, "This is my home I like the cosiness of it and availability of anything I need, they [staff] monitor me well. It is a lovely place; it should have a star for performance."
- Relatives and visiting professionals were equally complimentary about the staff approach. Comments included, "Wonderful, you couldn't ask for more, thoughtful, exceptional and genuine care." One relative told us how they had cherished the staff capturing their family member who lives with advanced dementia displaying happiness and sharing it with them. "I saw some of the video clips that showed how well [family member] was being cared for, so happy in herself. She was dancing and enjoying herself." Another relative shared with us how their family member had been supported with their mental health needs during a challenging time. They said, "[Family member] was agitated but they [staff] managed his meds and by dropping some of them he is now more himself and coming back from the dark place he was in." They described how 'amazing' the staff had been towards the family recognizing that they were worried and had provided comfort and reassurance. A third relative commented on the positive impact and change they had seen in their family member's wellbeing since moving into the home, "The feel of the place when I come in is very relaxed, not regimented, lots of times there is something going on. [Family member] does not know me, but he knows the faces of his carers, it shows that the carers do interact with him. I know he is looked after when I am not here, Staff treat him like a person rather than a resident."
- Staff frequently went the 'extra mile' for people. For example, the maintenance person shared with us how they had brought in their tablet and set up face time so that a person could communicate with their family who were worried about them. People and relatives shared numerous instances where staff had chosen to come in on their day off to spend time with them to celebrate a special occasion or were passing by and dropped off items of interest for people such as the latest magazine. One person said, "A while back I was

talking to [member of staff] about [favourite film] and why I like it so much. They were in town shopping and saw a book about [leading actor]. They got it for me and brought it in that afternoon, even though they were not working. That was a lovely thing to do; felt very special."

- Staff recognised important anniversaries and provided emotional support if needed. They helped people to celebrate their birthdays with their families and friends. One relative commented, "They [staff] were very kind to her, we had a birthday party for her last weekend, they provided all the add-ons, balloons, sandwiches, cakes, she was so happy, we took over the front room all 10 of us."
- People and staff took an active interest in one another's lives resulting in positive friendships being 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 relative told us, "Staff and [family member] have conversations, they share their lives, so important to [family member] as she is a people person, the staff get to know her and she them, got to be beneficial to both."
- Staff had a comprehensive knowledge and understanding of people. They 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. For example, when supporting people to mobilise or when one person became distressed.
- 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, "First thing I did when I got here today was to go and make a cup tea just like I would do at home, it is lovely."
- The staff and management team held people in the highest regard; consistently addressing them with friendliness and warmth in their interactions. Emphasis 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 patient and tolerant they never rush or belittle people. They understand people's conditions and shine in how they communicate with people. Especially those who have dementia. Even if it takes time to understand or to be understood, staff appreciate how frustrating it can be trying to express yourself and are very compassionate that way." Another relative commented, "I am really impressed with the depth of knowledge and understanding each member of staff has, that is very reassuring. It is genuine, they all talk to [family member], it is not for show, it is great."
- 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 maintenance, 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 and going for a walk in the gardens in the afternoon when one person had become upset. A relative told us, "It is not just the care staff who go out of their way to look after people. Everyone who works here takes time out for people and chats with them, asks how they are, how their day is going. It's the little things like that that matter. You often see [chef] coming out to see if people enjoyed their food, [maintenance person] helping people to do some gardening or to feed the chickens. From the moment you walk in you can tell the staff want to be here. They smile at you and greet you like your family and make time for you." Another relative commented, "Many [people] have issues with anxiety [including our family member]; there is a relaxed feel about the place which helps to ease that anxiety – we've heard it called 'The Mills Meadow Way'."

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] and I talk about how things are going every so often, am I happy with what is in place? does anything need to change? I am involved in what is going on in my life, nothing about me happens without my say so." A relative commented, "Care plan reviews I have been invited to, been given advice on dementia, sat with staff recently and they have helped to explain to [family

member] that they would help with [personal care] and how it would [benefit them]. I can talk things through with the staff, they include us, and we work as a team."

- 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. This included specific trips and activities, including for one person, arranging for them to play bowls which was something they used to do. The person told us, "I wished I could do that again and they [staff] have arranged in September, a visit to the bowls club that has indoors and outdoors bowls."
- 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. One person commented, "I am very independent, it is freedom here." A relative, on hearing this from their family member, said, "[Family member] needs help but it is good to hear that she feels she has freedom, despite needing help in and out of the chair, bed, [personal care] etc. That says to me that she makes the choices, got total autonomy."

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 discreet and sensitive to your mood. I've never felt uncomfortable they put you at ease." A relative commented, "[Family member's] moods can vary, and we appreciate the unconditional love, care and support the staff team show her. I have not got a bad word to say about any of them even in the most trying of circumstances they are patient, kind and always respectful."
- 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 try and do things for myself and help me when I need it."
- 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 good. At this inspection this key question has improved to outstanding. 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 were provided with a wide range of stimulating 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. This contributed to an enhanced sense of purpose and belonging. People and relatives were full of praise for the activities on offer. One person said, "Last week they had something on every day, one person went on a boat trip and Morris Dancers came in. Then they had open day on Saturday, the activities are phenomenal." Another person commented, "I like the singing, it is nice to pray together. I like the poetry, been to exercise classes in the arm chair. They [staff] encourage us to join in, it is part of the homeliness. Been to the ballet, seen Swan Lake, [several of us] went to the theatre for that."
- A popular weekly activity involved people creatively accessing the local community on Trishaws (type of rickshaw) pulled by staff and volunteers. One person said, "The rickshaw was very exciting, quite a few of us like it." Another person described the sense of freedom it gave them to have the 'wind in their hair as they went around the town'. A relative commented, "[Family member] and I went on the Trishaw, I did not expect to go but we were able to sit side by side. We went quite a distance and it was lovely for her to see the greenery, they stopped so that we could get a lovely view of the castle."
- Staff ensured people who were cared for in bed had the same opportunities for meaningful engagement and activities as everyone else with protected one to one time with a designated member of staff.
- There was a shared ownership and commitment across the staff team to ensure people enjoyed a fulfilling life. Staff supported people to complete their requests for things they wanted to do, recognising this was important to them. These suggestions contributed towards the homes 'wishing on a star' list. This was prominently displayed in the entrance of the home encouraging conversations about different things people might want to do. It showed completed and upcoming wishes accompanied by pictures of people achieving their ambitions. This had included trips to ballet, theatre, museum, art gallery, arranging specific trips and holidays for people.
- For one person, staff facilitated for them to go to their church with their family, recognising that faith was important to both them and their family. The person's relative shared their appreciation of this stating, "I do understand that with dementia experiences can still be enjoyed if not recalled. I know that Mills Meadow makes the absolute most of this! It is not a place where people go to die. It is a place where life is lived! Where life is celebrated. But even so, making the effort to organise, plan and carry out this activity, to make [family member's] dream come true and allow us to that that precious time together. It means so much to both of us."
- For another person whose wish was to visit Australia but because of their health was unable to do so, the

home brought Australia to them. This included people playing didgeridoos, a BBQ, the home decorated with Australian flags and memorabilia including inflatable crocodiles.

- Professionals spoke extremely highly of the home and shared numerous examples of how the staff supported people to have excellent outcomes. One professional commented, "I have found the staff to be very attentive towards [people] and at the recent open day they had pulled out all the stops to give everyone the opportunity to enjoy the day. I was particularly impressed with a carer's approach towards a person with cognitive/memory impairment and hearing deficit. They took time to enable the person to make a choice of which ice cream they wanted and showed warmth and compassion."
- The home held regular events to welcome the wider community including coffee mornings, children and toddler groups, choir sessions, charity and fund-raising events and had participated in National Care Home Open Day.
- In recognition of the home's approach to achieving positive outcomes for people, Mills Meadow was highly commended for culture, creativity and activities in the Suffolk Care Awards 2018.
- People received an exceptionally high standard of personalised care that was receptive to their individual needs and respected their preferences. One person said, "I am included in all aspects of my care and this helps me decide what is right for me."
- Relatives described collaborative working with the staff regarding ongoing care arrangements. One relative commented, "I have nothing but praise for the home, they are excellent at liaising with me." Another relative said, "[Family member] has had a few health problems since moving in but they [staff] have acted swiftly; had the GP in, got the speech and language team in and kept me informed of all the developments. They have asked my opinion on adopting any new strategies and it is heartening to see [family member] responding to the actions taken. They are putting on weight and getting stronger day by day."
- The delivery of care, including consideration to people's needs and wishes, ensured that people received outstanding care that greatly 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 were given the opportunity to observe their faith and any religious or cultural requirements documented in their care records.

End of life care and support

- When people were nearing the end of their lives, they and their families were treated with exceptional kindness, compassion, dignity and respect. Staff provided people with person-centered, end of life care that took account of their needs and wishes. We saw numerous thank you cards and feedback 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. There were several complimentary reviews on an independent care home review website from relatives describing the dedication and kindness of staff in providing end of life care to their family members. One review stated, "Their [staff] care and communication could not be faulted, even coming in on days off to see how she was. Her last weeks were vastly better at Mills Meadow than they would have been elsewhere, and we were all treated with dignity and love."
- The home was working towards 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.

Improving care quality in response to complaints or concerns

- There was a comprehensive complaints procedure in place. The management team dealt with concerns and these were 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 management team 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. There was appropriate signage around the home to aid navigation and promote independence. The management team 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 good. At this inspection this key question has remained good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- Feedback about the staff and management team was complimentary. People's comments included, "Can't do enough to help you', 'the senior staff are very approachable." One person said, "I know [previous registered manager] has left but nothing has changed, they left things in good working order and they [management team] have got on with it. Been no disruptions or problems. Heard that [previous registered manager] has come in today to support the deputy manager who is in charge, that's nice, shows how supportive and how much of a family it is here."

- Relatives were equally favourable about the management and leadership arrangements. A relative said, "Although [previous registered manager] has recently left it hasn't changed the running of things, [deputy manager] does a fantastic job and is always on hand if you need to have a word."

- The provider's regional director confirmed that a general manager had been appointed and would be applying to be the registered manager at Mills Meadow.

- Staff were encouraged and supported to professionally develop within the home and the provider's organisation. Staff shared numerous examples of being respected and appreciated by the management team and were motivated within their roles.

- There continued to be an open and transparent culture in the home that enabled learning from events and supported reflective practice. 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.

- The management team were 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.

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

- People and relatives were complimentary about their experiences of Mills Meadow, with themes emerging of 'homeliness,' 'family feel', 'living life to the fullest' and 'compassionate caring staff.'" One person commented, "The staff want to do right by you, try to make every day fun and joyful. I love living here, waking up wondering what on earth I am going to get up to today, we have so many adventures."

- 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 Mills Meadow had been rated 9.6 out of a score 10 with 38 complimentary reviews. One person commented following a recent stay, "The facilities were excellent with a happy atmosphere in every area of the home. I would not hesitate to return to the home if I should need further respite care or indeed in the future on a permanent basis."
- Mills Meadow was an established part of the community, taking the opportunity to raise awareness of dementia and issues affecting older people, through fund raising events that invited the local community to the home. Staff recognised the importance of enabling people to maintain their local links and facilitated this through a wide range of activities that resulted in positive outcomes for people.
- Staff feedback was frequently sought through surveys and team meetings and they were encouraged to make suggestions and share ideas.
- 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 provider's regional director shared with us several measures that the organisation had introduced to support the LGBTQ community in addition to reviewing their policies and procedures. This included supporting people and staff to attend pride celebrations across the country. They advised us of the changes to the Mills Meadow welcome pack and guide to the home, that was more inclusive to people, enabling them to decide for themselves and feel comfortable and safe with how much information they shared without it being forced on them.

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

- The home continued to work 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, "I have had the opportunity to chat with people and family members and have been told that they feel the home is well run and that the team work well together across all levels. The staff know people well." Another professional commented, "We have no concerns about Mills Meadow. The home is well- run and the staff give 100% to ensuring people receive quality care and enjoy a meaningful life."