

National Star Foundation Foundation House

Inspection report

Foundation House, National Star College
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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Outstanding 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

Foundation House is a care home providing personal and nursing care to 12 people with acquired brain injuries, physical disabilities, learning disabilities and mental health needs at the time of the inspection. The service also supports one person who lives on-site in their own self-contained flat with personal care support. The service can support up to 12 people in a residential setting.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

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

The vision of Foundation House was to promote "A world in which people with disabilities are able to realise their potential as equal and active citizens in control of their lives". All staff and senior management demonstrated this clear vision and a highly positive person-centred culture was seen throughout. Staff had set high standards for themselves and this promoted an exceptionally positive culture which challenged disability perceptions and had improved the confidence of people and the opportunities available to them. Throughout the inspection, we found people and staff were motivated and passionate about equality and empowering people to live the lives they want.

People and carers spoke overwhelmingly of the positive support, guidance and healthcare interventions people had received. They were full of praise for the staff in terms of their kindness and compassion. People were 'very happy' with the service they had received. We received positive comments about their views and experiences. People told us they felt very safe living at Foundation House. People and their families viewed the staff as exceptionally skilled and knowledgeable when supporting them with complex health needs.

People were supported by staff who had received exceptional training and support to carry out their role. The service had developed very thorough staff training programmes. These were bespoke to the needs of the people living at Foundation House and ensured staff were highly skilled in meeting very specific needs. The training systems developed had received local and national recognition and were used to train staff in other agencies as well as other professionals.

There was a strong sense of "family" and teamwork. Staff were proud of the work they did and were fully committed to ensuring people were at the centre of everything that took place at Foundation House. 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.

The service's focus on challenging expectations and misconceptions of disability had led to excellent outcomes for people. Staff told us how the ethos of the service was that disabilities should never be considered a barrier to opportunities for people. Throughout our inspection we heard comments from people about how staff had supported them to achieve their goals and aspirations.

Staff were constantly looking for ideas on how to improve people's quality of life. Assistive technologies were used creatively, and innovative technologies were developed with young people to enhance their communication and independence. People's goals and aspirations were explored with them and plans were made to achieve these. Staff worked hard to make sure people had opportunities to lead as full a life as possible. They ensured daily activities were tailored to meet people's individual needs, preferences and abilities. Staff made sure people had opportunities to enjoy themselves. People's suggestions and ideas were sought and valued when it came to plan these activities.

The registered manager and extended leadership team offered excellent leadership and had a clear vision about the direction of the service. They were committed to improving people's lives and ensuring they had the best care they could receive. They expected the same high standards from the staff who were also committed to these shared values. The management team were very much part of the overall care team at Foundation House. They were very involved in people's care, visible and approachable. Staff working at the service clearly understood their role and worked hard to promote a homely atmosphere. The provider had developed excellent partnerships with other stakeholders to enable better outcomes for people with disabilities.

There was a robust quality assurance system in place to ensure people received the best possible service. The registered manager and provider worked closely with partner agencies and services to promote best practice within the service and make a positive impact to people's lives. The service was constantly striving to innovate to ensure they were providing the best possible care to the people they were supporting. The registered manager had developed a strong leadership team within the service to ensure the high standards implemented were sustained in their absence.

The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent.

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

Rating at last inspection

The last rating for this service was good (published 5 September 2017).

Why we inspected

This was a planned inspection based on the previous rating.

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good 

The service was safe.

Details are in our safe findings below.

Is the service effective?

Outstanding 

The service was exceptionally effective.

Details are in our effective findings below.

Is the service caring?

Outstanding 

The service was exceptionally caring.

Details are in our caring findings below.

Is the service responsive?

Outstanding 

The service was exceptionally responsive.

Details are in our responsive findings below.

Is the service well-led?

Outstanding 

The service was exceptionally well-led.

Details are in our well-led findings below.

Foundation House

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 two inspectors.

Service and service type

Foundation House 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.

Foundation House also provided a domiciliary care service to one person. It provided personal care to the person who was living in their own flat on the premises of Foundation House.

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 gave the service 24 hours' notice of the inspection as the service had notified us they had implemented additional infection control procedures, and we needed to ensure the registered manager and provider could support the inspection.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. 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 support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke with seven people who used the service and four relatives about their experience of the care provided. We spoke with five members of staff including the provider, registered manager, assistant manager, senior care workers and care workers.

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

After the inspection

We spoke with one professional who regularly visits the service.

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.

Systems and processes to safeguard people from the risk of abuse

- All the people we spoke with told us they felt safe. When asked if they felt safe, one person replied, "I feel very safe here." Relatives we spoke with also told us they felt their family member was safe.
- Staff received training on safeguarding adults and were knowledgeable about the procedures to follow if concerns arose.
- Staff knew what action to take if they suspected abuse or poor practice. Staff said they felt confident to raise concerns about poor care. Staff were confident to 'whistle blow' and knew which outside agencies to involve if needed.
- The service had a robust system to safely manage people's money.

Assessing risk, safety monitoring and management

- Risk assessments were in place for people. When risks were identified, care plans provided clear guidance for staff on how to reduce the risk of harm to people. There were clear guidelines for staff on how to support people with risks associated with skin care and specific medical conditions. Staff we spoke with were knowledgeable about the guidelines provided and could explain how they would support people in a safe manner.
- Staff had excellent understanding of people's behaviour support plans and could confidently explain how they would support people to manage any behaviours which may cause distress.
- Risks associated with people's eating and drinking had been identified and appropriate actions were taken to help reduce these risks. Staff ensured they supported people who were at risk of malnutrition or choking in line with the recommendations made by the health professionals involved in their care.

Staffing and recruitment

- There were enough numbers of staff to meet people's needs. We saw there were enough staff to ensure people received support in line with their assessed needs.
- People were supported by a consistent team of staff that knew their needs well. People and relatives confirmed this.
- People were protected against the employment of unsuitable staff because robust recruitment procedures were followed. Checks had been made on relevant previous employment of new staff as well as identity and health checks. Disclosure and barring service (DBS) checks had also been carried out. DBS checks are a way that a provider can make safer recruitment decisions and prevent unsuitable people from working with vulnerable groups.

Using medicines safely

- Staff were trained to handle medicines in a safe way. They completed a competency assessment every year to evidence they had maintained their knowledge and skills.
- Medicines were stored, administered and disposed of safely. Medication administration records (MAR) were accurately completed and showed people received their medicines as prescribed.
- People had a care plan in place regarding medicines. This gave details about how people liked to receive their medicines, what medicines they had been prescribed and what medical conditions these were for.
- Detailed guidance was in place to support staff when giving medicines prescribed on an 'as and when required' basis (PRN).
- Some of the people living at Foundation House self-medicated. We saw there were robust procedures in place to support people to manage their medicine needs independently.

Preventing and controlling infection

- Staff completed training in infection control and food hygiene. This meant they could safely support people with food preparation and understand the procedures in place for minimising the risk of infections. We observed staff wearing gloves and aprons when supporting people with their care.
- The provider had implemented robust infection control procedures to minimise the risk of Coronavirus to the people living at Foundation House, staff and visitors.
- The service was clean and tidy and free from odour.

Learning lessons when things go wrong

- The service had effective arrangements to respond to incidents, accidents, concerns and safeguarding events. The service had a central log for detailing these and there was a system to deal with each one as appropriate.
- The service had a process of learning from accidents and incidents. The registered manager told us that when an accident or incident occurred, staff would receive a full debriefing and be given time to reflect on the incident during supervision to enable learning.
- Following a safeguarding incident in one of the provider's other locations, they had fully reviewed their processes for storing people's money. A new system had been introduced which is used in UK banks to store money. This included the use of secure bags and coded tags to store money. Following the introduction of this system, there had been no incidents of missing money.

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 improved to Outstanding. 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

- People continued to receive effective care based on current best practice as staff had sought advice from health care professionals in specialist areas to ensure their practices were current.
- The provider had invested significant resources in the establishment of a dedicated technology development team and we found this had resulted in outstanding outcomes for people. We saw how the team had supported staff to research and purchase adaptive controls for people to enable them to play games consoles which they had loved to do prior to their accident. This had resulted in people engaging more with each other and staff through gameplay which had nurtured a stronger bond between all of them.
- The service made excellent use of technology for people living at Foundation House, including access to loan equipment to practice and test pre-ordered bespoke items for effectiveness. People were very confident in using a variety of assistive technologies on their own terms to develop their independence and autonomy in areas such as self-care, domestic tasks, mobility, communication, leisure, sensory and other therapeutic activities. The registered manager with the physiotherapist had purchased an electronic game which was controlled by an adapted roll ball mouse. This had been shown to have positive impacts on people's sitting balance, hand control, and concentration. For one person, their ability to eat independently had improved as a result of using this therapeutic electronic game.
- Sensory equipment had been individualised to ensure it met the needs and development outcomes for each person. These accessible sensory kits had been trialled and tested rigorously by people to ensure they would be fit for purpose. The technology team had ensured sensory equipment would be easy to use so that all staff could use the equipment with minimal guidance. This had resulted in a significant increase in the use of sensory activities by the staff as part of people's daily routines.
- The technology team sourced commercially available products for people to use to manage and control their living environment. Through use of environmental controls people could open their curtains, doors, listen to music and turn lights on and off and order food from takeaways. Staff were able to support people to develop life skills. Staff explained by using commercially available products instead of specialist products it increased the opportunity for people to continue using these types of products if they moved away from Foundation House and thereby maintain their skills and independence.
- People's needs were assessed and reviewed to ensure the support they received was delivered appropriately and based on current best practice.
- People interested in moving to the service could access information on line, through a video made by and with people living at the service, and in a handbook to help them make their choice.

Staff support: induction, training, skills and experience

- People were supported by staff who had received exceptional training and support to carry out their role. People told us staff had an 'excellent' understanding of their needs. One staff member commented how they felt the training was 'Excellent' and had fully prepared them for their role.
- The provider had established their own training department which was accredited by City and Guilds. In addition to completing training the provider considered as mandatory, staff also had access to bespoke training delivered by health professionals employed by the provider and external training agencies. For example, physiotherapists and occupational therapists provided personalised training for people with complex moving and handling needs, and the behaviour support team provided staff with individualised training to help staff support people to manage their emotions. The training team told us this benefitted people as training could be delivered promptly to respond to any changes in their needs. Where people had displayed aggressive behaviour towards staff, the behaviour support team had delivered training to staff promptly following incidents and had developed new behaviour support plans for this people which had led to a marked improvement in their behaviour and emotional well-being.
- Staff were unanimous in their praise for the provider's induction process. This involved a three-week induction where staff also received training around supporting people in educational settings. Staff told us this gave them the flexibility to work across all the provider's services. Staff told us the varied induction course had given them the opportunity to fully understand the needs of the people they were supporting.
- The training lead told us that they had developed a bespoke training course for all agency staff who were required to work for the provider. The training lead and registered manager told us this was done to ensure there was a consistent approach across all staffing groups and ensured agency staff had been sufficiently trained to work with the people living at Foundation House. The provider had won the Prince's Trust Award for innovation in training and learning in relation to their induction programme.
- The provider had worked with people's families from all of their services to develop training courses for staff which would enable staff to better understand the journey of family members of people living with disability. The training lead told us how each module was bespoke to each of the provider's services so the training was person centred to the people and their families living at those services.
- Staff felt supported by the management team. They told us they received regular one to one meetings with their line manager to discuss work related issues and their development needs.

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

- The provider had developed excellent arrangements to ensure people received effective and timely care from other health professionals.
- The provider had employed speech and language therapists (SLT), occupational therapists and physiotherapists. The registered manager told us this was to provide a quick service to people whilst longer term support was sourced from community professionals.
- The provision of these therapists had an excellent impact on people. One person was mobilising with the aid of a wheelchair following an accident. Through ongoing support from the provider's physiotherapy team, the person was able to stand and walk a few steps with the use of a prosthetic leg. We saw how this had improved the person's physical and emotional well-being. The person told us how through this support they had been able to have their first 'proper night out in years'. They told us how this would not have been possible without the support they had received. They also told us the ability to stand had also resulted in increased comfort levels for them.
- The service had worked with specialist health professionals to ensure staff had the appropriate skills to support people at Foundation House. The service had worked with the brain injury dysphagia team to support one person to move from thickened to free-flowing fluids. The service had developed a video care plan where the health professional demonstrated how to use the specialist aids supplied to the person. This video care plan had then been used to train staff in the service.

- People were supported to manage their own health care needs wherever possible. Comprehensive care plans provided personalised guidance about their care and support needs in respect of their health and well-being. People could make appointments with a range of health care professionals and with their GP.
- People's oral health care and preferred routines were known by staff. Staff assisted and prompted people to maintain good oral health care. Where people had specific oral health needs, the service had liaised with their dentist to provide bespoke training to staff.

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

- People were supported to maintain a healthy, balanced diet which met their needs and preferences.
- Staff had spent time with people to identify their strengths and enable people to be involved in making choices about their meals and preparing their meals.
- Risks associated with people's eating and drinking had been identified and appropriate actions were taken to help reduce the risk. For example, where people were at risk of choking, staff ensured they were supported appropriately.

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

- The service was clean, tidy and homely.
- The service had been fully tailored to the needs of the people living there. We saw how the service had been planned and built with the specific needs of the people living there as part of their transition from College.
- People had access to an outside space which had been adapted to ensure it was fully accessible for wheelchairs.

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 were knowledgeable about the principles of the MCA.
- During the inspection staff asked people if they were happy for us to be shown around and whether they wanted to speak with us. Their wishes and choices were respected.
- Where people did not have capacity to make decisions, they were supported to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.
- Every avenue was fully explored to ensure people were able to make choices independently.
- We saw evidence that where people lacked capacity to make decisions and were at risk of being deprived of their liberty, the registered manager had made an application to the relevant supervisory body. At the time of our inspection, there was one person receiving support from Foundation House subject to a DoLS authorisation. The conditions detailed in the authorisation were being met by the service.

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 Outstanding. At this inspection this key question has remained the same. 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

- Throughout this inspection it was evident that people were cared for with compassion and kindness. Staff at every level wanted people to be happy and live a life that was meaningful and fulfilling. There was a genuine sense of fondness and respect between the staff and people.
- People told us staff were kind and caring towards them. One person said, "Staff are amazing. They are like family to me." People told us how staff would stay beyond their shift to spend time with them if they were unwell or required additional support.
- The relatives we spoke with were overwhelmingly positive about the caring nature of staff. Relatives praised the positive impact of staff on people's wellbeing. One relative said, "(name of person) has progressed so much here. He absolutely loves it. His independence and mental health have significantly improved. The staff support to (name of person) and us is tremendous. I cannot sing their praises enough." One relative said, "I cannot stress enough just what an impact Foundation House has had on all our lives. I find myself rarely thinking about (name of person) but in a good way! When I phone, I can hear happy residents who are being spoken to with respect, dignity and fun; visiting Foundation House, myself, and my family and friends are always greeted joyfully." Another relative said, "They (staff) treat them like their own family. Nothing is too much for them."
- We observed staff interacting with people and found they were supportive, kind and caring. It was evident that staff knew people's communication needs well and were able to engage effectively with them.
- The values of the provider were based around equality, respect and tolerance of all people regardless of their personal beliefs. Staff were exceptionally skilled in supporting people's cultural, gender and spiritual needs in a caring and compassionate way. Staff had received training in equality and diversity. They creatively supported people to develop an understanding of their own and other's social, cultural and sexual diversity, values and beliefs. Where required, the provider's 'Talk2Team' also counselled and supported people on an individual basis through specific issues such as sexuality, faith and relationships.
- Staff creatively met people's individual needs relating to their protected equality characteristics and their values and beliefs. The provider had developed and piloted an innovative sexual orienteering programme. Creative, age appropriate activities and resources had been developed to support people with learning disabilities to gain a better understanding of their sexual orientation, to recognise diversity and to make informed choices about their own sexuality and relationships.
- The provider had hosted an event which focussed on people exploring, valuing and respecting other people's relationship preferences. The event focused on different types of relationships such as same gender relationships and discussions were based around people's understanding of this and promoted a culture of respecting people's individual preferences.

- Through their 'Creating Communities' project, the provider had developed international links enabling people to partake in joint projects and gain a deeper understanding of other cultures. FestABLE, the first National Festival of Specialist Learning, was hosted by the provider to look for solutions to current issues facing people with disabilities in care and education settings. People spoke positively about these experiences. We found them determined to challenge stereotypes and were passionate about promoting disability issues. People living at Foundation House had taken part in the BBC's Disability Season which resulted in three one-hour programmes about the people called 'The Unbreakables'. The positive feedback identified how people can challenge their own thinking and views of young adults with disabilities. We heard how the people involved had gained hugely from this experience growing in confidence and actively seeking new ways to sustain the impact this programme had. This included people setting up their own 'Don't Call Me Special' campaign and others doing talks at local schools.
- People's needs in respect of their religious beliefs were recorded, known and understood. People had opportunities to practice their own beliefs and religion as well as explore different religions and cultures to develop greater tolerance and to be able to make a positive contribution to their community
- The service had built strong links with local faith groups, so people had access to religious ministers if they indicated a preference to do so.

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

- People and their relatives told us the service involved them in developing and reviewing their care plans and their views were respected.
- Every effort was made to ensure people could take part in making decisions around their care. Where people had communication difficulties, referrals were made to professionals such as SLTs to maximise people's communication needs and empower them to express their views.
- We observed staff supporting people in ways which took their choices and preferences into consideration. This included asking people about their lunch preferences and how they wanted to spend their day.

Respecting and promoting people's privacy, dignity and independence

- Staff were respectful and ensured people's dignity and privacy was maintained. When carrying out personal care or having private discussions with people, staff ensured doors closed.
- When people chose to speak with us, staff respected people's right to speak with us privately.

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 now improved to Outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- Staff focus on challenging expectations and overcoming barriers had led to excellent outcomes enabling people to follow their interests and lead an active life.
- People told us they led an active life. People told us they loved to watch the soaps, play electronic games and swim. They had been to nightclubs, theatre, cinemas, holiday, music events and to the circus. One person was being supported to holiday in the place where they holidayed as a child. Another person told us they worked at a local supermarket. Other people were supported to volunteer at the local library and helping at the National Star College drama and music sessions.
- Relatives we spoke with told us their family member led an active and fulfilling life. One relative told us how since their family member had moved to the service they had 'lots going on'. The relative told us how they felt this had also led to an improvement to their emotional wellbeing
- People told us staff had gone over and above to ensure they could follow their interests and hobbies. Two of the people living at Foundation House enjoyed fishing prior to moving to Foundation House. We saw how the registered manager and staff had trained themselves and learnt how to fish safely and where to fish for disabled people. Following on from this, both people were able to go fishing with staff and had also gone away on fishing holidays. Staff told us how although they had no prior experience of fishing, they self-taught via books and online videos so that they could enable people to enjoy their passion. Staff told us how this had also resulted in significant improvements to both people's emotional well-being and sense of self-worth as they could once again take part in an activity which they were passionate about.
- Another person wanted to be able to go out more frequently but was restricted due to requiring staff to push their wheelchair. The registered manager told us how staff had supported the person to privately purchase an electric wheelchair which enabled the person to move around independently for the first time in over 7 years. Staff had worked closely with an occupational therapist to ensure the person was assessed to have a wheelchair which was suitable to their individual needs and had the correct seating. Staff supported the person to gain confidence and learn about road safety by supporting the person to use their electric wheelchair in a local park where risks were minimal. Following on from this, the person was able to access the local community as frequently as they wanted with minimal staff support.
- One person had difficulties participating in any group or social activities. As the person had a passion for music, the service engaged the support of a music therapist who using adapted technology and music supported the person to express themselves and make music. Staff worked closely with the therapist to embed this into the person's daily routines including setting up a computer programme on the person's laptop to use outside of sessions. We saw how the music sessions had greatly improved the person's confidence, ability and willingness to get involved in social activities with other people living at Foundation

House including having dinner and taking part in social activities. We saw how prior to music therapy, the person used to spend only a short amount of time in the lounge before becoming distressed.

Planning personalised care to ensure people have choice and control and to meet their needs and preferences

- The service's focus on challenging expectations and misconceptions had led to excellent outcomes for people. Staff told us how the ethos of the service was that disabilities should never be considered a barrier to opportunities for people.
- Personalised and goal orientated care plans were developed from the knowledge gained during the assessment process and other information provided from health and social care professionals. People were involved in monitoring and reviewing these wherever possible, so they reflected people's current routines, likes, dislikes and aspirations.
- The service had introduced video care plans to enable staff to have a greater understanding of people's specialist equipment and how to support them. For example, we saw how the service had worked with health professionals to develop video support plans around specific equipment such as eating aids to ensure people received personalised support. The service had developed a robust process to ensure staff sought consent from people and always maintained people's confidentiality when developing and using video care plans.
- Throughout our inspection we heard comments from people about their aspirations and the support staff gave them to achieve these. These included comments around how staff had supported people to gain employment and volunteering opportunities.
- The service excelled in ensuring people received a smooth transition between services with minimal disruption to their wellbeing. All transitions were a multi-professional process and were aimed at maintaining continuity, independence and autonomy for the person. In some cases, the service had worked with specialist colleges, other providers, health care professionals and family members over extended periods of time to ensure people moved between services with minimal disruption.

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.

- The service had developed innovative methods to maximise people's communication and ensure all information was accessible to people.
- All staff we spoke with were passionate about communication being key to people's independence, autonomy and happiness. People benefitted from the provider's internal Speech and Language Therapy (SLT) Teams and the Technology Team who could assess their communication needs and offer or develop a range of systems, devices or strategies to enable them to have their voice heard.
- We found a very wide range of individualised communication aids being used effectively. This ranged from the simple but creative use of pictures and photographs to the use of a variety of electronic multi-sensory communication devices and tablet computers. These empowered people with disabilities to communicate. By looking at control keys or cells displayed on a screen, a person could generate speech either by typing a message or selecting pre-programmed phrases. We were told how people had bespoke vocabularies which could be updated in real time. For example, if they wanted to order a food item in a restaurant which was not on their vocabulary list, staff could contact the SLT or Technology Team who would be able to remotely update the communication device and upload the new vocabulary to the person's device 'within minutes'.
- The service had an inclusive approach to ensure the views of people were heard. Meetings were also held with people who used the service to give them an opportunity to discuss any concerns they might have.

Where people had communication or sensory difficulties, they received additional support from staff to maximise their involvement in these meetings and enable them to provide an opinion.

- The service ensured people had access to the information they needed in a way they could understand it and were complying with the Accessible Information Standard. Signs, posters and notices were situated around people's accommodation to enable people to access and read the information
- People's care plans clearly recorded people's communication needs. If people were unable to effectively communicate due to cognitive or language barriers, this was recorded in their care plans. From observing and speaking with staff, it was evident they knew people well and were able to communicate effectively with them.

Improving care quality in response to complaints or concerns

- The provider had a complaints procedure which was displayed in the home. This provided a clear framework on how complaints would be managed and investigated. From looking at the complaint's records, it was evident where complaints were made, these had been resolved to a satisfactory outcome.
- People and relatives told us they were able to raise any concerns, and these would be dealt with appropriately.

End of life care and support

- Staff had received training around end of life care and support.
- At the time of our inspection, although nobody living at Foundation House was receiving end of life care, the registered manager and staff were aware of what to do if people's needs changed.
- Staff had developed strong relationships with people and this had enabled them to provide emotional support to people when they experienced a bereavement. We saw an example of how staff had supported one person to cope with the passing of a grandparent and how the support from the staff had minimised their anxiety.

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 improved to 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

- The vision of the provider and Foundation House was to promote "A world in which people with disabilities are able to realise their potential as equal and active citizens in control of their lives". All staff and senior management demonstrated this clear vision and a highly positive person-centred culture was seen throughout. Staff had high standards and expectations of both themselves and young people and this promoted an exceptionally positive culture of challenging disability perceptions which had improved people's confidence and opportunities.
- The registered manager monitored these values and the delivery of the provider's vision for people through personal observations, feedback from people and staff. They had an in-depth knowledge of the people living at Foundation House, their goals and aspirations and how far along they were to meeting these. The registered manager endeavoured to play a central part in the review of people's care and support. They worked tirelessly and creatively on behalf of people. People and staff told us how the registered manager would come in on days off or stay longer to support people with social outings or other activities.
- The provider had developed systems to ensure the service met the requirements of Registering the Right Support. This was achieved through various means such as the use of adaptive environmental controls to give people greater control over their environment. This included enabling people to use voice controls to control their TV, use the call bell and control other devices in their rooms. The service had been designed specifically for the people living at Foundation House. For example, where people required additional space, their living areas had been designed as self-contained flats to meet this need. For other people, this had resulted in specific areas of the garden being designed to meet their individual needs.
- The registered manager and staff were fully committed to empowering people to ensure they could realise their goals and aspirations. We saw numerous examples of people being supported through innovative means to rehabilitate and engage in activities they had previously enjoyed.
- The staff we spoke with felt 'very well' supported by the registered manager and felt able to raise issues. Staff described the registered manager as being 'excellent' and providing 'great leadership'.
- The people, relatives and staff we spoke with unanimously praised the impact of the registered manager on the service. They told us how the positive leadership had enabled staff to have a 'huge' impact on the lives of their family members. Staff told us the registered manager had an open-door policy and was available to support staff at any time. The staff we spoke with told us morale was excellent amongst the staff and the strong leadership from the registered manager was a contributing factor to this.
- The registered manager and staff worked well together to ensure people received a high level of

personalised care which met their needs and took in to consideration their preferences.

Working in partnership with others

- The exceptional training offered by the provider had been recognised by other stakeholders and they had been commissioned to deliver various training courses. The local authority had commissioned the provider to be their lead trainer for safeguarding and medicines management.
- The provider had also been awarded the South West Region National Award for Large Organisations for their 'Disability Confidence' training which was delivered to other professionals who were working with people with disabilities.
- The provider had worked with and delivered training to the Organised Crime Unit to raise awareness of the needs of people with learning disabilities and their increased level of vulnerability to coercion. The training lead told us how the provider was delivering autism awareness training to the Police to develop the skills of the Police force in relation to working with people with autism. We were told how people had been involved in the design of interview rooms at the Police Headquarters to ensure they were tailored to the needs of people with autism.
- The provider had delivered training to trainee GP's to support them to develop their skills in relation to working with young adults with disabilities. This meant people were supported by GP's who had a better understanding of their needs. The involvement of people using the service in these training courses had resulted in improved levels of self-confidence and sense of well-being for the people involved.
- The provider had developed excellent and close working arrangements with other professionals and stakeholders. This included local NHS hospitals and commissioners of health and social care. This helped people access and sustain the support they required.
- The provider had worked closely with NHS South West and NHS England to develop a strategy of how the new Liberty Protection Safeguards will be implemented.
- The provider had worked with the lead NHS Solicitor for Liberty protection safeguards to develop a bespoke LPS training programme for care staff which could be delivered promptly to staff when the new LPS proposals are finalised. The registered manager told us the ethos behind this was to fully prepare staff prior to the new legislation coming into law.
- The provider had been awarded funding by the Equality Challenge Unit to work in partnership with Gloucestershire College. This was to build specialist resources to support people with learning difficulties to gain a better understanding of sexual orientation and sexual identity.
- The provider had developed a strong relationship with Gloucestershire University to provide nursing placements for student nurses. The registered manager told us how some of their nursing staff would temporarily work in different locations to open capacity to support student nurses.

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

- The service regularly sought feedback from people, relatives, staff and professionals. The registered manager told us how this gave an unbiased opinion of the service and enabled them to regularly review and improve the service.
- The registered manager and provider had also organised meetings with people's relatives. The registered manager told us these enabled relatives to provide feedback on the service and be more involved in how the service was run.

Continuous learning and improving care

- Effective quality assurance checks were carried out by key staff members, the registered manager as well as the provider. These included checks on people's medicines, care plans, finances and monitoring of the care being delivered. Any issues identified in the audits were shared with the managers and actions were

cascaded to the staff team.

- The registered manager and provider continually reviewed quality assurance systems to ensure they were effective. For example, the provider and registered manager had worked together to introduce an electronic quality assurance across all of the provider's services. This ensured there was a consistent approach across the organisation and enabled a greater level of transparency throughout the organisation.
- The provider had a business contingency plan to ensure people continued to receive an effective service in all circumstances.
- Appropriate action was taken when things went wrong. The provider learned from incidents and ensured they were used in a positive way to improve the service. For example, following an incident of missing money in one of the provider's other services, a new system to manage people's money had been introduced.

How the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- The provider had systems to ensure compliance with the requirements of the duty of candour. (The duty of candour is a set of specific legal requirements that providers of services must follow when things go wrong with care and treatment).

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

- The registered manager and provider were clear on their responsibility to ensure the service provided to people met their needs but also met regulatory requirements.
- The registered manager understood their responsibilities to notify CQC and other authorities of certain events.
- The rating of the previous inspection was displayed as legally required.