

Voyage 1 Limited

# Nottingham Supported Living (DCA)

## Inspection report

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Date of inspection visit:  
24 January 2018  
25 January 2018  
26 January 2018

Date of publication:  
27 February 2018

## 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

This service provides care and support for up to 13 people living in six 'supported living' individual settings in and around Nottinghamshire and an additional 12 people living in their own homes. People's care and housing are provided under separate contractual agreements. The Care Quality Commission does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The care service has been developed and designed in line with the values that underpin the Registering the Right Support and other best practice guidance. These values include choice, promotion of independence and inclusion. People with learning disabilities and autism using the service can live as ordinary a life as any citizen.

At our last inspection in December 2015, the service was rated 'Good'. At this inspection we found that the service remained 'Good' in Safe, Effective and Well-led and had improved to 'Outstanding' in the Responsive and Caring key questions.

The service had a registered manager in place at the time of our inspection. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons.' Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run.

People remained safe because staff had received appropriate training and the provider had systems and processes in place to support people from avoidable harm. People 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. People were supported with their tenancy to live in a safe environment. People received support from a team of staff that provided consistency and continuity. Safe staff recruitment checks were carried out before staff commenced employment. People who used the service were involved or represented in the recruitment of staff. People received appropriate support with the administration, storage and management of their prescribed medicines. Staff were aware of the importance of infection control measures and had received appropriate training.

People continued to receive an effective service. People were supported by staff that had received an appropriate induction and ongoing support and training. The registered manager used best practice guidance to develop and support staff to provide effective care and support. People were fully involved in meal preparation and choice. Staff were aware of people's nutritional needs and promoted healthy eating. Systems were in place to share information with external services and professionals when required. People received appropriate support to maintain their health and achieve good health outcomes.

People received outstanding care. Staff provided excellent person centred care; they were a dedicated staff team who went above and beyond what was expected of them. People who used the service and relatives

described staff as very caring, kind and compassionate who wanted the very best for the people they supported. People were involved in their care and support and staff respected their privacy and dignity. Independence was promoted by staff, who clearly understood the principles of supported living. People were enabled to self-direct the support they received; this was empowering and gave people maximum choice and control of how they lived their life. Staff had a good understanding of people's diverse needs, preferences, routines and personal histories. People had access to advocacy support should this support be required.

People received an outstanding responsive service. People were fully involved in their care and support and lead active and fulfilling lives. The service was very responsive and supported people to achieve their hopes, dreams and aspirations. People participated in person centred reviews, where best practice was used enabling the person to be at the focus throughout. People were supported to be active citizens of their community. With the right approach and support, some people had developed their confidence and skills that enabled them to be in paid employment. People had been supported to experience holidays and staff had been creative and used innovative approaches in supporting people to pursue their interests, hobbies and personal goals. This had led to people's friendship and social circle increasing. People's support plans focussed on their individual needs, creating a person centred approach in the delivery of care and support. Staff used effective communication methods to support people's sensory and communication needs. People had access to the registered provider's complaints procedure that was presented in an appropriate format for their communication needs.

The service continued to be well-led. The registered manager was experienced, dedicated and passionate about providing people with the right support that enabled them to grow and develop. The registered manager had developed an open and inclusive service, they had a clear vision and set of values based on social inclusion that the staff fully understood and adhered to. Staff felt listened to, supported and involved in the development of the service. People who used the service and relatives received opportunities to share their views, experience of the service and were involved in developing the service further. Audits were carried out and action plans put in place to address any issues which were identified.

## 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 remains Good.

### Is the service effective?

Good ●

The service remains Good.

### Is the service caring?

Outstanding ☆

The service has improved to Outstanding.

People were supported by a dedicated staff team that went above and beyond what was expected of them. Staff were constantly exploring new ways of supporting people to experience new opportunities.

Staff fully embraced the principles of supported living and promoted people's independence resulting in positive outcomes for people.

Staff had an excellent approach and understanding of respecting people's privacy and dignity. Independent advocacy information had been made available for people.

### Is the service responsive?

Outstanding ☆

The service has improved to Outstanding.

Staff used creative and innovative, person centred approaches to support people with their goals and aspirations, this included achieving paid employment.

People had total choice and control of the support they received; they led active and fulfilling lives.

People had access to the provider's complaint policy and procedure that was provided in an appropriate format to support people's communication needs.

### Is the service well-led?

Good ●

The service remains Good.

# Nottingham Supported Living (DCA)

## **Detailed findings**

### Background to this inspection

We carried out this inspection under Section 60 of the Health and Social Care Act 2008 as part of our regulatory functions. This inspection checked whether the provider is meeting the legal requirements and regulations associated with the Health and Social Care Act 2008, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

This was a comprehensive inspection that took place on 24, 25 and 26 January 2018. The provider was given 48 hours' notice because the location provides a supported living service and we needed to be sure that staff would be available. The inspection team consisted of one inspector.

Before the inspection we used information the provider sent us in the Provider Information Return. This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We also reviewed information that we held about the service such as notifications, which are events which happened in the service that the provider is required to tell us about, and information that had been sent to us by other agencies. We also contacted commissioners of adult social care services (who fund the care package provided for people) of the service and external healthcare professionals known to the service. We received feedback from a consultant nurse in epilepsy, a social worker and a community care worker.

On the first day of the inspection we visited people in two supported living houses and on the second day visited one supported living house. On the third day we visited the provider's office. In total we spoke with nine people who used the service either face to face or on the telephone. We spoke with six relatives by telephone and received written feedback from an additional one relative. We spoke with nine support workers and the registered manager. We looked at all or parts of the care records of seven people, along with other records relevant to the running of the service. This included how people were supported with their medicines, quality assurance audits, training information for staff and recruitment and deployment of staff, meeting minutes, policies and procedures and arrangements for managing complaints.

# Is the service safe?

## Our findings

People who used the service told us they felt safe because they had support from staff they had developed trusting relationships with. One person said, "I feel safe, staff are around." Another person said, "The staff help me to keep safe when I'm out." Relatives spoke positively about their family member being supported by staff to remain safe.

Staff demonstrated they understood their role and responsibilities to protect people. One staff member said, "We make sure people remain safe and report any concerns to the manager." The provider had systems and processes in place to protect people from risks associated with abuse and avoidable harm. This included staff receiving training and updates in safeguarding adults. Policies and procedures were also available to support and inform practice. This included a whistleblowing policy. A 'whistle-blower' is a person who exposes any kind of information or activity that is deemed illegal, unethical, or not correct within an organisation. The registered manager had followed the multi-agency safeguarding procedures appropriately when required.

People told us they did not experience any undue restrictions placed upon them; they said they were involved in discussions about how any risks associated to their needs were managed. One person said, "I can go out and return when I want to, sometimes I chose to go with staff or I go out by myself." Whilst some other people required staff support to access the community they said this did not impact on when they were able to go out. Relatives were positive about how risks were managed and confirmed their relative and themselves where required were fully involved and consulted.

Staff demonstrated they supported people to have a positive approach to risk taking; people had choice and control of how they lived their life. One staff member said, "Our role is to support people in the way they wish to be supported and to remain safe, but not be restrictive in any way. If people want to try new things, there may be some risks to consider but we talk about these and plan how to overcome them."

People's support plans demonstrated how they had been involved in discussions about how to manage known risks. Information available to staff about any known risks was detailed, supportive and written in a person centred way focusing on the person and their wishes. For example, one person accessed the community independently, to reduce any risks staff reminded the person to take their money and to check their mobile phone was fully charged.

We observed staff provided care and support which promoted and maintained a good balance of safety and independence. An example of this was how in one supported living house, a poster near the front door reminded people of action to take when answering the door. This included asking the visitor their name and for identification before inviting them in. People were supported to live in a safe environment. Staff supported them to complete checks on health and safety issues and report any repairs to the landlord for action.

Where people had been assessed as requiring support to manage any behaviours this had been planned for.

Staff had information which was clear and detailed of how to support people safely using best practice guidance. Staff told us of what training they had received to effectively and competently manage any behaviour. Staff had a person centred approach, they were clearly aware of factors that may affect a person's mood and behaviours such as the environment.

Some people received support from staff 24 hours a day, whilst others received support as and when required. People spoke positively about the staff that supported them. They said they had a regular team of staff that understood their needs. One person said, "I know all the staff and like them." Another person said, "I have a support worker who comes Monday, Thursday and Friday, and they do what I want and how I want them to do it. They help me go out, help with the domestic work and the things I find difficult to do." Relatives were confident there were sufficient staff available that understood their family member's needs well. All relatives were positive that regular staff were important for consistency and continuity.

Safe staff recruitment processes were in place to ensure only staff suitable for their role were employed. Through discussion with the registered manager it was clear they had a commitment to promote equality and diversity through staff recruitment to ensure they employed a diverse staff team. A person who used the service was also a paid employee for the organisation in an administration and recruitment position and was involved in staff recruitment. This person told us they knew the people living in the supported living houses well and felt this helped them in the recruitment of suitable staff. This person said, "I feel I'm good at choosing the right staff to support people because I know them well, I can represent them." The registered manager told us consideration was given to matching staff and people who used the service with similar interests, hobbies and personalities.

Some people required support with the management and administration of their medicines and some people required supervision and prompts. Information we reviewed confirmed staff followed safe and best practice guidance. Staff had received appropriate training and had policies and procedures to inform practice and these were found to be working well.

The registered provider had a prevention and control of infections policy and procedure based on best practice guidance. Staff had received appropriate infection control training and were aware of action required to manage any risks. Staff told us how they supported people to maintain good standards of hygiene and cleanliness within their home to reduce the risk of cross contamination and the spread of infection. Staff had also received training in food hygiene and understood the principle of safe food handling.

The registered provider had systems and processes in place to effectively manage accidents and incidents. Staff were aware of their responsibility and records confirmed appropriate action was taken such as investigating incidents to help prevent them happening again. The registered manager was responsible for reviewing and monitoring accidents. These were reported to senior managers within the organisation who analysed them for any themes and patterns. This meant there was continued oversight by the registered manager and provider to ensure action was taken to mitigate further risks. Lessons learnt from events were shared across the organisation as a way of continued learning.

# Is the service effective?

## Our findings

People had an assessment of their needs before they received the service. This was based on their holistic needs to enable staff to fully understand these and what their wishes were in relation to their physical, mental, emotional health and well-being. People who used the service and their relatives told us they were involved in this assessment process and had received information to support them to understand the service that could be provided. A relative said, "They (the registered manager) were very helpful in assessing [name of family member]'s needs and discussing a plan for their support."

People received a service user guide presented in an easy read format to support any communication needs people may have had. This information provided detailed and useful information of what people could expect from the service. Information included the principles of what supported living means and reflected current legislation, standards and best practice. We found people had a clear understanding about the support they received that enabled them to live independently in the community with their own tenancy.

The registered manager told us they received information and alerts from the provider that kept them up to date of any changes within legislation, latest research and best practice. We saw examples of weekly updates the registered manager received who then shared any relevant information with the staff team. This meant people could be assured their rights were protected and known by staff resulting in good outcomes for people.

People who used the service and relatives were confident staff were appropriately skilled, competent and knowledgeable about their needs. A person who used the service said, "Yes, staff know me and understand what support I need." Another person said, "I was introduced to my staff at the beginning, the staff are like friends now, they really know and understand me and that makes me feel really good."

Staff were positive about the induction, ongoing training and support they received. One staff member said, "I found the induction really supportive. I've completed lots of training and had observations of my practice to make sure my approach is right." Another staff member said, "We have one to one meetings to talk about our work and regular staff meetings, support and communication is good; we see the manager and they are always contactable which is good."

Records confirmed staff received opportunities to refresh their learning and development needs. The registered manager told us how they assured themselves staff were competent and knowledgeable. This was by way of observation of how staff worked, discussions with staff and reflective practice was used to consider what went well and any areas for development. This meant people could be assured they were supported by staff that were appropriately trained to understand their needs.

People told us they were fully involved in decisions about the choice of meals and drinks. In addition people told us they were supported to plan, shop, prepare and cook meals. One person said, "We (referring to the person they shared their house with) meet with the staff and plan the menu. We get involved with shopping and cooking, everything." Another person confirmed they made



themselves drinks and snacks at any time.

Staff were knowledgeable about any dietary needs people had and described the support they provided people to manage these needs. One staff member said, "If people have any specific needs we have information that provides guidance, we promote people's independence and respect people's choice but also encourage healthy eating."

We observed how staff fully included people in choices and decisions with meals and drinks. Independence was promoted at all times and staff assisted rather than led or completed tasks for people. This demonstrated staff had an enabling and person centred approach.

People were supported to share information with external professionals such as health services to ensure their needs and wishes were known and understood by others. In addition, staff had prepared 'missing person's' information that could be quickly and easily completed, if there was a reason a person using the service was needed to be reported as missing. This meant there were systems and processes in place to share information across organisations effectively.

People told us they were supported to manage any health needs and this included accessing primary and specialist health care services. One person told us how they had their annual health check at the GP practice in a few days and that staff were supporting them with this appointment.

People had been involved in developing their support plans that informed staff of their needs. One person told us about the support they required with their hearing aid. We noted the support plan provided staff with very detailed information the person required in the management of their hearing aid such as cleaning and maintenance. This person told us they were supported appropriately and how this was important because they were reliant on their hearing aid for communication.

Care records confirmed healthcare professionals were involved in people's care such as speech and language therapists, a psychiatrist, GP and epilepsy nurse. People had health action plans that recorded their health needs and appointments attended. The use of this document is seen as best practice.

People were happy to show us around their home, some people told us how they had recently been involved in discussion and decisions about plans to redecorate and have new furnishings. The registered manager told us some people they supported required specific equipment such as a hoist and aids to support with mobility needs. They said staff were expected to support people to have equipment regularly checked for safety and to arrange servicing and maintenance checks. Staff confirmed this to be correct.

People who lack mental capacity to consent to arrangements for necessary care or support can only be deprived of their liberty when this is in their best interests and legally authorised under the MCA. The procedures for this in supported living are through the court of protection.

Staff showed they understood the principles of the MCA. Support records showed capacity assessments and best interest decisions had been made for specific decisions where a person lacked mental capacity to make these themselves. Where concerns had been identified in relation to people being restricted of their freedom and liberty, the registered manager had completed an application for the local authority to be submitted to the court of protection. This meant people could be assured their legal rights were protected and understood.

# Is the service caring?

## Our findings

People who used the service and relatives spoke very highly of the staff and their approach of providing support that was caring and based on the person's individual needs and wishes. A relative said of staff, "It's a vocation for them, not just care jobs." The registered manager equally spoke positively about the commitment and dedication of staff with many examples of staff going 'the extra-mile'.

A person who used the service told us how their staff team had made a "massive" difference to their life. This person said, "When I first started using the service I wouldn't use public transport, I just didn't do anything by myself because I had no confidence and felt I couldn't. I was introduced to two staff nine years ago, they are like family now. I know them really well and they know and understand me. I don't have a lot of friends but with their support I've learned new social skills and made new friends by being supported to try out new activities."

This person gave examples of how they had formed new friendship groups and how in the last 12 months they had grown and developed further with their confidence. This had resulted in spending increased time with new friends enjoying new experiences including holidays at home and abroad.

Relatives gave examples of the positive impact staff had on their family member in enabling and supporting them to achieve good outcomes. One relative said, "[Name of family member] used to be anxious, depressed and physically inactive before they got any support. They have developed confidence and whereas at one stage they were reluctant to go out they now go to the gym. They are becoming healthier both mentally and physically and they are joyful company. This has happened because of the key part provided by Voyage Care (service)."

We reviewed the compliments the service had received and noted an external professional had specifically thanked a member of staff, for the support they gave a person who used the service at a time of crisis. This professional said that due to the support and commitment shown by this member of staff, they had enabled the person to remain in the community. The person had experienced a good outcome in relation to their health and wellbeing during a difficult time due to the support they received from a caring and committed staff member.

We found all staff were completely committed to the principles of self-directed care, enabling and respecting people's wishes, in how they received support to live an independent a life as possible. The registered manager told us about a member of staff that demonstrated a great commitment in delivering person centred support and how they supported their colleagues to ensure they were working in a person centred way too. We met this member of staff and observed some excellent interactions with people they supported. They were respectful, supportive and responsive to people who clearly had developed positive relationships with them. This member of staff told us how they were always striving to support people to experience new and varied activities and opportunities. An example of this was one person had always shown a great interest in becoming a first aider. The member of staff supported the person where others had failed to realise the importance of this person's ambition to achieve their goal. This person told us

about the first aid training course they had completed and showed us a photograph of them proudly receiving their training certificate, they passed with flying colours. By talking with this person it was evident of how important it was to them that they had achieved their wish.

We met another member of staff that had developed a very positive relationship with a person who used the service. This person's weight had increased which was affecting their mobility. The staff member used the person's love of dogs, to encourage the person to take their dog a walk with them. This gave the person a purpose to go out walking and resulted in them joining a walking group. We met this person and they told us of the walks, hikes and rambles all over the country they had completed with this member of staff. This person told us how they had raised money for charity as a result of sponsored walks they had done. They were clearly proud of what they had accomplished. The person's weight had stabilised, they were now fit and active and with the support from this member of staff, had taken up a new hobby that they clearly enjoyed.

Staff told us that the aim where possible, was to reduce the amount of paid support people received; this was accomplished by people being supported to achieve greater independence. One person told us how their support had reduced as a direct result of them gaining greater confidence and independence through the support of staff.

Staff gave examples of how they supported people to become active citizens of their local community. This included developing friendships with neighbours; an example of how this was achieved was by people sending their neighbours Christmas cards. Examples were given of how people in the community had got to know people and had become friends such as local shop keepers, who greeted people by name. The registered manager told us about a member of staff who had supported a person to local events, to help them make friends in the local community. This member of staff had given up their own time to take the person to local social events. This has had developed the person's confidence, increased their social network and self-esteem.

This member of staff also supported a person who had expressed an interest in working but did not know what avenue to take. The member of staff had an additional part-time waitressing job and suggested the person shadow them for the experience. This person has achieved part time work in a café as a direct result of the support, encouragement and interest the member of staff had shown. This demonstrated how the member of staff had a positive impact on the person; they had achieved a good outcome due to the staff member's caring and thoughtful approach.

The registered manager said all staff worked willingly over their scheduled hours without being asked if those they supported, needed the additional support. The registered manager said, "I am so proud of the staff and everything they do on a daily basis." A person told us their achievements were down to the support, patience and approach of the staff that supported them. They additionally gave examples of how staff had gone above and beyond by providing additional support at times when they were not on duty. This person said, "If they know I'm worried or anxious about something they will call me to check I'm okay. The support is flexible and is totally tailored around me, I feel the staff have nurtured me, I've really come out my shell and would never have believed years ago what I'm doing now and what I've achieved."

Other people told us about a monthly Sunday dinner club that was supported by staff. This gave people an opportunity to meet socially for a meal with other people who received a service. This enabled people them to meet up with friends and meet and form new friendships.

People had access to information about independent advocacy services. An advocate acts to speak up on

behalf of a person, who may need support to make their views and wishes known. There are two different types of advocates, lay advocates and Independent Mental Capacity Advocates. The registered manager and staff understood the important role and advocate can have, whilst no person at the time of our inspection had advocacy support, they could be confident staff would support them to access this if required.

People who used the service were positive that staff treated them with dignity and respect at all times and this included giving them their personal space. One person said, "I like the staff they listen to me. They knock on the door and wait for an answer, they know this is my home and respect this." Another person said, "The thing that's good is they're kind, respectful, and I wouldn't be without them."

Relatives told us how people were fully involved in their support. This was confirmed by people, they told us they were consulted and had participated in meetings and had signed their support plan as a method to confirm they had been involved in the development and review of their support. One relative told us when staff left they did not just leave but gave the person they supported an explanation. This relative said, "There is an exit plan to explain to people why they're going, when that happens. They don't just leave the service." This demonstrated great respect for people and how they were treated as equals.

People's support plans focussed on the individual person and provided staff with guidance that promoted dignity, respect and independence at all times in the delivery of care and support. For example, staff were given information as to what a 'good' day meant for the person and how this was to be achieved. This meant the registered manager was clear about the standards of care and support people should expect from staff.

Staff were able to explain to us the principles of good care, and the impact it could have on people if they did not adhere to this. Staff had received training in equality and diversity and policies procedures provided additional support and guidance. Staff had access to a policy and procedure that complied with the Data Protection Act that informed them of issues relating to confidentiality.

## Is the service responsive?

### Our findings

People who used the service and relatives spoke exceptionally highly of the service, in particular how people were supported to live the lifestyle they chose, which was based on their individual and unique needs and preferences. A person who used the service said, "This company is my lifeline." Another person said, "The service is different to other providers, staff show a genuine interest in you, it's the extra things they do, I'm in charge of my support and choose what I need help with and when, I feel in control of everything."

A relative said, "[Name of family member] now has a part-time permanent job and is continuing to develop their independence. It is no exaggeration to say that without this support [family member], would have had a life of dependency and their life, would, in all probability, have been one without purpose. [Name of family member] is now happy and feels good about the life and the support they have." Another relative said, "The support is flexible, they (staff) work around [family member], they have a certain amount of hours and it's planned to meet their needs and wishes."

Two people who used the service told us due to the support they received in developing their independence and skills, they had paid positions within the organisation. One person said, "I want to be a normal member of society. I started my job as a volunteer first and now I'm working 16 hours a week in the recruitment department, I also assist in the office doing admin type jobs. My goal is to come off benefits altogether." This person had achieved this within the last 12 months. Another person said, "I've been a quality checker for a couple of months. So far so good."

We spoke with one person who told us their dream was to be able to play a guitar. We saw this was recorded in their person centred review document in 2017. This person told us how they attended guitar lessons and proudly showed us their guitar and played us a tune.

Another person told us how they wanted to lose weight, they had recently joined a slimming group and showed us their diet book that also recorded the weight they had lost. This was clearly important to the person and they were proud of what they had achieved, this had developed their confidence and self-esteem.

People told us about the holidays and experiences they had been supported to do, this included holidays abroad. For one person they had a dream to visit Canada, they told us how staff had supported them with their wish of a holiday of lifetime. This person also had a great love of knitting and proudly showed us what they had knitted. A member of staff researched a holiday that was specifically for knitters. The person told us about this holiday and how they had made friends with others and how they kept in touch with them. The staff member said, "It's a marvellous place, [name of person] had a great time and made new friends that they keep in touch with, it's so popular you have to book two years in advance – we've booked again." This was an excellent example of staff using a person centred approach. They had used their imagination and understanding of what was important to the person to experience new opportunities.

Other people told us about the activities and opportunities they received support with. This included a

variety of interests and hobbies that included the gym, bowling, cinema, day and evening social clubs, some people had participated in water aerobics, street dancing and belly dancing. A relative said, "[Name of family member] decided to be more active and staff helped them try out different gyms, they then chose one and gradually they went there alone with staff support." This demonstrated people were supported with activities that were important and empowering to them.

The registered manager and staff told us about a person who passed away three months prior to our inspection visit. As this person's health deteriorated their end of life wishes were discussed with them and their relatives. It was important for the person to remain at home until the end of their life and this was respected, the person passed away surrounded by their family and a staff member they were exceptionally close with.

We reviewed a thank you letter received from the person's relatives after their death. In this they reflected on the great care and compassion shown by the staff team. Comments made of the registered manager included, "(Name of manager) has been amazing, they liaised with the extensive multi-disciplinary team and kept us informed at every stage. They pre-empted a lot of needs and ensured everything was in place. One of the district nurses said of their actions, these should be used as a model of excellence for others in similar situations, their communication skills were fantastic."

The registered manager told us how the staff team also showed great compassion, sensitivity and support to other tenants at this difficult time. Staff supported people to understand what was going on, gave them time to talk, ask questions, spend personal quality time with the person, and kept routines going. The registered manager said, "The whole staff team, in very difficult circumstances, were amazing."

People told us they had a core group of staff that supported them and they knew in advance what staff were going to support them and when. Several people showed us their weekly activity plan that recorded what activity they were doing, when and who was supporting them. Every person we spoke with said they could choose which staff they wanted to support them. People told us new staff were introduced to them before they provided support and if for any reason they did not get on well with staff, they could speak with the registered manager and changes were made. Staff confirmed this to be correct. This demonstrated an excellent example of how people directed their own support; this was empowering for individuals and gave them choice and control of how they lived their life and the support they received.

People's care records confirmed a pre-admission assessment had been completed and support plans developed that provided staff with clear and detailed information of what was important to people, including their routines and preferences. People told us they were involved in opportunities to discuss and review their support plans with staff. Staff told us they found information provided was helpful and supportive. The registered manager told us where people shared their tenancy with others, great consideration was given to the compatibility of people and that each person was fully involved in decisions. People who used the service confirmed what we were told.

Staff were aware of people's diverse needs. Some people liked to practice their religious faith and attended a place of worship; staff were aware of this and respected the persons' wishes. People told us they were supported to maintain friendships and develop new ones. One person told us they had a boyfriend who they had contact with every day and who they were supported to meet up with weekly. They also visited the person's house for celebrations; the person said they were planning a Valentine's evening which they were looking forward to. Two people's dream was to get married one day and they spent hours together discussing and researching what their big day would involve. Staff understood and respected this and had arranged for them to visit wedding fairs and try wedding dresses on. Both people proudly showed us

photographs of them trying wedding dresses on, it was evident this gave them great enjoyment.

The registered manager said the service had a commitment to treating all people equally and without prejudice and discrimination. To celebrate transgender awareness week (a UK event) the organisation arranged a conference with a transgender speaker who also received a service from the organisation. The registered manager told us staff had supported people to attend this conference and records confirmed what we were told. This was an excellent example of how both the service and organisation respected and celebrated people's uniqueness.

The registered manager told us they were aware of their responsibilities in relation to The Accessible Information Standard. This standard expects providers to have assessed and met people's communication needs, relating to a person's disability, impairment or sensory loss. People communication and sensory needs had been assessed and planned for. The registered manager told us there were plans for people's support plans to be developed in an easy read format to support people.

People received opportunities to participate in a six monthly person centred review. Staff supported people using well established and recognised tools of best practice. This meant people remained the focus of the review; they had total control in decisions of where meetings were held, when and who they wished to be present. These meetings included a review of their needs and future hopes, dreams and aspirations. Following this, staff supported people further in the action required to achieve their goals. Staff demonstrated a great understanding of what was important to the people they supported and a commitment to ensure people experienced opportunities important to them.

A complaints policy and procedure was in place, this information was in the service user guide which people had a copy of. This was presented in an easy read format to support people with communication needs and discussed in tenant meetings. People told us they felt confident to raise any issues or concerns. They knew who the registered manager was who they had direct contact with. Relatives were positive that any issues they raised were responded to quickly and efficiently, they told us communication with all staff that supported their relative was very good. We looked at the provider's complaints log, we saw where complaints had been received these had been responded to and resolved as per the provider's policy and procedure.



## Is the service well-led?

### Our findings

The service had a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. Like registered providers, they are 'registered persons'. Registered persons have legal responsibility for meeting the requirements in the Health and Social Care Act 2008 and associated Regulations about how the service is run. The registered manager was a very experienced and dedicated registered manager who was passionate about ensuring all tenants received a personalised service.

People who used the service knew who the registered manager was and were complementary about their leadership approach. One person said, "The manager is really, really good, I wouldn't be in the position I'm in, in achieving what I have in my work and independence without them, I cannot thank them enough. They continue to be such a great support, they know when I'm stressed and they contact me to make sure I'm okay."

Relatives were equally positive about the registered manager. One relative said, "I know the manager really well. They always phone back and have been so supportive since the beginning; they did everything they was going to do, and more besides." Another relative said, "I think it's an excellent service. It's down to the manager's personality, I think, and the staff that they employ and the care that they take in choosing them." A third relative said, "I am very pleased with the support provided. They are a responsive organisation who are prepared to review their practices in order to improve. The evidence of [family member]'s life transformation is miraculous."

Feedback from external professionals was positive about the registered manager's leadership. One professional said, "I have found the manager easy to contact with prompt, positive responses to mobile telephone calls and emails. With their input it has been identified where packages can be reduced as outcomes are achieved."

Staff spoke positively about working for the organisation and how the registered manager was always available, supportive and approachable. They told us about the communication and support systems in place to support them; this included a lone working policy. Staff were confident the on call systems in place to support them during and outside office hours worked well.

As detailed in this report we found the registered manager showed a great commitment in enabling people who used the service to reach their full potential. Standards of support were high and known and understood by staff. People who used the service were empowered to have choice and control of their life and with support achieved good outcomes; this was enabled by the person centred approach of staff.

Staff were clear about their role and responsibilities and told us they worked well together. The registered manager felt well supported by senior managers within the organisation. There was a system of audits and processes in place that continually checked on quality and safety. These were completed, daily, weekly and monthly. We found these had been completed in areas such as health



and safety, medicines, accidents and care records to ensure the service complied with legislative requirements and promoted best practice. The registered provider had an improvement plan, this included actions identified through internal audits and checks. This told us that the provider had procedures and systems in place that demonstrated the service was continually driving forward improvements to the service people received.

As part of the provider's quality assurance checks, people who used the service, relatives, staff and external professionals were invited annually to share their experience of the service by completing feedback questionnaires. A relative said, "We are sent a survey every year to complete. Once a year we also have a big get together with the staff and the service users and play cricket or rounders, it's more of a social get-together." People also told us and records confirmed, tenancy meetings were arranged where discussions were had with people about any changes affecting the service. This was also taken as an opportunity to discuss any concerns, complaints or tenancy issues.

We saw responses to the annual feedback questionnaire received in December 2017. Where areas for improvement had been identified action had been taken to address this. For example, one person felt they needed more support hours and had been supported to raise this with the relevant local authority responsibility for funding the support. When we asked relatives what the service could improve on a relative replied, "There isn't! They (staff) do everything well above what they need to do. I couldn't ask for more."

The service had submitted notifications to the Care Quality Commission that they were required to do and had policies and procedures in place to support and inform staff of standards they were expected to work to. The ratings for the last inspection were on display at the service and available on the provider's website.

The registered manager made efforts to keep up to date with current research and best practice, examples were given about receiving newsletters and updates and alerts from NHS, the local authority and CQC. They told us they used this information to review the service provided to make sure it met standards and legislative changes. The feedback we received from visiting healthcare professionals about the management of the service was positive and described a collaborative approach to working with external professionals.