

Steps Ahead Care & Support Limited

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Inspection report

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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

Steps Ahead Care & Support Limited ("Steps Ahead" or "Steps") is domiciliary care service that specialises in providing bespoke care packages for people who have experienced a brain injury, other traumatic injury and/or have complex needs. They work with people of all ages and a range of professionals to support people regain as much of their independence as possible.

The inspection took place between the 21 and 31 August 2018. The inspection was announced 48 hours in advance to ensure the service had time to contact the people, relatives and professionals linked to the service. This was to give time for staff to explain to people who CQC are and why we would like to talk to them.

CQC does not regulate all the roles staff at Steps Ahead perform. We regulate only personal care where the person lives. That is where staff support personal hygiene and with food. We do not regulate sitting and supporting people outside their home which are services Steps Ahead also provide. Twelve people were receiving personal care at the time of this inspection.

At our last inspection completed between the 20 and 27 October 2015 we rated the service Outstanding. At this inspection we found the evidence continued to support the rating of outstanding and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection.

At this inspection we found the service remained Outstanding. This was because:

People received bespoke, personalised care from Steps Ahead. This was planned with them and for them. They were in the driving seat and supported by staff to have control of their care. Each person was embraced as being unique and on a journey to regaining their independence after suffering a life changing brain injury. The registered manager and all staff were clear that their role in people's life should be temporary or reducing wherever possible. This was to ensure people could regain all or aspects of their life before injury. Goals were set with people that were achievable and celebrated before moving on to the next stage in the rehabilitation.

Staff were recruited to especially match the person. People were involved in choosing the staff to work with them. Training was also formed around the person and staff attributes as well as their needs. People, and where appropriate, their relatives were involved in the training. This meant everyone could learn from each other. People and families could also develop new understandings about the impact of the injury. It also meant there was a clear understanding of the limits placed on Steps Ahead staff.

Appropriate recruitment checks were undertaken before staff started work, followed by clear induction and supervision programmes to ensure new staff were extremely confident and competent in their role.

Staff had regularly supervision and support to ensure they could offer the best possible care and support to people. There was a team approach with dedicated staff working together to ensure specially trained and knowledgeable staff were always available. Appropriate recruitment checks were undertaken before staff started work, followed by clear induction and initial training programmes to ensure new staff were confident and competent in their role. Training was provided by key professionals.

There were many examples of where staff had gone above and beyond, providing an outstanding service, treating people as individuals and taking pride in their work, recognising the 'little things' that made people feel valued in the community.

The service used innovative ways to manage people's risk and keep people safe, whilst ensuring they had a full and meaningful life. As people regained their independence people were supported to manage their own risk and reduce the need for risk assessments. This showed the service balanced real risk and promoted independence and choice. People felt safe, had trust in the staff who visited them, building strong, caring relationships that mattered to people who knew who to contact if they were worried about their safety.

Staff could recognise different forms of abuse, understood the provider's safeguarding and whistle blowing procedures and knew who to contact if they had any concerns, which was reflected in safeguarding records.

The registered manager and other senior staff were very visible and accessible to all staff and people using the service who knew who they were. A 24/7 helpline was available to staff and people. We saw this was responded to very quickly.

The registered manager and other senior staff provided outstanding leadership and were committed, innovative, knowledgeable and well organised. They provided clear and confident guidance and demonstrated strong values in all aspects of their role, that was embedded within the staff team. Their vision and values were communicated to staff through staff meetings, supervisions and a regular contact. People's views were gathered by regular monitoring visits and phone calls and by satisfaction surveys.

Staff consistently told us they felt extremely well supported and valued and they were very happy at work. The culture at the service was open, transparent and welcoming, encouraging staff to share ideas that benefitted people.

The registered manager and management spoke about the service with pride and instilled pride in staff. There was a real sense of the service being an expert service in dealing with very complex cases in the community and particularly in meeting the needs of people who has acquired a brain injury. The service continually reached out to relevant organisations nationally and locally to keep informed and relevant.

Staff actively built links with people's local communities that enhanced people's sense of wellbeing, value and quality of life. Staff not only looked at people's care needs as tasks but at people's place as a whole within the community, showing outstanding care. Where people had particular interests, where possible staff worked for them to regain the ability to re discover the enjoyment and fulfilment this gave them.

People's end of life care needs were approached sensitively and in the person's own time. All staff had a very clear understanding of the Mental Capacity Act 2005 and how to make sure people who did not have the mental capacity to make decisions for themselves had their legal rights protected.

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.

Health professionals spoke very highly of the service saying they knew care would be good and telling us how pro-active the service was in accessing additional training depending on people's needs. Staff monitored people's healthcare needs and, where changes in needs were identified, care was adjusted to make sure people continued to receive care which met their needs and supported their independence.

There were robust systems in place to monitor the quality of the service and plan on-going improvements. People using the service and staff felt involved and able to make suggestions or raise concerns. The registered manager demonstrated an excellent understanding of the importance of effective quality monitoring. The systems in place enabled regular checks of the service provided to people, and ensured they were able to express their views so improvements could be made.

Complaints, concerns and feedback were taken seriously and used as an opportunity to improve the service. Records were accurate, well maintained and kept securely.

Further information is in the detailed findings are in our full report at www.cqc.org.uk

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

Good ●

The service remains Good.

Is the service effective?

Outstanding ☆

The service remains Outstanding.

Is the service caring?

Outstanding ☆

The service remains Outstanding.

Is the service responsive?

Outstanding ☆

The service has improved to Outstanding.

People received bespoke care modelled on their needs, aspirations and goals.

People were supported to set achievable targets that were celebrated and refined so they could achieve their maximum potential.

The service was extremely flexible and responsive to make sure people received support that was very person centred and met their changing needs and wishes.

Arrangements were in place to deal with people's concerns and complaints which were used as positive learning to improve the service.

Is the service well-led?

Outstanding ☆

The service remains Outstanding.

Steps Ahead Care & Support Limited

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 was planned to check 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 comprehensive inspection took place between the dates of the 21 and 31 August 2018. In this time, we visited the office, spoke with people and family who use the service and received feedback from staff and professionals who know the service well.

We gave the service 48 hours' notice of the inspection visit because the location provides a domiciliary care service and they needed to seek permission for us to contact people who use the service.

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

Prior to the inspection we sent out questionnaires to people, family, staff and professionals who knew the service well. We received a response from two people, one relative, five staff and no professionals. We reviewed notifications that we had received. Notifications are specific issues registered persons must tell us about. We also studied the Provider Information Return (PIR) which is information we require providers to send us to give some key information about the service, what the service does well and improvements they plan to make. We took this into account when we made the judgements in this report.

During the inspection we reviewed the care records for five people, phoned and spoke with three people, two family, two professionals and eight staff. We also sent out further questionnaires to staff and professionals and received three staff and three professional ones back.

We reviewed documentation in respect of how the service ensures it is ensuring the quality of the service. This included audits of aspects of the service and how they dealt with concerns and complaints.

Is the service safe?

Our findings

The service remained safe.

People told us they felt safe while being looked after by the service. They felt they could speak up if they had any issues and these would be resolved with them. One person said, "I always feel safe when carers are in. I would talk to my family or service manager at Steps Ahead if I had any concerns."

Relatives told us they too felt the service was safe. We were told, "I really do feel my relative is safe with them. Any concerns I would talk to the team leader; I have two email addresses and two phone numbers" and, "My relative is very safe with Steps Ahead staff. Small team, two-to-one care."

Staff understood how to identify signs of abuse; they knew people very well and if the person could not vocalise, they noted other signs there could be a concern. Training was kept up to date for all staff and the registered manager. Staff would pass any concerns on to the office. They told us this would be addressed quickly. Staff told us, "I would report any abuse to the office straight away. They would sort it", "Would report any abuse to office. Office would sort it out – they are 'on the ball'", "Abuse allegations would be passed on to the manager. Would take notes from clients, ask non-leading questions and collate as much information as possible" and, "I would respond straight away to any potential abuse, whether verbal, physical or financial".

Staff also understood the importance of keeping people's property and money safe. One staff member said, "Most have key safes, if sleeping in I lock doors and keep the keys safe overnight."

The service was staffed in line with people's needs and care plan. Staffing was always maintained to a safe level. In fact, people had a dedicated, specially chosen staff team who they were involved in choosing. Steps Ahead had a robust recruitment and selection process. Checks of staff members' character, disclosure and barring service, (DBS's) were rechecked every three years, but all staff were required to annually declare they remained safe to work with vulnerable adults. People's needs were discussed before taking on their care; this was to discuss with them their individual needs and expectations of support and to identify which type of staff would be right for them. This ensured bespoke advertising and recruitment of staff. For example, if swimming was key to people's recovery, their support staff needed to be confident in the water. It also meant matching of hobbies and personalities could take place.

One person said, "I've been with the agency two years; Steps have been really good sourcing staff to work with me. I sat in when Steps interviewed people. Any concerns I would speak to the office. Steps really understand me" and another, "Staffing one-to-one is perfect for me. Steps have been really understanding; I always have the same carer except when they are on holiday, then they send a replacement".

Replacement staff were taken from the service's own experienced bank staff which enabled people to continue to have care and support from staff they already knew.

Family told us, "Always regular staff and bank staff to cover any absences. My relative has a dedicated team. Two-to-one on a day and one-to-one on a night" and, "We became involved with them at very short notice; they quickly built up a very strong base of five regular staff to look after our relative."

New staff were introduced to people before they started work; this linked the interviewing of new staff to getting to know people they would be supporting. There was a period of constant review with the service user to ensure they continued to be happy with the new staff member. This meant, the person remained in control. For example, one staff member said, "Prior to introducing new staff we call clients, tell them about new staff, show them a photo and organise a 'Meet & Greet' session which the manager attends."

Where staff had a responsibility for people's medicines, this was achieved safely. Staff were trained to administer medicines carefully and record this on a medicine administration record (MAR). Staff were updated and checked to ensure they were competent. Staff also underwent specialist training in respect of certain medicines that a person required. For example, staff were trained by specialist medical staff how to administer a person's epilepsy medicines and rescue remedy. One staff member said, "I have completed full medication training also epilepsy training which is renewed every two years. One of my clients has episodes at regular times when we have to administer behaviour medication. All entered onto the MAR Chart, entered into hand over daily communication book and family informed."

One person's care records we viewed told us they received medicines as required for increasing agitation, but it was not clearly laid out when this medicine was to be used and what other strategies staff should try first. Also, it did not tell us if the person could choose to take the medicines and what review process was then to take place to see if the use of medicines could be avoided in the future. We spoke with the registered manager about this, it was clear that staff were handling this within current guidance however, the records were not matching their practice. This person's records have now been updated and the service has reviewed their policy and practice to ensure the same learning is used as required for relevant people in the future.

People had detailed risk assessments in place that were linked to their care plans. People's risk assessments were in place before staff started to work and staff were informed of these. As staff got to work with people, risk assessments were then reviewed and refined. This meant they were always current and up to date. Also, as people regained their health, they were supported to take part in assessing and mitigating their own risks; the aim being that a risk assessment was no longer needed.

Staff followed safe infection control practices. Training was regularly updated and staff were provided with gloves and aprons to ensure people were kept safe. All staff were trained in safe food handling and ensured people's food was safely made.

The service demonstrated they continued to learn from events; any accident, safeguarding report and unexpected events.

Is the service effective?

Our findings

The service remained outstanding.

People said of Steps Ahead, "They are all very well trained. They will sort out the GP for me, take me to the surgery and always ask before they do anything for me. They explained the MCA when they set up my care plan" and, "They are well trained, some weren't when they were brought in on short notice but are now. They take me to see the GP. When I was ill (immobile) living in a top floor flat, they arranged sleep over staff, did my shopping until I recovered. I don't need help with cooking. Yes, they explained the MCA to me".

People's needs were assessed extremely carefully on enquiry and initial assessment; a very detailed history of the person was taken. The registered manager and other key office staff ensured the service could fully meet the need before embarking on meeting that need/s. A staff team trained to meet that need would be developed first and planning meetings took place with the person's full involvement. The PIR stated, "The assessment can take place over numerous visits to ensure people do not feel overwhelmed discussing intimate areas of their life. We spend time asking about their future goals and interests to ensure that the staff supporting them have the correct training and skill base to provide support with confidence, patience, enthusiasm and interest. We provide the people who use our service and staff with the information they need, so they are able to make informed choices and decisions regarding their daily life and future goals."

A professional told us, "I think the best commendation I can give Steps Ahead is that when I start with a new client and know that the support team are provided by Steps Ahead I immediately I feel reassured that the client will have excellent day to day input and the team will be responsive to the therapy programme, whatever that may be". A GP told us the service provided an "Excellent environment and carer support 24/7" adding, "The carers are well informed and supported."

People were supported by a dedicated staff team chosen for, and often by, them. This made sure the staff had similar outlooks and interests. This was used as the starting place for training and meant staff had the required skills honed to the person's needs, interests, likes and dislikes. A linked professional said, "My experience with them has always been positive. They appear excellent at 'matching' the right person to the client. However, if the relationship isn't working they are able to recognise this and will change the worker, they respond well to feedback from professionals regarding this. The support workers I have worked with have overall been enthusiastic to work with their clients and keen to learn."

Staff at Steps Ahead were trained to a very high standard; along with mandatory subjects, training was centred on the person's evolving needs. People had therapists involved in creating rehabilitation programmes and all staff were expected to work closely with therapists getting one to one training from these specialist therapists. This included training from the speech and language therapist, neuro psychologist and physiotherapists. As well as classroom delivery the professionals would monitor progress and develop the skill base of the staff teams as the rehabilitation programme progressed. Also, as a person's condition changed, training was reviewed to ensure the person was being supported fully to regain control of their lives and move towards the ultimate goal of no longer requiring Steps Ahead support.

All staff either had or were working towards a certificate in acquired brain injuries. This meant staff understood the specific aspects of acquired brain injuries and their role as a carer. The learning from this had been added into how staff understood specific needs.

A relative said the staff were, "Very well trained, you can tell by their body language they know exactly what they are doing. They have empowered me to be more confident when looking after my relative."

People were given every opportunity to attend training about them and their needs, and if necessary and appropriate, relatives were invited too. This meant the training was reflecting the person. The registered manager told us, "This also give people and relatives an awareness of what we do, why we have to work in that particular way and the benefits that training offers. We reiterate to family members that we must remain compliant and we do not expect them to work the same way in which we do, but it is important for them to have an understanding of the way in which we have to work". One family expressed they are thrilled that in the ten years they have required support from organisations they have not been offered any training or information and are pleased that they found Steps Ahead to move forward with their son's care and support.

The registered manager encouraged staff to seek out and request new training opportunities. New ways and ideas were embraced. Supervisions and annual appraisals ensured staff were understood their training; individual goals and aspirations were discussed to ensure staff maintained their passion and drive while working with people. This was to prevent complacency and encourage them to ensure that they are getting the very best for people; delivering the very best care and support possible to the people who use the service.

Staff told us, "Personal development, plenty of opportunity and support to do extra courses. The company do annual reviews. Management all so approachable; can always ask for more training", "Staff are all well trained. We receive regular supervision and we can also request any training we want" and, "Six weekly staff supervisions and reviews, annual appraisals, regular checks on competency and practice".

The service continued to uphold people's right to have control of what happened to and for them. The PIR stated, that people's human rights and right to be in control were key adding, "We encourage the people we support to have a voice and ensure their views are heard in reference to their care and their views on life and how they wish to live their lives in general and that these views are respected and actioned. We support the people who use our service to be a part of and contribute in the local community so they feel valued and empowered." Information was provided in an accessible format suitable for the person so people could understand and be in the driving seat of their care.

People and relatives told us that the Mental Capacity Act 2005 (MCA) was explained to them and their human rights were respect to the highest level. The registered manager and staff viewed people's mental capacity as regainable. They were aware that having had a brain injury, people would be considered as having reduced ability to consent to their care and treatment. People, therefore, would need extra support and time to regain their independence in respect of consent. There was a communication champion trained by and working with speech and language therapists to ensure they continued to make developments in communication with the people they supported. A person's capacity was kept under constant review with means to support and understand communication used as required. Staff understood when they were acting in a person's best interests and when the person could consent for themselves.

A staff member said, "We give people as much choice as possible encouraging them to reach their potential" and another, "Assuming client had full mental capacity [is important] and, I explain everything and suggest

how we do things. I always go through the care plan with people, including those who do not communicate [verbally]".

A professional linked to the service told us, "We document best interests decisions and capacity decisions together and the registered manager has a very good awareness of the MCA".

The PIR stated, "We work closely with the person's therapy team ensuring that we promote independence in the safest way as possible. We attend regular meetings and work closely with the MDT (multi-disciplinary team). This is to ensure that as an organisation we are providing support in the least restrictive way and empowering the people who use our service to live the life they choose with support, this is especially important to people who may lack capacity in certain areas of their life or people who may be deprived of their liberty."

Staff supported people to be healthy; supporting attendance at health appointments as needed. People were supported to be independent in going to their GP, for example. For one person, this meant support over a period of time was required to achieve this, but now they can go by themselves.

Where staff had a role in supporting people to maintain a healthy diet and remain hydrated, this was achieved effectively. Where there were concerns, the person and/or their relative and key health staff were involved in supporting people to maintain their health and welfare. A staff member said, "One person has a dietician who advises the team on the food and drink provided. We make daily and weekly records of all food and drink the service user has."

People played an active role in planning their meals, buying the food and where possible preparing meals. Where the person struggled with the written word, their meal list for each week was prepared in picture form. This allowed them to then interact with staff and be prompted to remember what their choices were. Staff looked at creative ways to make sure meal times were healthy and fun; snacks were available in line with people's likes, dislikes and dietary plan.

Other staff said, "It's all about knowing your clients. Going through their care plan, knowing what people like and encouraging them to eat and drink. Any issues, would speak to office" and, "Staff have diet & nutrition training. Records are kept in the clients care plan. All actions are written up in care plan. Office runs a 24 hour on-call service and an on-call manager that we can contact".

Is the service caring?

Our findings

The service remained outstanding.

Everyone we spoke with was extremely complimentary about the service and the staff who supported them. People valued their relationships with the staff team and felt they would help them in any way they could. Everybody said the staff went above and beyond what was expected of them.

People told us, "Staff are very kind and easy to get along with. Always a nice atmosphere, always very chilled when they are here" and, "Staff are very kind; they care about me."

Relatives said, "Steps are definitely top of the list"; "Steps Ahead care more than any other agency we have ever had. They are so kind, compassionate and caring. Meeting with them has been an amazing experience. They make my relative feel so special, they are friendly and happy and engage with my relative on their level" and, "We are happy because we know when we leave our relative he is happy and well looked after by Steps Ahead staff. We can now go away on holiday. Steps Ahead have given us our life back".

Other relatives told us, "Steps Ahead staff are very caring, my relative is always pleased to see the carers. They are very good about respecting privacy and dignity. We are always made very welcome, offered a cup of tea, the carers always step out of the room so we can have a chat with our relative" and, "Steps Ahead have empowered us and our relative to do things we would never have tried to do before".

Professionals linked to the service told us, "Steps Ahead appear to be very good at recruiting and retaining staff who are empathetic and caring for the clients that I treat" and, "The carers have always been responsive and helpful putting my patient's needs first; he is encouraged to continue independence as best he can. He has no concerns."

People were looked after and supported by a dedicated staff team who spoke passionately about how they cared for those they were working with. Steps Ahead website stated, "The aim of Steps Ahead Care and Support is to enable the people we support to live as independently as possible. We tailor packages of care and support to meet the clients' individual requirements, this could be for 24 hours a day or a few hours each week".

Steps Ahead supported staff to develop a compassionate understanding for people living after an acquired brain injury. This enabled staff to understand the bereavement people and relatives had for the person before the injury was acquired. A staff member said, "We place the individual and their needs, preferences and aspirations at the centre of the care we provide. We pass no judgement and enable service users to exercise their rights to their independence as much as possible" adding, "We listen carefully, always communicate effectively and ensure their needs and wants are being met, if not exceeded".

People were supported to have their emotional needs met at any time of the day; not just when they had contracted time with staff. A 24 hour on call service was in place for people to use to reach out to. For one

person with a spinal injury, this was effective in supporting them to talk about any concerns that they had and to provide feedback on the carers. It also provided someone to talk to which was recognised as being as important for them as their contractual care. It prevented their mood from escalating downwards.

One person who Steps Ahead support is very close to their house cats as they provided companionship in the hours that they did not receive support; they asked Steps Ahead office team to pop into the property to look after their cats (feeding, cleaning cat litter trays etc) when they were away as they couldn't bear for them to go in to the cattery. They knew that they would be well looked after as they have a trusting working relationship with their support team and the office.

Steps Ahead recognised that they needed to support the emotional needs of the staff as well as the people they were caring for. Due to the nature of the injury, people could have a crises and/or outburst at any time. This could then impact on the staff. Immediate debrief of staff was provided along with 1-1 support to staff at a location that suited them to ensure they were confident to discuss how difficult their role could be at times. The registered manager told us, "We know all of our staff as we spend time getting to know them and what they enjoy; we have an open-door policy and welcome our staff to visit us. They often visit on a weekly basis to personally hand timesheets in and stop for a cup of team and a chat" adding, "We will also work with our staff to unpick situations and look at different ways of working. If we feel that there could be a potential risk in a breakdown in the working relationship we will place our staff in a different package of support to ensure their own health and wellbeing". The aim then is to ensure the staff member can continue to provide care to the highest standard through building staff emotional resilience.

Staff were aware of issues of confidentiality and did not speak about people in front of other people. When they discussed people's care needs with us they did so in a respectful and compassionate way. Confidentiality was discussed at staff team meetings, reminding staff about professional boundaries and praising the way they worked with people.

Is the service responsive?

Our findings

The service has improved to Outstanding.

People were provided with very personalised, bespoke care. From initial assessment through the assessment and care planning process, people were supported to make informed choices about their care and whether they wanted care from Steps Ahead. This led to a partnership approach with the service and all the professionals involved. The PIR stated, "We spend time with people who are interested in using our service to ensure that they know what we can offer and how we could deliver the service they require and if they feel that this is the service they would like to receive. We will provide our statement of purpose and service user guide, in easy read format if required. We spend time obtaining information regarding, needs, including personal care, diet and nutrition, health concerns, beliefs, wants, and aspirations. We also discuss with professionals involved in the care and support such as their GP, optician, occupational therapist through our assessment process."

People told us they were happy their care was created for and with them. They told us, "My care plan was set up just how I wanted it, Steps Ahead act quickly if I am ill, call the GP and once called an ambulance" and, "I was involved in setting up my personalised care plan and it is reviewed regularly. The staff in the office are great; they respond so quickly".

Relatives said, "My relative's care is so personalised. Carers engage with them, take them places that are not too noisy or crowded. Drive them to the garden centre, out to lunch once a week. Steps Ahead are good if my relative is ill, will call the GP" and, "All Steps Ahead care is personalised, needs are 'gathered up' in a care plan. They are very responsive. My relative waits for them to arrive in the morning; looks forward to seeing the carers".

Professionals linked with the service said, "They are responsive to changes in care and therapy plans; any concerns or issues that I may raise are acted upon" and, "Staff are supported in working more toward a rehabilitation model than a care model and helped to address any issues they have around this".

People were provided with a care manager who would plan to meet them often, but also could meet them at short notice or to deal with a specific issue or concern. These can be formal meetings or a chat over a cup of coffee. Time is taken by the care manager to get to know the people they support to ensure they are getting the very best out of their everyday life, future goals and aspirations.

Continuity of care was extremely important and by ensuring committed teams worked in a consistent way, Steps Ahead had promoted independence for all and provided confidence to the people who used the service. SMART goals were set with people from the start of Steps Ahead working with them. That meant they were specific, measurable, achievable, relevant and time focused. In this way, people could identify when they had progressed in small or bigger steps. Through repetition and patience, a range of people had been supported to achieve steps in their recovery that most people would take for granted. For example, one person this could make meals and drinks in a safe way. Another person was enabled to walk after

spending a long period of time confined to a wheelchair and for another person, regaining control of their continence was achieved.

To support people to remember to complete tasks or attend appointments, assisted technology could be used. This meant prompts could be built in and support independence. The most used was iPads as these could be used as "memory boards" such as alerts to take medication. Applications (apps) were downloaded and/or programmes used as recommended by the therapy team. For example, one person was using "Proloquo2go" which is a communication app so they do not rely on others to initiate conversation; they can now do this himself. Apple watches also linked to mobile phones offering many people the opportunity to safely remember to administer their own medication. The PIR added, "We also set reminders for appointments and visits. These can then be shared by the person with the practising team to ensure that everyone is aware of scheduled appointments. On a more practical level, some of our clients attend the London Sleep Clinic and have been recommended to go to bed and turn the TV off at a certain time. We can set these reminders on the watch/phone so the people do not feel like they are being told what to do and they have the independence to make their own choices regarding this."

The registered manager advised at the start of the inspection that the aim of Steps Ahead should be to reduce the need for support. Celebrating signs of rehabilitation was really important as was identifying and responding to requests for less support. For example, one person asked to reduce the night time care as they were finding it too intrusive. The person was concerned about balancing their having seizures against wanting more privacy. An app was trialled through the client's smart watch that would alert their family and the on-call service of any seizure activity so Steps Ahead could then respond. The registered manager added, "This provided reassurance to the client and their family members". The reduction of support was ongoing as the person relearnt living skills in a safe way through continuity of support and repetition of tasks. For example, the person chose five different meals they wanted to cook from scratch. Staff then developed the shopping list with them based on the lay out of the store where they would shop at. Staff then documented the recipe in the person's accessible format. Staff and the person practiced preparing and cooking those meals in exactly the same way until the person remembered the process step by step.

Staff were extremely enthusiastic about ensuring the care they provided was personalised and individualised. All the staff we spoke with demonstrated they were always thinking of what else they could do to support people in their independence. They also evidently knew people really well and expressed how much they loved their work and the people they were working with. Staff told us, "The care plans are read before coming on and during shift. When the care plans are put together the service user is at the centre of them being completed. The plan is heavily informed by their views and feelings" and, "Communication is very good to keep staff up to date by use of communication diaries, team emails, individual emails, notice board and, handovers". Another staff member said, "We have comprehensive care plans and risk assessments specifically directed for our service user by management and an on-call person to support us 24 hours a day. There are provisions for all matters and regular meetings with the care manager, directors, therapists and family members to keep the care we provide moving in the right direction."

People were supported to make full use of their community and keep active. People were supported to follow and keep up their hobbies where this was possible; in some cases, to regain the confidence and ability to do so. Staff said, "I suggest activities but try never to over face people with big activities. Support them to be active at their own pace"; "Talk with clients, give them choices, encourage independence. Keep it simple when talking with non-verbal clients" and, "Help people do what they want, support them to do as much as they can to be independent". The PIR stated, "We work collaboratively with support groups such as Headway, Silver Linings, Memory Matters and memory cafes we also look at supporting the people we

support to access local community based activities such as singing groups, gym and exercise classes to improve their confidence and life skills. We will spend time with the people who use our service to research, contact and sign up to groups relevant to their needs this also encourages social interaction with people who may be experiencing the same difficulties as themselves".

People's end of life care planning was approached at a timing appropriate for the person and their family. Steps Ahead recognised that people they were supporting had suffered a life changing injury and had already faced issues around life and death. Staff understood people's feelings around this needed to be approached sensitively. Some people and their relatives had wanted to put plans for their end of life in place; others did not.

People and relatives understood there was a complaints process, but also felt they could speak up at any time. The complaints policy, forms and who they could speak to were made available in an accessible format to meet their individual required communication need.

People said, "Any complaints I would phone Steps Ahead office or contact the CQC" and, "I made a complaint once, it was soon sorted. I know who to talk to". And relatives said, "Any issues, we were told to contact the manager. Complained once and it was dealt with immediately" and, "Any concerns, would contact the manager".

Staff told us they would identify changes in a person's presentation. They would listen to people's concerns and support them to make a complaint if needed. Staff told us that any complaint was taken very seriously and used as a learning point for the team of carers for that person. One staff member said, "We have a reflective team, where at every level, people can bring their concerns to me the team leader or to our care manager, which are then reviewed and an action plan is put in place". They added that external agencies would be contacted depending about the concerns.

Is the service well-led?

Our findings

The service remained outstanding.

The service benefitted from a strong management structure which provided clear lines of responsibility and accountability. The registered manager spoke with pride and passion when they discussed the quality of care and staff team, giving a comprehensive presentation about their service. People using the service, and staff all spoke highly of the management team, knowing them well. People and their relatives and health professionals all considered the service was well-led and that excellent standards of care were provided by a team of highly skilled and caring staff.

The registered manager and provider provided outstanding leadership and were committed, innovative, knowledgeable and organised. They provided clear and confident guidance and demonstrated strong values in all aspects of their role. The values are, "Our values are to ensure that we deliver a service of excellence to the people who use our service and our employees, we are driven by passion to provide the highest calibre of care and support whilst implementing bespoke rehabilitation programmes. We ensure we take individual needs, wants goals and aspirations into consideration and work with the people who use our service and our teams to achieve these." 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 supported by a range of staff to run the service.

We observed how the service was run during the inspection and found that the registered manager and office based team worked well and respectfully together. Challenges and issues were seen as the opportunity to learn. Staff spoke together to come up with a solution. Ideas from the inspector were something to embrace and consider. One person had called the out of hours number and their case manager was putting plans in place to go and see them straight away.

People spoke freely and happily about the relationships they had built with the registered manager and other key staff at the office. People and relatives spoke about how the service was managed in very positive terms.

A person said, "Steps Ahead is a really well organised service. Definitely the best company I've ever employed. [The registered manager] is in charge. They cover my area; see her every few months. I have her phone numbers if I need to talk to her. Steps deliver excellent care, very personalised. I've never needed to make any suggestions".

Relatives said, "The company has very high standards. The registered manager [or other senior staff] attend our six weekly meetings" and, "So brilliant, excellent communication, always advised of any rota changes. So approachable and supportive. Have met all the managers."

A health professional said, "My dealings with management of Steps Ahead are primarily through the registered manager. She will always attend multi-disciplinary meetings and provides feedback from her team. She is also able to offer opinion on how things are going and seems to know each of the clients (and her staff) well. In my opinion she appears to provide excellent leadership for her team and is a very effective communicator via face to face, phone or email."

Other professionals said, "The registered manager is knowledgeable and proficient in the field of brain injury and keeps involved with each client" and, "I feel involved with the service and am generally kept well informed. If I have a concern I feel able to raise them and feel that they are acted on immediately. I recently voiced concerns that the office was feeling disorganised and received a call back within a week advising that they had re-structured having worked out where the breakdowns on communication were occurring."

The PIR stated, "As a company we keep abreast with new innovative ways of working, by working collaboratively, through joint working with all involved in the care provision. At assessment the person who will be receiving support will be allocated a dedicated care manager who will work with them, their family and the MDT to develop a bespoke care plan to meet their specific individual needs. We also look at service user led staff training and discuss what is important to them with reference to the personality of the person they would like to support them. All senior managers encourage and support a strong focus on inclusion, equality, diversity and human rights throughout the company as a whole and this is felt throughout the organisation".

As an organisation the registered manager advised, they took pride in them being an equal opportunities employer dedicated to diversity in the workplace. People and staff's language needs, sexuality, faith and cultural identity were ensured and respected. For example, one person attended church every Sunday which was extremely important to them. Therefore, the service ensured they introduced staff happy to attend the church service and amended the rota to ensure they were respecting the wishes of the people and staff. The registered manager added, "We ensure that both the people and staff are respected; we ensure that we value the person's private and family life and everyone is treated as an individual. This is achieved by listening and tailoring a support package based on individual need. We listen to our employees regarding their work schedule to ensure that we promote a healthy work/life balance while balancing continuity of support to the people who use our service."

The service was awarded as a disability committed employer which recognised that they ensured their recruitment process is inclusive and accessible. It acknowledged they communicated and promoted vacancies to all, offered interviews to disabled people, anticipated and provided reasonable adjustments as required and, supported existing employees who acquire a disability or long-term health condition enabling them to stay in work.

The registered manager and provider had quality assurance processes in place that monitored the functioning of the service as a whole and how each individual care package was being met. There were formal opportunities to feedback on the service by the means of questionnaires. There was also the 24/7 helpline. However, uniquely every review of people's care was seen at the opportunity to keep a temperature check on the service's functioning as whole. The care plan reviews were used as an opportunity to ensure the service's values and quality were being upheld as well as the person's needs being met. Any issues would then be picked up and responded to appropriately.

The registered manager kept very close links with external agencies; again, to ensure they were getting constant feedback as well as meeting people's needs fully. Staff told us, "We have very good links, very good relationships with external agencies" and, "There is good communication with all extended services". The

PIR stated, "We value our relationships with local services and promote the people we support to access them regularly; when needed and for annual reviews on overall health and wellbeing" and, "We believe that it is highly important to work very positively with other organisations and jointly work to ensure that the people who use our service receive the care and support they require. This also promotes an open culture working more effectively for the people we are supporting".

Staff described the registered manager and office staff as being very supportive and motivated to ensure they had their needs and concerns addressed. Ideas from them were embraced and considered carefully. Staff told us, "The company is well ahead. Staff support is good and the service prioritises client's needs"; "Best thing about the company is how approachable office staff are to clients and, staff know they are 100% appreciated by management" and, "I feel managers are very caring and very 'hands on' to ensure service users' needs are met".

Steps Ahead care used a range of bodies to keep up to date and informed. The PIR stated, "We ensure we keep abreast with new ways of working and monitor our email feed from CQC, ICO (Information Commissioners Office), CHAS (Health and Safety Accreditation), Equality and Human Rights Commission, Local Government and Social Care Ombudsman, Local Safeguarding Teams, HSE (Health and Safety Executive), FSB (The Federation for Small Businesses), BILD (Code of practice to reduce the use of physical interventions), Headway (head injury association) and The Spinal Injuries Association, this ensure that we are always compliant and we can deliver care and support based on best practice and research." Steps Ahead were signed up to the Social Care Commitment and encouraged staff to also sign up to the commitment and remained informed despite this closing on the 11 May 2018. They were also members of CHAS, BILD, Headway the Brain Injury Association, The Association for Real Change, FSB and, The Spinal Injuries Association.

The above, enabled the service to ensure their policies, practices and policies were up to date. It also meant the care planning, training and understanding of people's needs by staff were in line with current thinking. For example, the accreditation with BILD ensured the service was working in line with the most up to date practice and knowledge to support people with a learning disability. The registered manager advised us, "We look at ways in reducing conflict and enabling people to self-manage their anxiety therefore reducing the need for intervention. It also provides us with information that we can share with our teams, who can then discuss with the people who use our service, an example of this may be new technology and the positive effects that it has". As a corporate member of Headway, the service received the latest research on acquired brain injury and how to best support people through their individual rehabilitation journey. This ensured they were delivering the best service to meet individual need and be able to provide people with information regarding social activities within local Headway branches that they may not otherwise be able to access. The registered manager added, "We also fundraise for Headway and the people we support also partake in these events to ensure that people feel they belong and are included."