Ategi Limited

Ategi Shared Lives Scheme-Herefordshire

Inspection report

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Ratings

Overall rating for this service	Good

Is the service safe?	Good
Is the service effective?	Good
Is the service caring?	Good
Is the service responsive?	Good
Is the service well-led?	Good

Summary of findings

Overall summary

Ategi Shared Lives Scheme-Herefordshire is registered to provide personal care for people who live in their homes. At the time of our inspection 72 people were receiving personal care.

The inspection took place on 24 October 2016 and was announced. We gave senior staff 48 hours' notice of the inspection because we needed to be sure that they would be in.

A registered manager was in post 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 was run.

People were protected from the risk of potential abuse and told us they felt safe because of the way carers and staff supported them. Carers and staff took action to support people in ways which promoted their safety. We found people's risk assessments and care plans gave clear guidance for carers and staff to follow in order to promote people's well-being. There were enough carers and staff employed to support people in ways which met their needs and promoted their safety. People managed their own medicines or were supported by carers and staff to do this safely.

People benefited from receiving support from carers and staff who used their knowledge and skills to care for them. Carers and staff took action to promote people's rights and recognised where people were independent. Some people gained a sense of independence through preparing some of their own meals or by making their own health appointments. Where people preferred support to have enough to eat and drink to remain well this was provided by carers. People received the support they needed to access healthcare, so they would maintain their health.

Caring relationships had been built between people, carers and staff, and people enjoyed spending time with their carers and staff. People were treated with dignity and respect and their right to privacy was taken into account in the way carers and staff supported them. People were encouraged and empowered to make their own day to day decisions about the support they wanted.

People were involved in deciding which carers they were matched with and how their care should be planned. The experience and views of people's relatives and representatives were taken into account in the way people's support was planned. People's care was adapted as their needs changed. People and their relatives knew how to raise any concerns or complaints about the service. Systems for managing complaints were in place, so any lessons would be learnt.

Carers and staff understood how the registered manager expected people's support to be given so people would receive the care they needed in the way they preferred. People, their relatives, other professionals and staff were encouraged to give feedback on the quality of the service and to make suggestions for

developing the scheme further. The registered manager, provider checked the quality of the care provide. Assurances were also obtained through the scheme's panel. Where areas for further development of the scheme were identified action was taken by the registered manager and staff to develop the scheme and people's support further.

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 scheme was safe.

People benefited from living in a scheme where staff understood their risks and took action to support them to stay as safe as possible. There were enough carers to support people and people received the medicines they needed in the ways they preferred.

Is the service effective?

Good

The scheme was effective.

People received support from staff who had the skills and knowledge to care for them. People's rights were understood and promoted by their carers and people were supported to have enough to eat and drink. People had access to health care so they would remain as well as possible.

Is the service caring?

Good

The scheme was caring.

People had built caring relationships with the carers and staff who supported them. People made their own day to day decisions about the care they wanted and were supported in ways which promoted their dignity and privacy.

Is the service responsive?

Good

The scheme was responsive.

People decided what care they wanted and how they wanted this to be given. Carers and staff worked in ways which supported people to have the individual support they wanted. People and their relatives knew how to raise any complaints they had and there were systems in place to manage these, so any lessons would be learnt.

Is the service well-led?

Good

The scheme was well led.

People and their relatives were positive about the way the service was managed. Carers and staff knew what was expected of them and felt supported to provide good care. Checks to monitor the quality of the service provided were regularly undertaken and action taken to develop the service further.

Ategi Shared Lives Scheme-Herefordshire

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 inspection took place on 24 October 2016 and was announced. The provider was given 48 hours' notice because the organisation provides personal care to people in shared lives schemes and we needed to be sure someone would be in. One inspector carried out this inspection.

Before the inspection, the provider completed a Provider Information Return (PIR). This is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make. We reviewed the information we held about the service and looked at the notifications they had sent to us. A notification is information about important events which the provider is required to send us by law. We requested information about the scheme from the local authority and Healthwatch. The local authority has responsibility for funding people who used the scheme and monitoring its quality. Healthwatch is an independent consumer champion, which promotes the views and experiences of people who use health and social care.

We spoke with five people who used the scheme by telephone to gain their views about the care and support they received. Not all people who used the scheme were able to talk to us directly so we spoke with two relatives by telephone. We spoke with the registered manager, two senior Ategi care staff, nine Shared Lives Scheme-Herefordshire carers (carers) and a member of Ategi administrative staff.

We looked at three records about people's care and people's medicines. We sampled three Shared Lives Scheme-Herefordshire carers' recruitment files and checked staff and carers training records.

We saw the compliments which had been received by the scheme from health professionals and relatives. We checked records showing the actions the registered manager had taken when one person's representative had raised a complaint. We also looked at records about people's safety, minutes of meetings with staff and newsletters.

We saw the checks the registered manager made to satisfy themselves the scheme was meeting people's needs. These included questionnaires people, their relatives and other professionals had completed and checks made by the provider to assure themselves people benefited from living in a well-managed scheme.

Good

Is the service safe?

Our findings

People told us carers supported them to feel as safe as possible both in their homes and in the local community. All the people we spoke with told us their carers regularly talked to them about the best way for them to stay as safe as possible. One person said, "We talk about safety at our house meetings, so I am learning to look after myself." Another person told us, "I feel safe here." The person explained they knew how to obtain support if they ever felt unsafe, and was confident either their carer or Ategi staff would take action to help them. A further person said, "[Carer's name] talks to me about road safety." Both the relatives we spoke with told us they were confident their family member's safety needs were met. One relative we spoke with gave us an example of the support their family member received from carers when out in the community. The relative told us they had no concerns for the safety of their family member because of the actions taken by their family member's carer.

Carers and Ategi staff explained people's safety and well-being needs were taken into account as part of the process for matching people with carers. This included discussion with people, their relatives and carers and through a placement panel. The panel which approved placements included representatives from other organisations with skills and knowledge in promoting people's safety.

People told us they were supported by carers who knew their safety needs well. One person told us this included their physical safety needs. Another person told us their carer always provided them with reassurance if they were anxious. The person told us their carer did this in the way they preferred. Both the relatives we spoke with highlighted their family member's carers had a clear understanding of the risks to their family member's safety.

We found staff and carers knew the risks to the safety of the individual people they cared for. Carers told us these included risks to people's well-being, finances and physical health. Carers and staff gave us examples of the actions they had taken to promote people's safety. One carer told us this included working with other organisations with responsibilities for helping people to keep financially safe. Another carer explained the actions they had taken to support a person to continue to enjoy relationships with people who were important to them in safe ways. A further carer highlighted how they supported a person as their safety needs changed. The carer told us, "You have conversations to keep people safe."

We saw carers had been given clear guidance on the possible risks to people's well-being and safety in people's risk assessments and care plans, so they would know how to support people in remain as safe as possible.

All the carers told us they had received the support they needed to help them to keep people as safe as possible. One carer explained this included training so they would know how to recognise if people they supported may be subject to abuse. Another carer highlighted how responsive Ategi staff and the provider had been when they had concerns for one person's safety. The carer told us Ategi staff and the provider had worked with other organisations and plans were put in place so the person's safety needs would be met.

People said there were enough staff to support them so they would have the care they needed in the ways they preferred. One person told us, "[Carer's name] always has time for me." Another Person said, "[Carer's name] is there whenever I want to talk to them." A further person explained if their carer was occasionally out, "I can always contact other carers or family members if I need help." One relative we spoke with said, "[Person's name] needs a lot of help with their personal care, and [person's name] always gets this." Carers told us there was enough staff available to meet people's care needs and help them to keep safe. One carer explained "There's enough time to care for them [people]. We are here 24/7." The registered manager explained how new carers were recruited taking into account the preferences of people using the scheme, such as the location they lived, so people's care choices could be met.

People told us they either looked after their own medicines or were supported by carers so they would have their medicines safely. One person we spoke explained they collected their own prescriptions and looked after their own medicines. Another person told us they did not need regular medicines, but were confident if they needed pain relief their carer would support them. A further person said they could rely on their carer reminding them to take the medicines they needed so they would remain well. The person told us their carer always made sure they medicines were stored safely.

Carers confirmed they received regular training so they would develop the skills they needed to manage people's medicines safely. One carer explained the specific risks a person they cared for experienced in relation to medicines, and the actions they took to promote the person's safety. Carers told us people's medicines were regularly reviewed by their GPs. A further carer explained how they had identified an error made by a pharmacy, and the steps they had taken so the person would receive the right medicines, safely. Ategi staff told us about the informal checks they undertook on the medicines issued to people. Two carers we spoke with explained Ategi staff checked the medicines they had issued, occasionally. One carer said this happened "Once or twice a year." We discussed the checks on people's medicines with the registered manager, who gave us assurances the processes around checking people's medicines and staff and carer's competency to administer medicines would be further developed, so people would continue to remain safe.

Good

Is the service effective?

Our findings

All the people we spoke with told us staff had the skills and knowledge to care for them. One person told us, "[Carer's name] is good at everything." Another person said, "[Carer's name] has the skills to look after me. [Carer's name] does everything pretty well, and encourages us to do things ourselves." Both relatives we spoke with told us their family member's received support from carers with the skills required to support their family members well. One relative we spoke with highlighted how skilled staff were at, "Keeping [person's name] safe."

Carers we spoke with told us they had regular training which helped them to develop the skills they needed to care for people. One carer said, "The training is really good. We get our training paid for and get appropriate training for the job." Another carer gave us examples of specialised training which had been arranged so carers would develop the skills they needed to support people with specific health concerns. A further carer told us, "Ategi's training has developed me further, and makes the house run smoothly for people." The carer gave us an example of how the training they had received had been implemented, so people they supported would be as safe as possible in the event of a fire. One carer we spoke with told us the training provided did not always reflect the environment people lived in, but said they were able to transfer the knowledge from training provided to people's home setting.

We saw the registered manager had systems in place so they could be assured carers and Ategi staff had regular opportunities for developing their skills further and people would continue to receive care from staff and carers with the skills to meet their needs. The registered manager explained regular reports on staff training undertaken were shared with the panel with responsibility for agreeing matches between people and carers.

The Mental Capacity Act 2005 (MCA) provides a legal framework for making particular decisions on behalf of people who may lack the mental capacity to do so for themselves. The Act requires that as far as possible people make their own decisions and are helped to do so when needed. When they lack mental capacity to take particular decisions, any made on their behalf must be in their best interests and as least restrictive as possible. We checked whether the scheme was working within the principles of the MCA.

People told us they were involved in decisions affecting them and said they were encouraged to make their own decisions whenever possible. One person told us, "I was given a choice about moving in here, and asked if I wanted a flat on my own, or to stay in shared lives." Another person said, "I decide when I want my hair cut and what style I want." All the people we spoke with understood they had the right to refuse care. One person told us they had done this, and said, "I was listened to by [Ategi staff member and carer's names]."

Carers told us they had been supported to understand how the MCA affected the way they needed to care for people, through training and discussion with Ategi staff. One carer gave us an example of how they had supported a person so they could make their own decisions about who they chose to spend their time with. Another carer explained how they checked people's body language, so they could be sure people were really

agreeing to the care offered. A further carer explained how they encouraged and supported a person to make their own decisions, as this was not something the person had previously had the opportunity to do. The carer told us, "It's about empowering people, so they have the confidence to make their own decisions and can speak up for themselves."

Two Ategi staff gave us an example of when a decision had previously been taken in one person's best interest as their needs changed. Ategi staff explained how the decision had been made taking into account if the person had any representatives with legal rights to make the specific decisions. Ategi staff had begun to develop systems which reflected if people had representatives with the legal rights to make some decisions on behalf of people. The registered manager explained how these would be further developed so it was clear which areas people's representatives had the rights to make decisions on. We saw people's care plans and risk assessments considered if people need support to make specific decisions.

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. Applications to deprive someone of their liberty must be made to the Court of Protection. All of the people we spoke with told us they were not subject to any depravation of their liberty. One person said, "I can go anywhere I want, when I want." Another person told us, "It's my choice if I go out. I choose to go out regularly to the shops." Carers gave us examples of the guidance and support Ategi staff had provided to them so they could be sure they were caring for people in the least restrictive way and people's rights and liberty was respected.

At the time of the inspection, the provider had not needed to make any applications to the Court of Protection. Staff we spoke with understood the role of the Court of Protection and how this would potentially affect the way they cared for people.

People we spoke with enjoyed the opportunity to prepare some of their own meals. People told us they were encouraged to decide what they wanted to eat and drink and where they preferred to eat. One person explained, "We (the people living at the home and their carers) sit down and we decide together what we want, so it's healthy." Another person said, "[Carer's name] knows what food I like." A further person told us, "[Carer's name] cooks good, healthy food. It's a balanced diet."

Carers gave us examples of how they supported some people so they would have enough to eat and drink and remain well. One carer said, "As well as preparing their own breakfast and lunch some people enjoy helping to do the veg for their evening meals." Another carer explained how they had supported one person to have enough to eat and drink using specialist equipment. We saw carers had been given guidance to follow in people's care plans so people would enjoy the best nutritional health possible.

Some people told us they enjoyed the independence of making their own health appointments. Other people we spoke with explained they liked to be supported by their carers when accessing healthcare or if they were ill. One person explained how supportive their carer was and said "If I am feeling ill [carers name] makes an appointment for me to see the doctor or my dentist." Another person told us how they had been supported to lose weight so they would enjoy good health. The person said they had discussed the best way for them to do this with their carer, so they could still enjoy some of the foods they preferred.

One relative we spoke with explained their family member was supported to see health professionals regularly, so their health would continue to be promoted. The relative said, "[Person's name] is being checked every 13 weeks." Both relatives we spoke with were confident carers would take action to support their family members if they needed any care from health professionals.

Carers explained how they supported people they cared for to have regular health checks so they would remain well. One carer explained how they had supported a person so they would be able to understand their health choices when considering a new form of surgery. The carer told us the person had made their own choice about whether to go ahead with the surgery and decided they did not want to do this. The carer told us the person's decision had been respected.

Good

Is the service caring?

Our findings

All the people we spoke with told us staff were kind and considerate and they were included as they wished to be in the carer's families lives. One person said, "It's great living here as it's a really nice family, and everything [carer's name] does makes me feel she is kind." Another person told us, "We have a laugh and a joke, and I get on well with [carer's name] partner, too." A further person explained because of the way they were supported by their carer and the carer's family, "I like the whole [carer's] family and like living with them." One person explained how well they got on with other people living in their home, and how much they enjoyed spending time together doing things they enjoyed. Another person told us, "On my birthday [carer's name] did a big party for me and all my friends came. It made me feel special, and we celebrate [carer's family member's name] birthdays, too."

One relative said, "We could not have asked for better carers. [Person's name] is treated as one of the family, and goes out with them all the time. There's familiarity." The relative highlighted how well their family member got on with other people living at the carer's home. The other relative we spoke with told us their family member was cared for in ways which meant, "[Person's name] wants to stay there and gets on well with [Carer's name]."

Carers told us some of the actions they took so people would know they were valued, and part of their families, where people chose this. One carer explained, "Mine [people they cared for] are part of the family so sit and eat with us." Another carer told us, "You get attached, as you live as a family." Carers told us how they celebrated significant events with people, such as their Christmas and birthdays, and how people were included in family holidays, where they chose this. Staff and carers spoke warmly about the people they cared for and some people we spoke with liked to refer to their carers by family titles. Every person we spoke with was positive about the relationships they had built with the carers and the carer's family members.

People told us they started to build relationships with their carers and other people living in their carer's home before they moved in. One person explained how they had initially visited for tea. The person told us this had given them the chance to find out about life in their carer's home and start to get to know their carer and extended family. Ategi staff we spoke with told us, "Tea and introductions help you to learn more about people, and we gradually learn more so we can make sure we are meeting their needs." A carer we spoke with explained people were also given the opportunity to stay for a night with potential carers, so they could get to know each other. The carer explained this also gave people the opportunity to make informed decisions about being supported long term by the carer. Carers told us they also started to find out about people through discussions with Ategi staff and by reading people's assessments, to find out about their histories and preferences. Another carer we spoke with said because of the trust established between the people they care for, "They [people cared for] feel they can tell me anything."

People told us staff knew them well, and said carers always took time to chat to them about things that were important to them. One person told us, "[Carer's name] is always there if I want to talk to them." Another person we spoke with said, "[Carer's name] is always understanding." Carers we spoke with showed us they understood how people liked to be supported. Carers gave us examples of how they used this knowledge so

people would be supported in the ways they preferred. One carer explained knowing the people they supported well helped them to reassure them in the way they preferred, so they were less anxious.

People gave examples of the day to day choices they made, such as where they wanted to go and what they wanted to do. All the people we spoke with said they were supported to make their own choices and their decisions were listened to and acted upon. One person told us, "I can change my room round how I like it." Another person told us, "We decorated my room a few months ago. It's so nice. We [the person and the carer] chose it together." Carers we spoke with told us people made their own decisions about meals, how they chose to travel, and what holidays they wanted to go on. One carer told us people living with them elected to spend their time doing things they liked to do individually, rather than as a family group, and gave us examples of how this was respected.

All the people we spoke with told us they were treated with dignity and their right to privacy was respected by carers. One person said, "I always get privacy when I want it". Another person told us, "I like living here, as I have my own space." A further person said because they were treated with dignity and respect, "It's always relaxed at home." One person we spoke with explained how pleased they were their independence in managing their medicines was recognised by carers. The person said because staff understood they could manage their medicines on their own they felt they were listened to and respected.

Good

Is the service responsive?

Our findings

People said they were involved in deciding which carers they were matched with. One person told us they had visited potential carers and had the opportunity to stay overnight so they could decide if they wanted to live with the carer and their family. Another person highlighted they got to meet with potential people moving into their carer's home before any decision about them moving in were made. The person told us their views had been listened to, the new person had moved in and the person who was established in the home said, "We now like to do things and watch telly together."

Carers told us placements were agreed through a panel process and carers skills, experience, location and interests were matched with the people they would potentially support. One carer explained how overnight stays were offered to people. The carer told us about the person who had most recently been placed with them and said, "[Person's name] came for tea, and was asked if they wanted to stay overnight, but said they didn't need to, as they liked the other people and house so much."

People told us they were involved in deciding what care they wanted and in deciding the best way for this to be planned. People said Ategi staff regularly visited them to talk to them about the care they were receiving and to check they were enjoying living with their carers. All of the people we spoke with told us they felt they would be listened to if they made any suggestions about how their care was planned. One person explained they had been encouraged to choose between interesting things they wanted to do. The person told us, "They [carers and Ategi staff] listened to me and I get to do what I chose." Another person said, "I have not had to make any suggestions about my care, as [carer's name] know me pretty well." A further person said, "I liked doing my care plan and risk assessments as this gives me the chance to chat to [Ategi staff member's name]." One relative told us, "[Person's name] enjoys his reviews as he is the principal person. [Person's name] said he wanted to have his eye test and go to the dentists on his own, and we have now planned for this."

Carers told us their views and experiences helped to shape people's care plans and risk assessments. One carer told us, "Their [people's] plans are decided by them themselves, but Ategi staff and [registered manager's name] will give support if people need it. Care plans are thorough." Another carer said, "They (people) get a say on their care plans, and say what they want to do." Carers told us people's risk assessments and care plans were regularly reviewed, and meetings to discuss this were brought forward if people's needs changed. One carer highlighted how responsive Ategi staff had been when a person they supported was anxious. The carer explained how risks to the person had been taken into account in the plans put in place so the person needs would be met as quickly as possible.

An Ategi staff member gave us an example of changes which had been introduced so a person could remain as independent as possible as their vision declined. The Ategi staff member told us, "We adapted [person's name] care plan so they would be able to be as independent as possible. We also put plans in place for the future, and did this in steps, at [person's name] pace." Another Ategi staff member said, "Reviews don't feel formal, they are relaxed." The Ategi staff member told us they varied the location of their visits and reviews to suit people and explained how they had visited one person when they were out in the community, rather

than in their home. The Ategi staff member said, "It gives you a chance to get to know them in their own environment, and they are more talkative." The Ategi staff member told us because of this, people would be more relaxed and confident to ask for the care and support they wanted.

A relative highlighted how supportive their family member's carer had been when preparing for reviews. The relative told us the carer had spoken with all of the other organisations their family member spent time with. By doing this their family member's achievements in all areas of their life could be fully celebrated. Another relative told us, "The reviews work well for us. I have not needed to make any suggestions as to what they need to do and they are meeting [person's name] needs."

We saw people's risk assessments and care plans reflected what was important to them and provided carers with clear guidance on how to support people in the way they preferred. We also saw people had been involved in deciding what care they wanted, how their risks would be managed and how they wanted their support to be given.

People and their relatives told us people had opportunities to do things they enjoyed doing and that people were encouraged to keep in touch with family and friends who were important to them. People said they regularly did things they enjoyed, such as trips to theatres and cinemas, attending clubs with their friends and shopping independently or with their carers. One person explained how their carer showed interest in the things they liked to do. The person said their carer often went to community events with them, so the person and the career could enjoy the person's interests and achievements together. Another person said, "[Carer's name] always suggests we do things I like to do." A further person told us they were encouraged to keep in touch with people who were important to them. One person explained about the volunteering they did and how much they enjoyed doing this. The person said, "We are out a lot."

People gave us examples of how the support they received was helping them to become more independent and confident. One person told us with pride, "I had no independence before I came to live here. I now do my own ironing and keep my bedroom clean, and do my own breakfast." Another person said because of the way they were cared for and carer's support for their lifestyle choices, "I can be myself." Another person we spoke with told us they liked the fact their carer understood they could now travel independently when they went out to do things they enjoyed, such as visiting family and friends.

A carer told us about people they supported and said, "[Person's name] has changed beyond recognition, they are now part of a [community] group which tackles bullying and are on the Board of Trustees." Another carer explained how one person they supported had started to take group holidays in an independent way. The carer said this had increased the person's confidence in new situations.

People told us cares supported them in flexible ways so their needs were met. One person told us they were able to vary how they travelled back to their home when they had been out doing things they enjoyed. The person said they could contact their carer at any time if they needed support to return home. The person said this helped to reduce their anxiety when they were travelling independently. A relative told us their family member's carer had taken their own holidays in a flexible way, and returned to support people part way through their holiday so their family member would have the reassurance of seeing their carer again sooner than initially planned.

Carers gave us examples of how they had approached supporting people in flexible ways so people's individual needs would be met. One carer said, "You adapt your family holidays to suit people." A member of Ategi staff explained how they had offered to support one person when they were anxious about an appointment they had. The Ategi staff member said, "The person saw the other side of my role, it's about

reassuring people."

People and the relatives we spoke with knew what action to take if they needed to raise any complaints or concerns. All of the people and their relatives told us they had not needed to make any complaints about the care they received. People told us this was because they were listened to if they had any concerns, and action was taken to resolve these. A relative said they had raised a concern and this had been addressed by Ategi staff.

We found the registered manager had investigated any concerns about the care provided and resolved these before they escalated to formal complaints. We saw one complaint had been received which did not directly relate to the care provided. The registered manager had taken steps to address the complaint promptly, and considered if any lessons could be learnt. We also saw people using the scheme and an external health professional had sent Ategi staff compliments about the quality of the support provided.

Good

Is the service well-led?

Our findings

People told us the scheme was managed in ways which helped them to live their lives as they wanted to. One person told us, "I can rely on [Ategi staff member's name] coming to check I am okay. They [Ategi staff] are organised and if I need [Ategi staff member's name] I can get hold of them." Another person said, "[Ategi staff member's name] turns up when I expect them, and knows what to do." The person told us because of the way the scheme was managed and the support they had, "I would like to stay as long as [Carer's name] will have me." One relative told us the scheme "Is very organised and they try to involve us." The relative said as a result of the way the scheme was managed, "We have no problems and [family member's name] is in a good place."

Carers were positive about the way the scheme was managed. One carer said "It's very efficiently managed, and there's support from all the Ategi staff, right up to the [provider's] CEO [chief executive officer]." Another carer told us because of the way the scheme was run, "Everything is good." A further carer told us, "Everything I have seen done, such as finances, are well organised." One carer said they were also able to obtain support from other local carers, too. A further carer told us they had been listened to when they had made a suggestion about which Ategi staff member would be best to support them. The carer told us the new arrangements were working well, and they found the registered manager to be supportive.

All of the people we spoke with said they found the registered manager and Ategi staff to be approachable. One person said, "I feel I can talk to Ategi staff and they will listen to me." One relative we spoke with told us, "We find [Ategi staff member's name] very open to discussion." The relative told us as a result of this, "They [Ategi staff] are getting to know [person's name] well." The other relative said they were able to discuss their family member's long term future with Ategi staff and told us, "How we communicate has come out of [person's name] growing independence." The relative told us their family member "Wants to stay there (with his current carers)."

Carers told us the culture of the scheme was open. One carer told us, "I would not hesitate to say I could ring at any time. We are a group of people working to the same ends. They (Ategi staff) are happy to talk to us in an open way. [People's names] also feel able to say what they want to and communication is good." Another carer told us, "I can speak to either co-ordinator [Ategi staff] and they will listen." A further carer said, "We want to support them (Ategi) because they support us. It's a good service." Two carers we spoke with highlighted the provider was open in their communication. One of the carers said, "I find [Provider representatives' names] very positive." An Ategi staff member told us because of the culture of the scheme and the way they were managed, "We want a happy ship here, and we have got one."

The registered manager said, "We engage with carers well. It's a local scheme and carers know what we expect of them, through the support they get. We provide a realistic experience of living with a family in the community and we organise this so they [people] can get on with living their lives. We do this well."

Carers told us they would have no hesitation in contacting Ategi staff if they required support, and said the registered manager and Ategi staff were approachable. One carer said, "There's always someone [Ategi staff]

at the end of the phone. They know and understand people's needs and this helps people." The carer described how the registered manager and Ategi staff had put plans in place to develop the scheme further for one person as their needs changed. The carer told us the registered manager and Ategi staff had been proactive in considering the person's needs when developing the scheme and said, "It's about future proofing." Another carer we spoke with highlighted how good communication was with Ategi staff and said, "If I have a problem there's always someone at the end of the 'phone and it gets sorted." A further carer we spoke with said, "I'd be comfortable to talk to [registered manager's name] about any suggestions I wanted to make, but have not made any to date."

Another carer gave us an example of when they had to contact Ategi's out of hours support, as the person they were supporting was anxious. The carer described Ategi staff's response as "Amazing. The support from here (Ategi- Shard Lives Scheme - Herefordshire) was brilliant." The carer described how Ategi staff had worked in a flexible way so the needs of all the people living with them were considered and their needs met. One carer said they were not sure if Ategi staff would be able to support them in some aspects of health care, but said they were able to obtain advice from other local carers and community nursing staff.

People, their relatives and carers told us they kept in touch with Ategi staff when people's care was reviewed. People said Ategi staff also regularly visited them to see if they were enjoying their lives. Carers told us they went to carers' meetings with Ategi staff. One carer said, "I am really pleased Ategi have taken over as I understand they are trying to raise the profile of the care (provided)."

Carers and Ategi staff said they were supported to understand what was expected of them. One carer explained how they were encouraged to reflect on their own practice at carers meetings, and how Ategi staff used the meetings to let carers know what actions they needed to take. The carer told us, "Ultimately, it's about keeping people safe." Two Ategi staff members told us "We have clear direction from [registered manager's name]." One Ategi staff member explained this started at the point of initially meeting with people to discuss possible matches with carers. The Ategi staff member said, "You use your knowledge when matching people. It's not heads on beds, here, the approach is for the best match of people."

People said they were encouraged to let Ategi staff know what they thought about the support they received through questionnaires, and at their reviews. One person said of the questionnaires, "I have had a couple of these. I am always quite happy and let them [Ategi staff] know this." One relative told us their views of the scheme were also checked through questionnaires. The relative said, "We have not had to make any suggestions, as they [Ategi staff and carers] do everything they can for [family member's name] and will ask for our advice as they go along." The completed questionnaires we sampled were positive.

The registered manager had systems in place so they could check people's experience of the quality of the support they received. These included questionnaires sent to professionals from other organisations. The registered manager met regularly with Ategi staff to discuss people's changing needs and to plan any actions required to develop the scheme further. We saw minutes of meetings with staff. These showed us the registered manager checked people's support needs were being met, carer's access to training, and checks on the effectiveness of the matching processes used

Carers told us about group meetings with the registered manager. The registered manager explained as a result of feedback they were now offering training in the evenings, so all carers would be able to attend sessions. Some carers we spoke with also attended an independent carers' forum. The registered manager gave us an example of actions taken by the provider as a result of listening to suggestions made at the carers' forum.

One person we spoke with told us they were involved in the running of the scheme by acting as a representative on a group that checked potential carers' suitability to support people. The person told us they enjoyed taking part in the group and said they felt their views were listened to. The registered manager also explained how two people were contributing to the development of some local health signposting initiatives. Ategi staff and the registered manager explained how they met with other senior Ategi staff members from other shared lives schemes, so they could learn from each other and continue to develop Ategi Shared Lives Scheme-Herefordshire further.

The registered manager and Ategi staff explained how they worked with other agencies so they would continue to develop the scheme based on best practice standards and people would receive the support they needed. The registered manager told us, "Other organisations are happy to engage with us." The registered manager gave us an example of how effective work with other agencies had promoted one person's safety. The registered manager explained about plans they had to further develop their work with other agencies. These included work with a new local authority learning disabilities partnership board, autism groups and health initiatives.