

# Autism Together The Ferns

## Inspection report

Raby Hall Road  
Bromborough  
Wirral  
Merseyside  
CH63 0NN

Tel: 01517375952  
Website: [www.wirral.autistic.org](http://www.wirral.autistic.org)

Date of inspection visit:  
13 December 2018  
07 January 2019

Date of publication:  
06 March 2019

## Ratings

Overall rating for this service

Requires Improvement ●

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

# Summary of findings

## Overall summary

This unannounced comprehensive inspection took place on the 13 December 2018 and the 7 January 2019. On the first day of our inspection we visited the home and spoke with people, their relatives and staff members. On the second day we visited the offices of Autism Together to access various records to complete our inspection.

The Ferns is a 'care home'. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

At our previous inspection in March 2016 the service was rated as good. At this inspection the service was rated requires improvement in responsive and well-led and overall rating is requires improvement.

In June 2017, CQC published Registering the Right Support. This along with associated good practice guidance sets out the values and standards of support expected for services supporting people with a learning disability and or autism.

There was evidence that people had benefitted from the support offered to them; however, in its strategy and delivery of support the provider was not always following current best practise guidance, including but not limited to Registering the Right Support. In particular promoting as much as possible that people receiving support are independent and live as ordinary a life as any other citizen.

The Ferns was in a time of change and was being used as people's home, for short breaks and for people who used the home for a few hours before and after day services. Whilst there was a nice atmosphere in the building it did not feel like people's home and at peak times it was very busy with lots of distractions.

The home accommodates up to eight people in one purpose built building on a campus with another five registered premises, all providing accommodation and care for people with autism. A total of 59 people can stay on the campus known as 'Raby' at any one time. There are also day services provided on the same site. Current best practise guidance promotes housing models that increase opportunities for people's independence, choice and control.

Some aspects of people's support and accommodation were institutionalised. When speaking about people and in documents, staff providing support used a lot of organisation based language and jargon that inadvertently promoted a difference between the people supported and other people.

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

The registered manager contributed to a friendly and relaxed atmosphere at the home. It was clear from their interactions that the registered manager knew people well and had positive relationships with them; they were comfortable around him and enjoyed his company. Staff members and people's relatives told us that they had confidence in the registered manager. One people's family member told us, "He is an incredible manager, absolutely outstanding. . ."

People and their relatives told us that they had confidence in the service provided at The Ferns and they thought that the home was safe. One person told us, "They look after me here. I get on well with staff." Another person's family member told us, "He really bonds with the staff; which makes me feel more relaxed. He took to it here like a duck to water."

There was a relaxed atmosphere at the home and people appeared comfortable in all areas of the building, including the office area. We saw friendly interactions between people living at The Ferns and staff members. It was clear that people felt relaxed and comfortable at the home and the use of appropriate humour helped create a friendly atmosphere. People were communicated with and supported to express their views and helped to make decisions in a way that best enabled them to understand and express themselves.

The service had systems and processes in place to help protect vulnerable adults from abuse. Each person had individualised risk assessments that helped staff members to keep people safe and the home's environment was clean and safe.

Some people at The Ferns had previously lived in a more intensive support setting. We saw that their transition into the home had been thoughtfully done in a person-centred way, at a pace that was best for people. Some people had been supported to set out personal goals that they wanted to achieve and worked towards these. People had grown in confidence and tried new things since spending time at The Ferns and some people had made quick progress towards these goals.

One indicator of the success of people's support was the sharp reduction in some people using medication to reduce anxiety since moving to The Ferns. One person's family member told us that before coming to The Ferns their relative spent over two years in assessment and treatment units. They told us, "Autism Together have changed his life since he moved here."

Staff told us that they felt well supported and they enjoyed working at the home. One staff member said, "Its a rewarding place to work. With great staff and people supported." Staff received support with daily briefings, supervision meetings, regular training, team meetings and annual appraisals.

## The five questions we ask about services and what we found

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service remains good.

### Is the service effective?

Good ●

The service remains good.

### Is the service caring?

Good ●

The service remains good.

### Is the service responsive?

Requires Improvement ●

The service has deteriorated to requires improvement.

### Is the service well-led?

Requires Improvement ●

The service has deteriorated to requires improvement.

# The Ferns

## **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 unannounced comprehensive inspection took place on the 13 December 2018 and the 7 January 2019. On the first day of our inspection we visited the home and spoke with people, their relatives and staff members. On the second day we visited the offices of Autism Together to access various records to complete our inspection.

The inspection was completed by an adult social care inspector. Prior to our visit we looked at any information we had received about the home including notifications about events that the service is required to send to the Care Quality Commission, along with any contact from people using the service and their relatives and speaking with the local authority. This included the Provider Information Return (PIR). This is information we require providers to send us at least once annually to give some key information about the service, what the service does well and improvements they plan to make. We used this information to plan how the inspection should be conducted.

During the inspection we spoke with two people who used the service and three friends and relatives of people who use the service. We spoke with five staff members including the registered manager. We looked at the care and medication records for three people and the employment and training files for three members of staff. We also spent time observing the day to day care and support provided to people.

# Is the service safe?

## Our findings

People's relatives told us that they had confidence in the service provided at The Ferns and they thought that the home was safe. One person's family member told us, "I trust the staff, I am convinced he is safe here. He is quite willing to come [to The Ferns], that tells you enough." Another person's relative told us, "He really bonds with the staff; which makes me feel more relaxed. He took to it here like a duck to water."

The service had systems and processes in place to help protect vulnerable adults from abuse. Safeguarding information was available to people in a format that helped them understand the information. The provider had appropriate safeguarding policies in place which staff could use for guidance if needed. Staff were knowledgeable about their responsibilities to ensure people were safeguarded from abuse; including clues that may indicate a person was at risk of abuse, how to record safeguarding information and how they would raise an appropriate alert. We saw that any safeguarding concerns had been appropriately dealt with by the registered manager.

There was a system in place to help ensure that new staff members were suitable to work with vulnerable adults. This included requesting information about applicants in an application form and during a documented interview. Checks were made on a candidate's employment history, their conduct in previous employment, photo identification and a check was made using the Disclosure and Barring Service (DBS). The DBS completes background checks to help the registered manager make decisions on people's suitability to work in social care. Each staff member had a contract of employment and a job description clearly outlining their responsibilities.

Each person had individualised risk assessments that helped staff members to keep people safe. However, we read some risk assessments where a significant risk was highlighted, but there was no mention of when the risk last occurred. This meant that staff members would not always know the likelihood of the risk occurring when supporting the person. We asked if one risk that had been highlighted was likely to happen daily, weekly or monthly and were told that the risk had not occurred since the person moved to The Ferns. Whilst this is positive it means that the risk assessment is not providing staff with the information to assess the risk effectively whilst respecting people's freedoms. We recommended to the registered manager that these risk assessments were reviewed.

The environment of the home was safe. There were also service wide risk assessments for The Ferns; including a fire risk assessment and evacuation plan, along with a grab bag containing equipment that may be needed in an emergency. The building was designed to reduce risks to people who may physically challenge the service provided for them. Regular risk assessments of the environmental and health and safety took place, ensuring the home's environment remained safe. Also, a series of audits, checks and services took place. These included checks on the gas, electric and water supply services. A weekly fire safety check was done along with a regular fire drill, fire alarm checks and checks on firefighting equipment.

A recent questionnaire sent out to people's family members, received 33 replies. On these replies 100% agreed with the statement; "Staff know how to keep people safe."

The numbers of staff at the home was planned around people's schedules and needs along with how many people were currently staying at the home. We saw that there was enough staff to meet people's needs and wishes.

The administration of people's medication was safe. Medication was securely stored, there was appropriate information to guide staff on how to administer it safely, each administration was documented and regular checks were taken of the stocks of medication which indicated that the administration was safe. Staff administering medication had been trained and equipped with the skills to do so safely; including regular refreshment of training and checks of staff competence.

We saw that on two occasions in the sample of records we checked a medication had not been administered, and appropriate records had not been kept to provide information as to why it had not been administered. We recommended that the registered manager review the staff use of codes to ensure necessary information was on the medication administration records.

We also recommended that the registered manager look at the suitability of the room that was used for the administration of medication, as it had no hand washing facilities and contained computer network equipment that was warm. On a cold day the room was warm and the registered manager told us that at times it was difficult to keep the room at an appropriate temperature for medication in the summer months.

The home was clean and staff wore personal protective equipment when appropriate. Food was stored safely and the kitchen environments looked clean. The kitchens had been inspected in May 2018 and had been awarded four out of five stars as generally satisfactory for cleanliness by the food standards agency.

There was a system in place to record accidents and incidents that happened within the service. These were numbered, recorded electronically and reviewed by the registered manager to look for opportunities for learning. The incident records made note of all the people involved in the incident even those who witnessed the incident, in case they needed some support afterwards and to check for any patterns which may indicate something was wrong.

We saw that on occasion when things went wrong any learning was recorded on staff files and used to help staff develop in their skills, with additional guidance offered to help ensure that people were safe. However, for some incidents, staff members completing the document didn't record what may be the possible cause of the incident or what the person was trying to communicate. This may be a missed opportunity to learn and further develop a person's support.

There was evidence that physical restraint was infrequently used and only as a last resort; if there was an imminent risk to a person. People who had previously been frequently restrained by staff members in other locations no longer needed this type of support. Staff members at The Ferns had completed additional training using a recognised technique in how to keep people safe who may challenge the service physically. However, the registered manager told us that this additional training had not been used and the priority is always to ensure the person is safe and for staff to withdraw and offer reassurance and diversion from a safe distance. Staff members that we spoke with all confirmed this and told us of examples when situations arose and they had been managed safely without restraining a person.

## Is the service effective?

### Our findings

People living at the home and their family members were positive in their feedback about staff members. One person's relative told us, "The staff are very enthusiastic and of a similar age. [Name] has a good relationship with them." Another person's family member said that moving to The Ferns has been, "really good for [name]. he has really settled in well. The staff are really great with him. He usually doesn't like change but he has took to the staff really well."

Staff told us that they enjoyed working at the home. One staff member said, "Its a rewarding place to work. With great staff and people supported."

One person's family member told us that their family members needs were assessed before they moved into the home. Their family member came to the home and met the registered manager several times before moving in. They described the assessment as "incredibly thorough and very person centred."

The Ferns working in partnership with people's previous care providers. Staff members told us that on one occasion a person's previous support team were invited to The Ferns to give a presentation about the person's needs. On another occasion the staff team, previous care providers, people and their families were involved in training days for staff at The Ferns. This meant that staff at The Ferns were equipped to be effective in meeting people's needs when they moved into the home. People's family members told us that this gave them confidence that staff had first got to know people, their needs and daily routines. Staff spoke positively about the assessment process. One staff member told us, "The induction period helped us to feel confident supporting people."

The provider had a central training team who organised staff training and kept records on what training staff had completed and what training was due to be refreshed to be in line with their training policy. The training programme was comprehensive and was delivered by a mix of computer based learning and practical classroom based training. The registered manager told us that they can and had arranged for additional training to ensure that staff have the skills to effectively support the people staying at The Ferns.

Staff received support through regular supervision meetings, an annual appraisal, regular team meetings and if appropriate being involved in planning meetings for people's support. Staff told us and we saw evidence that the provider supported staff and focused on developing them and promoting them to more senior roles. One staff member told us, "I get help when I need it." Another commented, "Staff are treated right." A third told us, "I feel really happy here, there is a lovely atmosphere."

New staff went through a comprehensive induction program that was signed off by both parties at key stages. At the end of a successful probation period, new staff were offered a permanent position within the organisation. One staff member told us, "The induction was amazing training, it helped me to be very positive." Staff had access to the providers policies and had key information provided for them in a staff handbook.



The home had fully equipped kitchen facilities available for people to use. We saw that people were preparing food and snacks with the support of staff. People were supported to make informed food choices and they were supported to identify and eat according to their needs and preferences. One person told us that they had been supported to learn to make pasta. Another person's family member said, "He has started going into the kitchen and doing cooking; which is something I never thought he'd do."

People's care plans contained information on how to support people to maintain their health and records of their wellbeing. This included details of health appointments along with any outcomes and recommendations made. People also had a health passport which helped to provide important information for any health care professionals involved in the person's care.

The home is in a purpose-built building that was designed with additional safety features for people who may challenge services provided for them. The building was in two halves, with two separate entrances and could be divided to make two smaller homes if people's support required this. The décor and layout of the building was designed to be calming, using low arousal colours, with clean blank spaces and no patterns. One person's relative told us, "The building is exactly what I had in mind; low arousal. There are not many autism specific places locally." Another relative told us, "I really like the building. [Name] loves it here."

People were supported to personalise their rooms; some people had chosen to keep their environment simple and others had added many personal items to their room. People's lighting and temperature in their room could be changed to their preferences along with the ability to open their windows.

People can only be deprived of their liberty to receive care and treatment with appropriate legal authority. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguarding (DoLS). The service had made appropriate applications for a DoLS when a person would benefit from the protection of one.

We also observed that staff constantly consulted with people and sought their opinions, consent and permission in smaller and more significant matters in their lives. People were able to make choices about their day and were able to change their plans if they chose to. Staff members were able to explain how they provided people with information so they are able to make an informed decision.

## Is the service caring?

### Our findings

People and their relatives told us that staff at The Ferns were caring towards them. One person at The Ferns told us, "They look after me here. I get on well with staff." One person's relative told us that their family member, has positive relationships with the staff members and has "bonded" with some of them. People's family members had given positive feedback in writing about the service. One had written, "I was happy to see positive interactions between [person and staff member's name], I felt reassured by this."

There was a relaxed atmosphere at the home and people appeared comfortable in all areas of the building, including the office area. We saw friendly interactions between people living at The Ferns and staff members. It was clear that people felt relaxed and comfortable at the home and the use of appropriate humour helped create a friendly atmosphere. One person's relative told us that their family member had benefitted from the atmosphere at the home and told us, "My son has started trusting staff as he has got to know them." One staff member told us, "There is a great environment at the home. Helping out people is a joy."

One indicator of the success of people's support was the sharp reduction in some people using medication to reduce anxiety since moving to The Ferns. One person who previously had frequently been administered medication for anxiety, had never used medication for anxiety since moving to The Ferns. This is one indication of people receiving appropriate emotional support and being listened to. We saw that staff members supported people by speaking to them respectfully, using humour and topics that the person was interested in to help them remain calm.

People were communicated with and supported to express their views and helped to make decisions in a way that best enabled them to understand and express themselves. Some people used Makaton which we saw staff using to communicate with people. Makaton uses signs and symbols to help people communicate. One staff member told us how each person may use Makaton slightly differently and staff learn how to adapt and learn from each person using Makaton to ensure they are understood.

We also saw that some people used visual prompts, sometimes called PECS. Staff had received training in how to use these effectively to help people communicate. Staff took part in training with health professionals on how to communicate with one person who had a specific method of communication. There was also guidance available for staff on how to support a person to make a choice using pictures familiar to the person and how to do this in a manner that gave the person the best opportunities to understand. These methods showed respect to people and enabled them to be actively involved in making decisions about their care and day to day life.

People's private and confidential information was held securely. There was also a system in place where staff members and others had to sign to say they had accessed people's private information in their care files. This showed a respect for people's privacy and confidential information.

## Is the service responsive?

### Our findings

Some people's family members had given positive feedback in writing about the service. One had written, "[Name's] quality of life has improved. I appreciate that staff help him and it is pleasing to see him prepare and cook his own food again." Another had written, "Thank you for facilitating [name's] first visit back to his home town."

Some aspects of people's care and support was not person centred and was influenced by the service rather than the needs of the person themselves. For example, staff and documents used a lot of organisation based language and jargon that promoted a difference between the people supported and other people. For example, people were spoken of as being "escorted" by a staff member. One person had a session of "Community health and wellbeing", which we were told meant that they attended a local gym. Another person's care plan goal was to ride a bike at, "health and wellbeing CVS". One long standing staff member we asked did not know what CVS meant. We looked at Autism Together literature which also used the term CVS with no explanation. This choice of language was not in line with promoting people having an ordinary life as any other citizen.

Also, some aspects of people's support were institutionalised. For example, there were records that showed people, including those for whom The Ferns was their home; were checked on every 30 minutes overnight. For some people there was no risks identified that was being mitigated by these checks. The registered manager told us they were, making sure people are there and are ok; adding, "This is something we have always done as a company." This is a service based rather than person centred approach, which risked invading people's reasonably expected privacy.

When an incident occurred at the home staff had not always reflected on or recorded what the person may be trying to communicate. The form used had some tick box categories of what a person may be trying to communicate. These had not always been completed effectively. This meant that the recording of incidents was not always used in a way that helped staff to understand a person's needs and wishes and adapt their support accordingly.

The daily notes of people's support were repetitive and we were told by staff followed a set formula of daily making a comment on each section of a person's support plan. This meant that the daily notes of people's care and support were repetitive and large sections were meaningless. For example, for one person their daily notes started with the handwritten comment, "[Name] had communicated his needs verbally this morning." When the person could clearly use speech to communicate and this had not changed. At the same time incidents that had happened that knowledge of would help staff to support a person were not mentioned. This meant the daily notes were following a system rather than focusing on the most important events in a person's day.

In 2016 NHS England published 'Building the right home'; this is national guidance on providing housing models for people with a learning disability and/or autism who can display behaviour that challenges. The guidance promoted housing models that increased opportunities for independence, choice and control.

We spoke with the registered manager about people's opportunities to access their local community. The home is within the Raby site with 5 other registered homes and day services on the edge of the town of Bromborough. Sections of the roads connecting the Raby site to the local community do not have pavements or street lighting.

The registered manager told us that people didn't use the roads from The Ferns to walk to local facilities as this wasn't safe. They had sought permission to create a path across a farmer's field to access the local town and had a system for dropping off and picking up a torch for light. Also at times people used a mini-bus that was allocated to The Ferns.

Each person at The Ferns had a personalised care plan. This varied in detail from people who only stayed at The Ferns a short time to people who were living at The Ferns. People's support plans were based on looking at people's assessment and their needs; what the desired outcome is and "What my team need to do to successfully support me." Some care plans were written using a positive behaviour support (PBS) approach. PBS involves trying to understand the reasons why people behave in a way that challenges, meeting their needs and supporting them to learn new skills. One person's relative told us they felt involved and "contributed to care planning through being involved in discussions."

Some people at The Ferns had previously lived in a more intensive support setting. We saw that this transition into the home had been thoughtfully done in a person-centred way, at a pace that was best for people. This transition and period of getting to know a person and understand their needs took up to six weeks.

Information from the assessment of people's needs and preferences was used to make the move as smooth as possible. For example, for one person the flooring in their bedroom was replaced to match the flooring in the person's previous room; which the person had indicated was important to them.

One person had anxiety over night and it was identified that this may be because of being unfamiliar with night staff due to not spending much time with them. The registered manager told us that they arranged for a longer handover period with night staff so that for a time the person could see the day staff and night staff together and them being familiar with each other. This helped the person to settle.

Staff knew people's current support needs. However, the care planning process was lagging far behind changes in people's support and therefore was not always able to provide current guidance for staff. The registered manager told us that the strategy for people living at The Ferns was for them to gain skills; to enable them in the future to live in their own community with less intensive support. There was clear evidence that people had benefitted from the support provided at The Ferns and they had learnt some new skills which had benefitted them. However, the strategy was not clear, care plans had not been kept up to date to show people's progression. They did not show what skills people were currently focusing on to enable them to live in their community. When people's care plans had been reviewed and updated changes in their day to day support had not been reflected.

Other parts of people's care plans contained detailed information that would help staff at The Ferns support people well. For example, one person's plan stated, "I enjoy practical jokes and doing impressions of people." Information was also recorded on what people and relationships were important to the person and we saw evidence that people had been supported to maintain these relationships.

Some people had been supported to set out personal goals that they want to achieve. For example, one person had a goal of being able to stay overnight at their relatives' home which had been achieved by

initially visit for a short period of time and building up to doing this. Another person had the goal of completing a local coastal walk, they had made some progress towards completing this. One person's family member told us, "Staff talk about what he can do. Not what he can't do." Another person's relative said, "They champion people with autism, their talents and skills."

People had grown in confidence and tried new things since spending time at The Ferns. For example, one person was being supported to use a computer and use the Wi-Fi in the building. Another person had experienced their first meal and drink in a pub. People at times used community facilities such as the local cinema, swimming pool and local social clubs.

The registered manager told us that the aim was that people move on from The Ferns to more independent community based living. They could tell us about two people who had moved out of the home into their community since our last inspection.

Some people had made quick progress since spending time at The Ferns, one person was expected to not spend much time outside of their room, as this had happened in the past. Now they had enjoyed some time cycling in Wales. The registered manager told us that in his opinion when the time is right this person will, "one hundred percent move on from here."

One person's family member told us that before coming to The Ferns their relative spent over two years in assessment and treatment units. They told us, "Autism Together have changed his life since he moved here."

The service was responsive to any concerns or complaints raised. We looked at the record of complaints and complements and there was evidence that these were taken seriously and responded to. One person's relative told us, "If there are any niggling issues, they always do all they can to sort them out." There was a service user guide that contained details of how people may choose to raise a concern or complaint and how these would be responded to.

The service had received a significant number of written compliments. For example, one person's family member had written, "All of you have been a very important part of helping [name] back to health and keeping him there." One person had written, "Thank you so much for looking after me."

## Is the service well-led?

### Our findings

There was evidence that people had benefitted from the support offered to them; however, in its strategy and delivery of support the provider was not always following current best practise guidance, including but not limited to 'Registering the Right Support'. In particular promoting as much as possible that people receiving support are independent and live as ordinary a life as any other citizen.

The registered manager explained to us that The Ferns was in the middle of a time of change. We were told that the plan is for it to change from a facility for short breaks to becoming people's permanent home. At the time of our inspection two people were living at the service, three people were on a short break and other people used the building before and after day services. At times people stayed for as little as one night a week or for a few hours before and after they used day services on the Raby site. This meant that the two people living at The Ferns had a constant change of people sharing their home. This had been the situation for ten months. Whilst there was a nice atmosphere in the building it did not feel like people's home and at peak times it was very busy with lots of distractions.

The Raby site has six locations registered with the care quality commission, to provide care and accommodation for up to 59 people, including The Ferns. The layout and design of The Raby site is not in the style of ordinary accommodation but rather is an institutional model of housing and care. The Raby site including The Ferns was branded by the provider Autism Together. This included a sign from the main road, on the access road and at the front of The Ferns. This publicly differentiated people who lived in these locations to other members of the local community.

The registered manager used a series of assessment tools to complete checks and audits of the safety and quality of the service provided for people. These had contributed to the service being safe and in some areas of high quality. However, sufficient attention had not been given to the quality of the experience of service users; in particular aiming to change or mitigate some aspects of the manner in which accommodation and support is provided so that people had as much opportunity as possible to live as ordinary a life as any other citizen.

The registered manager was open to our feedback and contributed to a friendly and relaxed atmosphere at the home. It was clear from their interactions that the registered manager knew people well and had positive relationships with them; they were comfortable around him and enjoyed his company.

Staff members and people's relatives told us that they had confidence in the registered manager. One people's family member told us, "He is an incredible manager, absolutely outstanding; professional but has a nice way and makes good use of humour. My son adores him and he listens to me as a parent." Another relative said, "I feel welcome. I feel I can turn up any time. There is a positive atmosphere and staff are helpful and easy to approach. The manager is approachable."

Staff told us they felt well supported by the registered manager and other senior staff. On staff member told us, "We can ask any senior staff question, they are responsive to suggestions and the manager listens to us."

There was a structured staff team based permanently at The Ferns, which ensured that each staff member's roles and responsibilities were clear. There was an office base within the home where administrative and organisational tasks took place. There was a daily handover meeting which focused on people's wellbeing and their mood, planning for upcoming appointments along with any other significant information. During these plans each person had an assigned support worker and were assigned necessary tasks.

People's relatives told us that there was good communication with the service which gave them confidence. One person's family member told us, "Communication is very good. They call me weekly and if anything happens they call me immediately." The service used feedback forms, to gain the views of both people using the service and their family members. These were in different formats including an easy read format. People's replies were analysed and the information used by the manager as areas to focus on. Most of the replies were positive. One person's family member had fed back that the service was, "Responsive, flexible, kind and loving." One person had made a request on the feedback form and we saw that this had been listened to and action had been taken by the service to ensure this happened.