

UK Supported Living Services Limited

UK Supported Living Services

Inspection report

42-44 Holdenhurst Road
Bournemouth
Dorset
BH8 8AD

Tel: 01202331731

Date of inspection visit:
23 July 2019
24 July 2019

Date of publication:
02 September 2019

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

About the service:

UK Supported Living Services Limited is registered to provide personal care to people in their own homes. At the time of our inspection six people living with a learning disability were receiving 24 hour support with personal care in their own supported living accommodation.

Not everyone using UK Supported Living Services Limited receives regulated activity; CQC only inspects the service being received by people provided with 'personal care', help with tasks related to personal hygiene and eating. Where they do we also take into account any wider social care provided.

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

People's experience of using this service:

People were supported by caring, motivated staff who knew everyone very well and treated people as individuals and with dignity and respect. People were cared for by a consistent staff team who had received appropriate training to carry out their roles. The provider had robust recruitment systems to ensure staff were safely recruited. Staff spoke knowledgably about the systems in place to safeguard people from abuse.

The provider showed innovative and unique use of technology. The provider had developed and implemented a bespoke real time digital recording database system which enabled them to record, review and monitor all care and support records accurately and instantly. The introduction of the database had greatly improved the service delivery for people and had impacted positively on people's health, wellbeing and daily lives.

The service was working within the principles of the Mental Capacity Act 2005. People were supported to have maximum choice and control over their lives and staff supported them in the least restrictive way possible and in their best interests; the policies and systems in the service supported this practice.

The service applied the principles and values of Registering the Right Support and other best practice guidance. These ensure people who use the service can live as full a life as possible and achieve the best possible outcomes that include control, choice and independence. The outcomes for people using the service reflected the principles and values of Registering the Right Support by promoting choice and control, independence and inclusion. People's support focused on them having as many opportunities as possible for them to gain new skills and become more independent .

Since the previous inspection the provider had made improvements to how they managed people's medicines. People's medicines were managed safely, stored securely and administered by trained staff. People received assistance to take their medicines as prescribed and were supported to access health care services.

People's care was tailored to their individual needs and maintained their independence as much as possible. Care plans were comprehensive, person centred, respectful, and reviewed regularly to ensure they reflected people's needs.

Staff received regular supervision and annual appraisals to ensure they were fully supported in their role. There was an effective training programme that staff felt was interesting and well delivered.

People were supported to lead active lives and took part in a range of different activities if they wished. People who preferred to spend time on a one to one basis were supported with appropriate activities they enjoyed, to ensure their wellbeing was maintained and to prevent social isolation.

There was a robust system of ongoing monitoring through audits and spot checks to review the quality of the service provided.

Relatives, staff and health professionals expressed confidence in the management team and felt the service had a clear management structure and an open and supportive culture.

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

Rating at last inspection:

The last rating for this service was good (report published in January 2017).

Why we inspected:

This was a planned inspection based on the rating from the last inspection.

Follow up:

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

The five questions we ask about services and what we found

We always ask the following five questions of services.

Is the service safe?

The service was safe.

Details are in our safe findings below.

Good ●

Is the service effective?

The service was exceptionally effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our responsive findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our well-led findings below.

Good ●

UK Supported Living Services

Detailed findings

Background to this inspection

The inspection

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

Inspection team

One inspector carried out the inspection.

Service and service type

UK Supported Living Services Limited provides care and support to people living in five 'supported living' settings, so that they can live as independently as possible. People's care and housing are provided under separate contractual agreements. CQC does not regulate premises used for supported living; this inspection looked at people's personal care and support.

The service had a manager registered with the Care Quality Commission. This means they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

Notice of inspection

We gave the service 24 hours' notice of the inspection. This was because the service is small and people are often out, and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

Before the inspection we reviewed information we held about the service and reviewed the provider information return the provider had completed. This is information providers are required to send us with key information about their service, what they do well, and improvements they plan to make. This

information helps support our inspections. We reviewed information about incidents the provider had notified us of and contacted health professionals and the local authority for their views on the service. We also looked at the notifications we had received for this service. Notifications are information about important events the service is required to send us by law. We used all this information to plan our inspection.

During the inspection

We visited and met three people who used the service in their own homes and spoke with the registered manager, the quality partner and six support and office staff. Immediately following the inspection we spoke with a relative of a person using the service, to ask about their experience of the care provided. We also received written feedback from a further two health professionals. During our inspection we observed care practices and the interaction between staff and people.

We reviewed a range of records that included three people's support and care plans, daily monitoring charts and medicines records. We also looked at a range of records relating to the management and monitoring of the service. These included staffing rotas, staff recruitment records, staff supervision and training records, accident and incident records, meeting minutes and a range of the provider's audits, quality assurance records and policies and procedures.

Is the service safe?

Our findings

Safe – this means we looked for evidence that people were protected from abuse and avoidable harm.

At the last inspection this key question was rated as requires improvement. At this inspection this key question has improved to a rating of good. This meant people were safe and protected from avoidable harm.

Using medicines safely

We recommended the provider considered current guidance on storing, managing and administering medicines and acted to update their practice. the provider had made improvements.

- People were supported to take their medicines as prescribed and in ways they preferred.
- Medicines were safely obtained, stored, recorded, administered and disposed of. Monitoring systems were in place for medicines that required cool storage and records showed stock levels of medicines were correct.
- Where people were prescribed medicines they only needed to take occasionally, there was guidance for staff to follow to ensure those medicines were administered safely.
- Medicines administration records contained the information necessary for safe administration.
- Staff received medicine training and had their competency checked to ensure they were safe and competent to administer medicines to people.
- Regular medicine management audits were completed to address any issues in medicine administration.

Systems and processes to safeguard people from the risk of abuse

- Staff had received safeguarding training and spoke knowledgeably on the different types of abuse. They were clear about their responsibilities for making people safe and reporting concerns.
- Written guidance, with contact details of external agencies was available and staff knew how to access it.

Assessing risk, safety monitoring and management

- Risks for people were individually assessed and managed. Risk assessment and management plans were detailed, personalised and guided staff to support people safely whilst still maintaining their independence.
- The provider had contingency plans in place in case of events that effected the service running safely, such as major utilities failure, adverse weather conditions and staff sickness.

Staffing and recruitment

- Staff were recruited safely. Robust procedures were in place to ensure the required checks were carried out on staff before they commenced their employment. This ensured staff were suitable to work with people in a care setting. The provider tailored their employment adverts to ensure newly recruited staff would professionally match the personality and health needs of the people they would be supporting.
- We asked a member of staff what the service did well, they answered, "Putting and matching the right staff

with the customers. It works so well."

- Support was provided by a consistent small team of staff who knew people very well and knew how they preferred their care and support to be given.
- People were supported by enough staff to meet their individual health needs.

Preventing and controlling infection

- Measures were in place to prevent and control infection. Staff had received training and used gloves and aprons when needed.
- Staff spoke knowledgeably regarding infection control processes and understood how to protect people from the risk of infection.

Learning lessons when things go wrong

- There was a detailed, computerised system in place for recording, reviewing and acting on incidents and accidents.
- Accidents and incidents were reported by staff as they were witnessed, and any corrective action needed was implemented straight away. There was a clear procedure in place for reporting and recording accidents and incidents.
- The management team used the bespoke database to review and analyse daily information to identify trends and themes with each person. Appropriate, timely actions were taken to help reduce future recurrences and professional input was sought as appropriate.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's outcomes were consistently good, and people's feedback confirmed this.

Assessing people's needs and choices; delivering care in line with standards, guidance and the law

- The provider showed innovative and unique use of technology. The provider had developed and implemented a bespoke real time digital recording database system that enabled them to record, review and monitor all care and support records accurately and instantly. This enabled staff to record all interventions with people and allowed management staff to review and monitor people's care in real time.
- The introduction of the database had greatly improved the service delivery for people and had impacted positively on people's lives. Staff told us the main areas the system had had such a positive effect were in medicines, staff training, reviewing and monitoring accidents and incidents and monitoring the quality of the service.
- The use of the database led to much improved health and lifestyle outcomes for people. For example, through careful reviewing of the data compiled during seizures, staff were able to investigate how often, the severity, when they occurred and duration of a person's seizures. Staff shared this detailed information with specialist health professionals who were able to use the information to review people's specific health needs. This had resulted in reduced amounts of medication and fewer and less severe seizures. This had a beneficial impact on people's health and wellbeing.
- Another example concerned a person who had lived all their life in a specialised service. This person found change very difficult and rarely left their bedroom, which had a detrimental effect on their health and wellbeing. UK SLS started supporting the person and used the detailed information the database supplied, to introduce new positive, supportive interventions. These included a full review and reduction of medicines, in line with NHS England Stopping Over Medication of People with a learning disability, autism or both with psychotropic medicines (STOMP). The person now enjoys an active life that includes, regular cinema trips, eating out at local restaurants, spending time with a much wider group of staff and accessing the community every day.
- The system and its positive benefits and impact on people's lives, supported one member of staff to get nominated for a national professional organisation's 'nurse of the year award'.
- The implementation of the database had led to a reduction in the time management staff needed to spend on administrative duties. This enabled them to spend more time out in the community with members of staff and people who use the service. Management were able to offer extra support, mentoring and training to staff and spend additional time monitoring the safety and quality of service provided to people.
- Staff spoke extremely positively regarding the new database and support systems. Comments included, "The system is brilliant, you can read it all straight away it is amazing. It's easy to use and instant, it's progressed so much, no problems with it at all, it's been amazing. It took a little while to learn but all good now. I wouldn't be without it", and, "It's all brilliant now. Took me a little while to get used to it but I was given the time and it's so accurate and instant info, it's absolutely brilliant. We have two devices in here, any

problems and they are instantly replaced but they have been pretty robust so no problems."

- People's care needs were fully assessed before the service started to provide them with care and support. Assessments were person centred and contained personalised information and guidance such as their religious, cultural and lifestyle choices that reflected people's preferences and choices.
- Assessment and screening tools were regularly used and reviewed to monitor whether people continued to receive effective care. In addition, the provider used an independent electronic quality of life assessment tool that compiled detailed information on areas of people's lives that were highlighted as positive or negative. This tool provided a clear visual chart to show what people may be struggling with or find difficult on a day to day basis. Staff reviewed this information and made positive changes to people's care.
- For example, the quality of life tool had benefitted a person who was experiencing a period of anxiety and agitation. Staff reviewed the information relating to that period and highlighted a piece of equipment that had been recently used as the reason for the person's increased agitation. The use of the equipment was stopped, and the person immediately became calmer and happier.
- Staff told us they were now using the tool proactively, using historical information to ensure people's reasons for anxieties were guarded against and removed if possible. For instance, it showed increased agitation in very hot weather so staff ensured people had cooling fans, curtains drawn to reduce heat and plenty of fluid and ice cream if they wished when the weather got very warm.

Staff support: induction, training, skills and experience

- We received positive feedback from staff and a health professional who regularly visited the service. A staff member told us, "Working for this company has made me a better carer", "I love it, I love watching the customers grow in their confidence" and "I don't just feel like a number, staff get treated very well, like a person not just a member of staff, everyone is included in everything." A health professional told us, "I have had positive experiences working with UKSLS staff. Staff know the clients very well and understand their care needs."
- Staff received a detailed induction into the service. This included time spent shadowing experienced staff to ensure they knew how to care and support people before they cared for people independently. Newly recruited staff completed the Care Certificate. The Care Certificate is a national induction for people working in health and social care who have not already had relevant training.
- Staff told us they felt well supported with supervision and training. One member of staff told us, "We have a really good relationship with our team and managers. We are given enough time to learn, plenty of time and everyone is so friendly and helpful. We ask questions and get answers straight away. I've used the on-call help and had no problems at all. There is always someone there if you need help." Another member of staff said, "The training is good and we have a good mix of skills with the people who work here, for example some are really experienced with dementia and autism, it's all good." A further member of staff told us, "The shadow shifts were all good and worked well, I felt fully supported. We do different types of training, e learning and practical face to face as well as having independent training providers come in and deliver training."

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

- Staff understood what people preferred to eat and drink and what their favourite meals were. Staff encouraged people to take part in planning their meals and budgeting and shopping for their weekly food, which people enjoyed.
- People's care and support records reflected their food and drink likes and dislikes and how they needed their food prepared to ensure they were supported to eat safely.
- Where people needed adaptive cutlery to help them eat independently, staff ensured this was available.
- For people who were at risk of choking, external health professionals had been consulted and their advice and guidance closely followed. For example, Some people needed their food mashed to ensure they could

eat it safely to reduce the risk of choking.

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

- Positive feedback from health care professionals included, "The team leader is good at making timely and appropriate requests and referrals. They are easy to get hold of and staff are very supportive of my visits, follow advice and recommendations."
- People were supported to access healthcare. Staff spoke knowledgeably about people's health needs and were pro-active in seeking guidance and support from health professionals. Timely and appropriate referrals were made to a range of healthcare professionals. These included dieticians, occupational therapists, speech and language therapists, opticians, GPs and chiropractors.
- People had health and communication passports that identified their preferences and health needs should they need to move to another service such as a hospital.

Ensuring consent to care and treatment in line with law and guidance

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

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA. In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS).

We checked whether the service was working within the principles of the MCA.

- Staff understood the principles of the MCA, how to implement this and how to support best interest decision making. Staff had received training in relation to the MCA.
- The provider supported people to take up the services of an Independent Mental Capacity Advocate. An IMCA is an independent advocate who has been specially trained to support people who are not able to make certain decisions for themselves and do not have family or friends who are able to speak for them.

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people were supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; respecting equality and diversity

- A health professional told us, "Staff are caring towards the clients they support." Staff commented they all worked very well as a team and said everyone from senior management to their support worker colleagues were friendly and genuinely cared for people and staff.
- People we visited in their homes, due to their health conditions were unable to talk with us, however a relative told us, "Their strengths are the caring abilities of the staff. They care and have empathy, they treat [person] like they would a member of their own family. The staff know him very well. "
- Throughout our inspection people were comfortable with the staff that supported them, who were friendly, respectful and attentive.
- Staff supported people in a kind, calm and patient way. They responded to requests respectfully and promptly.
- People's care and support records reflected how people wished their support to be given to meet their cultural and religious beliefs and staff respected their views. Support plans and records reflected the diverse needs of people using the service, including those related to disability, gender, ethnicity, faith and sexual orientation.

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

- Some people needed support to make some decisions about their personal care and where they spent the day. Staff spoke knowledgeably about which decisions people could make independently and respected these.
- People, family members, staff and health professionals were all involved in decisions regarding ongoing care and support. One relative told us, "I can't fault them at all, they are doing everything they can to look after [person], they keep in close contact and I'm very involved. I have no concerns at all, I'm very happy with it all."
- Staff knew people very well and knew the best ways to communicate with them to ensure they could have their views heard.
- Staff gave people choices in their everyday lives and routines. People were supported to express their views and were encouraged to make decisions to determine how they spent their day.

Respecting and promoting people's privacy, dignity and independence

- Staff promoted dignity in all their interactions with people, speaking respectfully and being attentive to people's wishes.
- Care plans reflected people's preferences and choices and encouraged people's independence.

- People's personal information was kept secure. Staff understood the importance of maintaining secure documents and care records to ensure people's confidentiality was maintained.

Is the service responsive?

Our findings

Responsive – this means we looked for evidence that the service met people's needs.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant people's needs were met through good organisation and delivery.

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

- Care and support plans were personalised and provided clear details of how staff were to support people to meet their individual preferences and assessed needs.
- People were encouraged to make choices around how they lived their lives and to maintain and improve their independence as much as possible.
- Staff knew people extremely well and supported people by providing responsive care in ways they preferred.
- The service used additional supportive technology to alert staff if people were about to have an epileptic seizure. Technology devices included breathing, vocal and mattress alarms. These alarms alerted staff to when a person's breathing patterns or body movements changed, which could indicate they were about to have an epileptic seizure. Staff could then act straight away to ensure people were supported correctly and action was taken to treat the seizure.

Meeting people's communication needs

Since 2016 onwards all organisations that provide publicly funded adult social care are legally required to follow the Accessible Information Standard (AIS). The standard was introduced to make sure people are given information in a way they can understand. The standard applies to all people with a disability, impairment or sensory loss and in some circumstances to their carers.

- People were supported to communicate in ways that were meaningful to them. Staff took the time to understand people and checked this understanding back with people. People's methods of communication were identified and recorded in their care plans and staff understood the Accessible Information Standard.
- There were clear communication systems. A member of staff told us, "Communication is brilliant, the memo's and phone app is all really good, we know everything that is going on straight away. The electronic device is simply great."
- One person had a communication device which allowed them to communicate certain pre-programmed requests such as, wanting a drink, food or wishing to go to the toilet. They had been supported with the device for a couple of months and it was being positively received.

Supporting people to develop and maintain relationships to avoid social isolation; support to follow interests and to take part in activities that are socially and culturally relevant to them

- Staff knew people very well, what their interests and hobbies were and what things were important to them and what events and they enjoyed. Staff worked very well together to ensure people were given the opportunities to take part in activities they enjoyed and maintained their independence.
- People were supported to achieve their short and long term goals. Care plans guided staff to support

people with small steps so that they could realistically achieve their long term goals. One person had a lifetime ambition to visit a premiership football match. Staff worked with the person and planned the trip to include safe management of their specific health needs, mobility needs, travel and accommodation arrangements. Achieving their life time dream was an incredible achievement for this person who gained huge enjoyment and happiness from the whole event.

- Activities were tailored to each person and provided on an individual basis to enrich people's lives, keep people active and prevent social isolation.
- People made full use of their mobility cars and staff took people out each day to places they enjoyed and were of interest to them. People visited pubs, cafés, hydro pools, boat trips, bowling and trips into town for shopping. Staff told us they were looking into taking one person to the Horse of the Year Show, which they would enjoy immensely.
- One member of staff told us, "We are in the process of sorting a bus pass out for [person] so I can take them to the beach and park. Everything we do is to improve the quality of life for people. We keep them involved with everything."
- For people who preferred to spend quiet time in their homes, staff spent time with them supporting them to enjoy activities they liked, such as cooking and arts and crafts.

Improving care quality in response to complaints or concerns

- A complaints policy and process was in place and had been shared with people, friends and families. The provider had not received any complaints since their previous CQC inspection. A relative told us, "We have no concerns at all, we know who to contact or complain to if we need to, but we are very happy with the service."

End of life care and support

- The service was not supporting any person with palliative or end of life care needs at the time of our inspection.
- The service had supported people previously who required end of life care. Local palliative care and district nursing teams were also involved and consulted where appropriate.
- A health professional gave feedback which said, "Staff are caring towards the clients they support. For example, this was noted for a person who was nearing the end of their life. Staff were compassionate and responsive to their needs."

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as good. At this inspection this key question has remained the same. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people; and how the provider understands and acts on the duty of candour, which is their legal responsibility to be open and honest with people when something goes wrong

- Relatives and health professionals gave positive feedback regarding the open, honest and supportive culture of the service. Staff told us they loved working at the service. One member of staff said, "I love it here, they are more helpful than other companies I've worked for, there is always someone on the end of the phone to help... This is one of the better agencies I have worked for."
- Staff were motivated, passionate about their roles, felt well supported and spoke very positively about the management team. Comments from staff included, "If I have an opinion about something they would let me have my say and we are listened to and things are done to help us" and, "Team meetings are held here at their home and we involve the clients. Communication is very good. The app on the phone and the electronic tablet access and control is all very good. The info is instant so it's really positive for the clients and helps us give really good care."
- We asked a staff member what the service did well, they replied, "Communication and getting stuff done. It's all about transparency and honesty. If there is a problem, it's discussed and sorted, and they help us sort it out. It's a no blame culture and the training is really good It's perfect... the culture is up front, open and honest. Any issues are sorted and very supportive. No problems, we follow the protocols and processes and it's all sorted."
- People received individual, person centred care from a staff team who were dedicated to providing people with the best care possible. Staff worked well as a team together for the benefit of all people.
- The registered manager understood the requirements of the duty of candour. This is their duty to be honest and open about any accident or incident that had caused or placed a person at risk of harm. They fulfilled these obligations, where necessary, through contact with people and their relatives.

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

- There was a clear management structure. Staff spoke knowledgeably about their responsibilities. They told us they thoroughly enjoyed their jobs and supporting the people who used the service. Staff were confident in the quality of care and support they were able to offer people.
- There were effective systems in place to ensure views from visiting health professionals, people, relatives and staff were fully considered and acted upon.
- The provider had a whistleblowing policy and staff knew how to raise concerns if needed.
- Notifications to CQC as required by the regulations had been appropriately made. The provider's record

keeping systems and processes were well maintained and up to date.

- Policies and standard operating procedures were reviewed regularly and provided clear guidance for staff.

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

- The management team actively encouraged communication amongst everyone who used, visited or was employed by the service.
- Surveys and meetings encouraged regular feedback and actions were taken based on people's comments.
- People and staff felt valued and confident their views and feedback were listened to and acted upon.
- The service ran a variety of schemes to thank and reward staff for their achievements. These included; an employee assistance programme, employee reward certificate and voucher, team reward hampers, achievement cups and a promotion programme. The service had made monetary savings from the implementation of their electronic database. These savings were re-invested into positive terms and conditions for staff and increased pay awards.
- Regular staff meetings were held to keep people and staff up to date with changes and developments within the service. Meeting minutes were clear, detailed and made available for all. This ensured any person that had been unable to attend had sight of the discussions that had taken place.

Continuous learning and improving care; working in partnership with others

- The registered manager and the staff team had a strong commitment to learning and making improvements to the service people received.
- A wide variety of audits were undertaken that included medicines, care and support plans, infection control, seizures and falls, nutrition and health and safety checks. These audits were used to form the basis of a cycle of continuous improvement within the service.
- The service worked collaboratively with all relevant external stakeholders and agencies. Positive feedback from healthcare professionals reflected confidence in the capability and commitment of the staff team.
- The management team took part in local forums to ensure sharing of good practice and ongoing learning could be maintained.
- There was strong evidence that learning from incidents and investigations took place and appropriate changes were implemented.