

LEAF Complex Care Limited

Leaf Complex Care Exeter

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Good 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

We expect health and social care providers to guarantee people with a learning disability and autistic people respect, equality, dignity, choices and independence and good access to local communities that most people take for granted. 'Right support, right care, right culture' is the guidance CQC follows to make assessments and judgements about services supporting people with a learning disability and autistic people and providers must have regard to it.

About the service

Leaf Complex Care Exeter provides care and support to people living in their own homes, so that they can live as independently as possible. This is most often provided with 24-hour complex care packages. Not everyone who used the service received personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do, we also consider any wider social care provided. There were currently three people receiving a service.

People's experience of using this service and what we found

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture. People and relatives spoke of how the service went above and beyond when delivering care. For example, "I think they are amazing. I am lucky I have such good carers for him. They are all really skilled", "Staff are a little bit fabulous. It is a really good team. They are very tuned in to [person's name]'s needs, very caring and supportive. They are very knowledgeable. They know about autism" and "I think they are brilliant. I tend to see the same carers, and they are really good. They are on point with his needs. He likes them."

Right support: Model of care and setting maximises people's choice, control and Independence;

People were supported to have maximum choice and control of 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. Staff enabled people to broaden their horizons and develop new interests and friends. Staff wanted people in the community to enjoy peoples' company and see them as individuals. For example, one staff member was part of the "speedway community" and [person's name] frequently went to races. They had special 'shout outs' and had become a well-known and friendly face in that community.

People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so. One person commented, "I have no concerns and I have confidence in the staff. I speak to [registered manager] every day. [Registered manager] and my staff know when I am upset." A relative commented, "I have no concerns about the service."

People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well. There were comprehensive risk assessments in place covering all aspects of the service and support provided.

Medicines were managed as necessary with the focus on medicines optimisation. Infection control measures were in place.

Care files were extremely personalised to reflect people's personal preferences. Their views and suggestions were taken into account to improve the service. People were supported to maintain a balanced diet. Health and social care professionals were regularly involved in people's care to ensure they received the care and treatment which was right for them.

There were effective staff recruitment and selection processes in place with bespoke staff teams supporting named individuals. Excellent staff support and the ethos of valuing staff individually for their achievements resulted in good staff retention.

Right care: Care is person-centred and promotes people's dignity, privacy and human rights;

Staff relationships with people were caring and supportive. Staff provided care that was kind and compassionate. The value concept of 'family' saw people, staff and families working as a team. Staff said, "It means a lot to me to see such a well organised, caring, well-structured provider that actually cares about the people they support." Leaf Complex Care Exeter also supported people in a holistic way, observing when families required additional support.

A person commented, "The staff are really nice, lovely. They are caring and always help me out. I go out almost every day, I love it." A relative commented, "They [staff] are very good with [relative], they know him so well."

Right culture: Ethos, values, attitudes and behaviours of leaders and care staff ensure people using services lead confident, inclusive and empowered lives;

People's equality, diversity and human rights were respected. The service's vision and values of 'Family, Impact and Teaming' centred around the people they supported. The organisation's statement of purpose documented a philosophy of maximising people's life choices, encouraging independence and people having a sense of worth and value. Our inspection found that the organisation's philosophy was embedded in Leaf Complex Care Exeter and referred to with all interactions and training. For example, people were constantly encouraged to lead rich and meaningful lives and the company continued to learn from its staff in a two-way conversation for the benefit of people receiving a service.

People were supported by staff who had received relevant and good quality training in evidence-based practice. This included training in the wide range of strengths and impairments people with a learning disability and or autistic people may have, mental health needs, communication tools and positive behaviour support. Specialist roles were created in-house to further benefit people.

The provider worked hard to instil a culture of care in which staff truly valued and promoted people's individuality, protected their rights and enabled them to develop and flourish. Staff felt extremely respected, supported and valued by the provider which supported a positive and improvement-driven culture.

A number of methods were used to assess the quality and safety of the service people received. The service made continuous improvements in response to their findings.

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

Rating at last inspection

This service was registered with us on 5 July 2021 and this is their first inspection.

Why we inspected

This inspection was prompted by a review of the information we held about this service.

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 effective.

Details are in our effective findings below.

Good ●

Is the service caring?

The service was exceptionally caring.

Details are in our caring findings below.

Good ●

Is the service responsive?

The service was exceptionally responsive.

Details are in our responsive findings below.

Outstanding ☆

Is the service well-led?

The service was exceptionally well-led.

Details are in our well-led findings below.

Outstanding ☆

Leaf Complex Care Exeter

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. We checked whether the provider was meeting the legal requirements and regulations associated with the Act. We looked at the overall quality of the service and provided a rating for the service under the Health and Social Care Act 2008.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Leaf Complex Care Exeter is a domiciliary care agency. It provides personal care and support to people living in their own homes, often with their families, so that they can live as independently as possible.

Registered Manager

This service is required to have a registered manager. A registered manager is a person who has registered with the Care Quality Commission to manage the service. This means that they and the provider are legally responsible for how the service is run and for the quality and safety of the care provided.

At the time of our inspection there was a registered manager in post.

Notice of inspection

We gave the service 48 hours' notice of the inspection. This was because it is a small service and we needed to be sure that the provider or registered manager would be in the office to support the inspection.

What we did before the inspection

We reviewed information we had received about the service. The provider was not asked to complete a Provider Information Return (PIR) prior to this inspection. A PIR is information providers send us to give some key information about the service, what the service does well and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with the registered manager, office staff and quality assurance manager.

We looked at a variety of records relating to the care and support provided. This included three staff files in relation to recruitment, three care plans and various audits/reports relating to the quality and safety of the service. We requested a variety of records were sent to us relating to staff training and regards the management, values and visions of the service.

After the inspection

After our visit we sought feedback from people using the service, relatives, staff and health and social care professionals to obtain their views of the service provided to people. We received feedback from four family members and four members of staff.

Is the service safe?

Our findings

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

This is the first inspection of this newly registered service. This key question has been rated Good. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People were kept safe from avoidable harm because staff knew them well and understood how to protect them from abuse. The service worked well with other agencies to do so. Relative comments included, "[Person's name] seems very happy in themselves and very relaxed around the people they work with", "Yes I do think [person's name] is safe" and "Leaf have been with [person's name] a long time. They are good with him. They seem comfortable with them. When we are there, we observe the staff and we feel they are safe with them."
- Staff had training on how to recognise and report abuse and they knew how to apply it.
- Staff had access to the provider's policies on safeguarding and whistleblowing. Safeguarding was a regular topic in staff supervision to ensure staff had the opportunity to discuss any concerns.
- Staff knew people very well and could recognise if a person was worried or unhappy. This meant any concerns about people's wellbeing could be identified and followed up.

Assessing risk, safety monitoring and management

- People lived safely and free from unwarranted restrictions because the service assessed, monitored and managed safety well.
- There were comprehensive risk assessments in place covering all aspects of the service and support provided.
- The service worked in partnership with people to understand and manage risks. Information was provided in an accessible format according to their individual communication needs. This meant people could participate meaningfully in assessing risks and developing support plans. It created a positive culture where people could participate safely in a range of activities, such as, community groups, swimming, walks, trampolining and enjoying hobbies.
- Staff were trained to monitor, anticipate and observe changes in behaviour. This helped them identify if people were unwell or upset and provide the support they needed.
- Support plans contained clear guidance for staff about how to recognise and manage risks, for example when people were experiencing emotional distress or when out in the community.
- People's support and records were monitored and reviewed frequently. This meant any issues or improvements needed were identified and communicated to staff promptly.
- There were effective systems in place to ensure information about any changes in people's needs was shared across the staff team.
- People were referred for support from external health professionals when this need was identified. This included speech and language therapists to develop person centred approaches to communication.

Learning lessons when things go wrong

- Staff raised concerns and recorded incidents and near misses and this helped keep people safe.
- There was evidence that learning from incidents and investigations took place and appropriate changes were implemented. For example, care plans and risk assessments were updated in relation to one person's road safety. Actions had been taken in line with the service's policies and procedures. Where incidents had taken place, involvement of other health and social care professionals was requested where needed to review people's plans of care and treatment.

Staffing and recruitment

- The service had enough staff, people received support from a bespoke team of staff who were employed to support a named person.
- The numbers and skills of staff matched the needs of people using the service.
- Every person's record contained a clear profile and 'grab sheet' with essential information and dos and don'ts to ensure that new or temporary staff could see quickly how best to support them.
- There were effective recruitment and selection processes in place. Staff had completed application forms and interviews had been undertaken. In addition, pre-employment checks, which included references from previous employers and Disclosure and Barring Service (DBS) checks, were completed. DBS checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions.

Using medicines safely

- The service ensured people's behaviour was not controlled by excessive and inappropriate use of medicines. Staff understood and implemented the principles of STOMP (stopping over-medication of people with a learning disability, autism or both) and ensured that people's medicines were reviewed by prescribers in line with these principles. There were examples of people effectively reducing their medicines to ensure they only received essential ones.
- Staff made sure people received information about medicines in a way they could understand.
- Staff followed effective processes to assess and provide the support people needed to take their medicines safely.
- Staff reviewed each person's medicines regularly to monitor the effects on their health and wellbeing and provided advice to people and carers about their medicines.
- People were supported by staff who followed systems and processes to prescribe, administer, record and store medicines safely.

Preventing and controlling infection

- Staff had received training in infection control. This helped them to follow good hygiene practices during care and support. Everyone said staff were following good personal protective equipment (PPE) guidelines in relation to the COVID-19 pandemic.
- The provider supplied staff with masks, gloves and aprons to use when supporting people with their personal care. This helped to minimise the risk of infections spreading.
- Leaf Complex Care Exeter circulated regular updates to staff on preventing infection and COVID-19 along with any new legislation/guidelines that would affect the way they worked to ensure they followed best practice in order to keep people safe.

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.

This is the first inspection for this newly registered service. This key question has been rated Good. 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

- People had very detailed care and support plans that were personalised, holistic, strengths-based and reflected their needs and aspirations, including physical and mental health needs. People, those important to them, and staff, reviewed plans regularly together.
- Care plans reflected a good understanding of people's needs, including relevant assessments of people's preferred communication support and sensory needs.
- Staff ensured people had up-to-date care and support assessments, including medical, psychological, functional, communication, preferences and skills.
- Support plans set out current needs, promoted strategies to enhance independence, and demonstrated evidence of planning and consideration of the longer-term aspirations of each person.

Staff support: induction, training, skills and experience

- People were supported by staff who had received relevant and good quality training in evidence-based practice. This included training in the wide range of strengths and impairments people with a learning disability and or autistic people may have, mental health needs, communication tools and positive behaviour support. A staff member commented, "Leaf communicate brilliantly with staff to ensure we all know exactly what the process is with each client."
- People who lacked capacity to make certain decisions for themselves, or had fluctuating capacity, had decisions made by staff on their behalf in line with the law and supported by effective staff training and supervision. Easy read leaflets for people were shared discussing the Mental Capacity Act.
- Updated training and refresher courses helped staff continuously apply best practice.
- The service checked staff's competency to ensure they understood and applied training and best practice.
- Staff received support in the form of continual supervision, appraisal and recognition of good practice. A staff member commented, "I will get asked weekly if I'm ok and happy. If I have any problems or concerns regarding work or family, they're always there to support me in every way possible."
- Staff could describe how their training and personal development related to the people they supported.
- The service had clear procedures for team working and peer support in line with Leaf values that promoted good quality care and support.

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

- People received support to eat and drink enough to maintain a balanced diet.
- Staff supported people to be involved in preparing and cooking their own meals in their preferred way.
- Staff encouraged people to eat a healthy and varied diet to help them to stay at a healthy weight. One

person was unable to self-regulate their eating saying 'more' before starting the meal. Staff plated up two small meals which ensured the person got what they wanted and reduced anxiety.

- Mealtimes were flexible to meet people's needs and to avoid them rushing meals.

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

- Staff knew how to respond to people's specific health and social care needs. For example, recognising changes in a person's physical health.
- Multi- disciplinary team professionals were involved in and made aware of support plans to improve people's care.
- People were referred to health care professionals to support their wellbeing and help them to live healthy lives.
- People had hospital passport information. Hospital passports are used to provide important information to hospital staff about a person living with a learning disability, if the person is admitted to hospital.
- People were supported to attend annual health checks, screening and primary care services.

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.

When people receive care and treatment in their own homes an application must be made to the Court of Protection for them to authorise people to be deprived of their liberty.

We checked whether the service was working within the principles of the MCA, and whether any conditions on authorisations to deprive a person of their liberty had the appropriate legal authority and were being met.

- Staff empowered people to make their own decisions about their care and support with input from families.
- For people that the service assessed as lacking mental capacity for certain decisions, staff clearly recorded assessments and any best interest decisions.
- Staff demonstrated best practice around assessing mental capacity, supporting decision-making and best interest decision-making.

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.

This is the first inspection for this newly registered service. This key question has been rated Good. 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

- People's equality, diversity and human rights were respected. The service's vision and values centred around the people they supported. The organisation's statement of purpose and service user guide documented a philosophy of maximising people's life choices, encouraging independence and people having a sense of worth and value. Our inspection found that the organisation's philosophy was embedded in Leaf Complex Care Exeter using the values of Family, Impact and Teaming. For example, people were constantly encouraged to lead rich and meaningful lives within their own homes and community.
- People and relatives spoke of how the service went above and beyond when delivering care. For example, "I think they are amazing. I am lucky I have such good carers for him. They are all really skilled", "Staff are a little bit fabulous. It is a really good team. They are very tuned in to [person's name]'s needs, very caring and supportive. They are very knowledgeable. They know about autism" and "I think they are brilliant. I tend to see the same carers, and they are really good. They are on point with his needs. He likes them."
- One relative told us how Leaf staff had initiated joining the National Trust as [person's name] loved to walk. They offered lots of choices of where to walk safely, ensured the staff worked in mixed genders to keep the person safe and had a care plan showing how the person signalled they wanted to go for a walk.
- The value concept of 'family' saw people, staff and families working as a team. Staff said, "It means a lot to me to see such a well organised, caring, well-structured provider that actually cares about the people they support."
- One relative said, "The care package is being run really well. the carers support each other. When needed the carers would stay on to do emergency cover rather than getting someone [person's name] doesn't know." Another relative spoke about how staff had enabled them to go and have a lovely holiday with one person by offering to come on the holiday and do the support work so the family could enjoy quality time together. The relative said, "Physically I can't manage [person's name] on my own. Staff were very accommodating. We had a lovely holiday."
- Care plans spoke about people celebrating their personalities and attributes. These were added to and showed how staff had developed close bonds with people. For example, [Person's name] is kind and caring towards people, looks to make people smile and laugh and [person's name] is a brilliant swimmer, it's wonderful watching how fluid they are in the water." This had been explored with regular trips around water. A staff member said, "[Person's name] has frequent visits to the beach and as water is a positive stimulant, they turn into a completely different person. Lovely."
- Staff worked hard to enable people to spend positive time with their families especially where this had been difficult in the past. One person had organised 'family Fridays'. These enabled contact in a safe and controlled way. The person and staff had worked on boundaries, so the person knew when to stop and work with staff. Family contact was now positive and enjoyable.

- Staff prided themselves in knowing people and their families really well. For example, when one person had to keep moving house, staff went to the new property to put the person's favourite bedding on and helped the family buy 'tough' furniture to minimise incidents.
- Staff ensured people were able to continue to do the things they liked. For example, when a mobility car broke down, they took it to the garage, so it was fixed in time for the person's routine outings.
- Leaf Complex Care Exeter also supported people in a holistic way, observing when families required additional support. A Family Care Navigator assisted families in areas such as benefit checks, signposting to other support services, applying for discount cards, grants, emotional support if they need someone to talk to, putting together bespoke activity packages for their loved ones and attending multidisciplinary meetings with families.
- To ensure people received support from staff working as best as they could there was a Field Care Coach. This role promoted the company values, showing staff how much they were truly valued and appreciated within the company. Part of the role was to do 'in service' visits for the clinicians/support workers providing support and coaching to problem solve quickly and efficiently, whilst observing best practice and sharing that with others. This neutral role enabled staff to feel heard, understood and motivated, which in turn, said the registered manager, had a positive effect on the rest of the team, the person and all involved.

Respecting and promoting people's privacy, dignity and independence

- Staff understood the importance of promoting people's independence. This was part of the ethos of the service, so people could live at home for as long as possible. For example, one relative said, "[Person's name]'s independence has improved since being with Leaf. Even taking their plate to the sink. They like walking and they encourage that. They like going out in the car and they encourage that, trying different routes."
- Another relative said, "[Person's name] has learnt to put the kettle on. They (use continence aids) but staff have helped them use the toilet. We celebrated it. It was amazing. If they hadn't had the space and support of carers around them it never would have happened. They are blossoming in that environment."
- Care plans were extremely detailed around peoples' routines which is important for people with autism. Staff added details as needed. For example, "I like to check the house is secure at night myself, I get myself into bed and say goodnight to staff at the door and I enjoy eating in the car so I like a packed lunch with me." Staff anticipated events to further promote peoples' independence such as leaving a change of clothes in the 'favourite bathroom' and making up favourite smoothies the night before to minimise any waiting periods. Drinks were offered in locations where a person was less likely to spill to enable them to remain independent. For example, at a table or in the kitchen. These details enabled people to avoid unnecessary distress.
- People's privacy and dignity were respected. This included ensuring doors and curtains were closed and being respectful during personal care tasks. Relatives spoke about how well staff preserved peoples' dignity. Staff taught people using repetition on how to close the doors, wear light clothing that would not become uncomfortable triggering taking clothes off and gave people space. One relative said, "[person]'s name can dress themselves thanks to Leaf staff. They spent time teaching them and now they close the door too."
- Records were stored securely to ensure confidentiality was maintained.

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

- People and their relatives told us they were fully involved in making decisions about their care. One staff member said, "[Person's name]'s communication has got a lot better; we document what [person's name]'s noises mean, they will show staff and family what they like to do. They are completing more independent skills which makes them feel in control. They often turn the television off by the socket switch and asks for it to be switched back on. We have shown them how to switch it back on again and quite often they will do it and be pleased with themselves." The staff reported a reduction in negative responses.

- One person had shown they liked arts and crafts. Staff had made a craft box so the person could choose themselves what they would like to make. They went shopping to choose new items. The person was able to try new sensory experiences which then enabled them to participate in household chores through water play and touching new things, increasing their input and independence, where they had found this challenging in the past.

Is the service responsive?

Our findings

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

This is the first inspection for this newly registered service. This key question has been rated Outstanding. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- Support was completely personalised, including family support, and focused on people's quality of life outcomes to ensure they could live their best lives. Families and staff spoke about very successful outcomes. One relative described how prior to Leaf support their loved one was anxious and expressed extreme emotions and feelings. The person had been unable to maintain contact with their family for a long period. The relative said, "Through the staff team understanding and getting to know what they like and enjoy, they have a much more fulfilled life. I can now enjoy weekly time with them, and even arrange other times. I have seen a massive improvement."
- Prior to Leaf support, one person had not been able to access the community or attend medical appointments due to how they expressed themselves. The person was now regularly doing community-based activities such as going to theme parks, zoos, walks, bowling and lots more. They had been able to access healthcare safely and were even able to reduce their medicines because staff pre-empted incidents by recognising any triggers and had got to know the person really well as a consistent team.
- Staff told us how delivering personalised care by understanding and sharing information about the person in detail made a difference. One staff member said, "The transformation in [person's name] is unbelievable. They didn't really interact with new people, they would get out of the front door and not want to go any further, they wouldn't go in a car. Now, with such an amazing team working slowly, they go on daily walks with staff, if not more than once a day. They go for more drives in the car. They communicate better because we know the sounds and use pointing. They are so happy now."
- Another person had been unable to live with their parents. Staff enabled the family to live together safely as well as facilitate going back to school, by slowly getting to know the person and moving at their own pace using small goals. The person no longer needed one to one support and had a much more positive, happy life with less restrictions.
- Staff used person-centred planning tools and approaches to discuss and plan with people how to reach their goals and aspirations. The service used pen pictures of staff to ensure people were matched and had common interests to build trust. One person had regularly refused support, medicines and had run away putting themselves at risk of harm. They said, "At night they are so much more settled because we introduced a structured routine. They previously had had a lack of sleep" and "We have built an amazing relationship. We are good at thinking of activities to do on a budget and this is having a very good and positive wellbeing response for [person's name]. Their progression from when I started to now is amazing and I'm so proud to be a part of this."
- Staff enabled people to broaden their horizons and develop new interests and friends. Staff wanted

people in the community to enjoy peoples' company and see them as individuals. For example, one staff member was part of the "speedway community" (a motorcycle racing sport) and [person's name] frequently went to races. They had special 'shout outs' and has become a well-known and friendly face in that community.

- Accessing the community was important not only for stimulation but for exposure to different types of people. One staff member said, "Swimming and skating keeps [person's name] social and educates them on the people around them whilst having fun." They added, "[Person's name] has become a well-known figure in their community and now gets invited to events and birthday parties where they are engaged and valued. This means we can aim for more goals to live a fulfilled life with a range of people."
- Staff used every opportunity to guide and help people learn skills and experience new things. One relative said, "Staff read books to [person's name], they love films, they went for a walk yesterday and picked autumn leaves helping them to understand the change of seasons and the clocks change." One person had been learning about different religions and ethnicities. Staff said the person got so excited when they understood new ways of life and had become incredibly understanding, even educating their family on things they had just learnt about. The staff member said, "It really is amazing to watch them teaching others. People can do it if they are supported right."
- One person had been supported to plan and attend a family hen do, wedding party and wedding. They had not been able to attend these kinds of events before. Now they were more involved with their family and had recently started developing their own style and experimenting in what it was that made them be and feel their true self.
- Staff discussed ways of ensuring people's goals were meaningful and spent time with people understanding how they could be achieved. For example, one person had been practicing being in crowded places as their anxiety had been restricting their opportunities. They had been going on food shops so they could have a purpose and choose their food. Staff said, "[Person's name] is getting better and better in busier environments weekly, we can even go out to dinner in a restaurant where we use pictures to help choice. We are practicing using clear speech so they will be able to order themselves."
- People were supported to participate in their chosen social and leisure interests on a regular basis. One person regularly attended trampolining with staff who got fully involved using the time to have fun with the person creating memories whilst encouraging mobility. This had resulted in much better movement.
- Staff looked at peoples' lives as a whole and understood the need for quiet time. One staff member said, "When we know it's going to be a busy time, we take [person's name] out on nice drives. They love being in the car, the sounds, the views and really seems to stimulate them in a positive way." Staff used pictures of favourite places for people to choose their destination.
- One person was in a difficult situation with transient accommodation. These regular changes could have resulted in negative reactions, but staff worked with the person before a move and kept to a set routine. They helped the family move, with the registered manager supporting and reassuring the family most days. They also helped look for suitable accommodation and worked with other health professionals. Staff said, "It's out of our control but Leaf staff really do ensure [person's name]'s wellbeing and safety on the lead up to the moving day. We communicate to a high standard at how, when and where the moves will take place to reduce anxiety. [Person's name] is always at the front of every decision made which is the reason they are always so happy even in these circumstances."
- Preferences (i.e. gender of staff) were identified and appropriate staff were available to support people. For example, one person always was supported by two females which made them more comfortable.

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.

- Staff ensured people had access to information in formats they could understand.
- There were visual structures, including objects, photographs, use of gestures and symbols which helped people know what was likely to happen during the day and who would be supporting them.
- Staff had good awareness, skills and understanding of individual communication needs, using individual communication plans. They knew how to facilitate communication, working with health professionals, and when people were trying to tell them something. For example, a pain symbol to point at if they had a headache.
- There was individualised support such as tailored visual schedules (picture stories of upcoming events) to support people's understanding. One person was working towards visiting a theme park. Staff contacted locations prior to the visit so they had all the information and pictures needed to prepare people to work towards successful experiences.

Improving care quality in response to complaints or concerns

- There were regular opportunities for people, and people that matter to them, to raise issues, concerns and compliments. This was through discussions with them by staff on a regular basis and knowing people's behaviours when unhappy. The provider ensured relatives were aware of a clear complaints process should they wish to use it. A relative said, "Staff are always available. We speak to them about little bits and pieces. They always get back to you. They are very responsive."
- The service had not received any formal complaints. However, the provider recognised that if they received a complaint, they would attend to it in line with the organisation's procedure.

End of life care and support

- At the time of inspection, no-one in the service was receiving end of life care. If that changed, the registered manager told us they would consult with the person, their relatives and health professionals to ensure they received care in line with their needs and preferences.

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.

This is the first inspection for this newly registered service. This key question has been rated Outstanding. This meant service leadership was exceptional and distinctive. Leaders and the service culture they created drove and improved high-quality, person-centred care.

Promoting a positive culture that is person-centred, open, inclusive and empowering, which achieves good outcomes for people

- People, relatives and staff were highly complimentary about Leaf Complex Care Exeter. Relatives said, "Yes, Leaf is well run and managed. They are so good at keeping in touch and communicating with me. I know what is going on all of the time. They are very inclusive" and "I like that staff are really approachable. [Person's name] has a good quality of life and is happy. They manage and support them really well."
- Leaf Complex Care Exeter was part of 10 related companies under the Catalyst Care Group. The Chief Executive Officer (CEO) was very present throughout the company and staff received an introduction video by him about Catalyst/Leaf culture and values. The emphasis was on how culture was the first thing to be discussed and then regularly revisited. They said, "It is always people before profit, then you will get a positive response. It's important to stay true to the values. We hire for culture, get the right people, train for skill and promote personal growth, learning from those you lead." A Director of Culture continued the organisation culture and values training and particularly welcomed staff ideas with staff being celebrated for the work they did through award ceremonies and social events.
- The monthly employee of the month was meaningful and recognised and rewarded staff. Nominations from people, relatives and staff focussed on the impact for people such as, "[Staff name] has provided consistency in crisis since the beginning. They have worked as their advocate to provide the person with the best quality of life. Thank you". Short celebratory videos were circulated throughout the company. Relatives also spoke of their thanks to named staff. For example, "The bond they have with our son was amazing in just 8 weeks. He confided in them which was extremely reassuring as he doesn't usually get close to people. Their dedication is a credit to the company and their selflessness to go above and beyond."
- Staff were nominated for the annual company awards. The provider sent cards and flowers in response to successes and good quality work. For example, staff at Leaf Complex Care Exeter had received positive feedback from a health professional so they had been rewarded with dinner out. There were summer and Christmas events, Leaf picnics in the park and tea in the office. People receiving support were also invited to join staff and people often visited the office. Staff said, "We come together to have fun. We really are one big family" which was reflective of Leaf values. There was a 'Family Perks' scheme and presentation. Staff received acknowledgement and congratulations from the provider such as for birthdays, achievements, new home or new babies. Staff spoke of being supported to be the best versions of themselves. There was support for financial aid/hardship loans, vouchers for positive feedback individually or as a team, nominations for employees who had had a difficult year (currently a secret Santa reward) and clinical of the year award with a substantial prize.
- A recent Catalyst Care Group awards ceremony celebrated all the clinicians hard work. Clinicians, office

staff and parents of the people we support were invited for a three-course meal, with awards of the following for the clinicians such as Leaf clinician of the year, Catalyst clinician of the year and Longest standing leaf clinician. The registered manager said, "This will allow a chance for everyone to enjoy themselves (including families) and for Catalyst to show their appreciation to everyone for the hard work and dedication we show to the people we support and the company."

- Staff felt extremely supported especially when supporting families with challenging dynamics or as often the case supporting people initially in crisis. Each team had a staff support group online and all staff spoke of the excellent support from the managers. Staff comments included, "I can honestly say from personal experience Leaf are the best company I've worked for." The staffing levels allowed for work life balance and consistency for people.
- Employing the right staff and staff retention was very important for Leaf Complex Care Exeter as support for people was preferably a long-term commitment. There was excellent staff retention and staff were matched with individuals to work in a small team. Staff retention was supported by innovative working patterns that benefitted people. Some staff worked from local accommodation for extended periods to maintain consistency for people. For example, working over two or three days and staff were happy to travel, some flying to where people were. For the person having to move accommodation, staff moved to accommodation near the new properties.
- All care packages were complex and often a last resort for families where packages had not been successful elsewhere. Often families and people were in crisis. It was obvious from examples that people had benefitted immensely from the sensitive, personalised support from Leaf.
- The provider ensured people had access to specialist roles such as a Positive Behavioural Support team (PBS). Staff completed PBS plans for people prior to a package starting and staff could access the team with any queries. There was also an in-house speech and language therapist, occupational therapist and in-house training department. A Family Care Navigator worked with families and supported staff. For example, they devised easy read leaflets about sexual health, internet safety and relationships. A Clinician Care Navigator role was introduced to enable specific staff support in any setting, moral support and to act as a neutral party where needed.
- The value of 'Teaming' included team building events and rewards for good feedback. The provider had recently taken a group of staff to Florida for a team building conference, 'Great place to work for all'. The registered manager said, "If you need anything he is there." The provider rang the office from Florida to offer staff support during the inspection. All staff spoke of the positive impact for individuals of supporting people with a consistent, knowledgeable team as seen throughout the report.
- There was excellent communication from the provider and management. Monday briefings were cascaded down each week. The Safeguarding Lead, Quality Assurance Lead and Clinical Governance Lead at head office in Bristol monitored audits, including goal trackers for individuals. There were quality monitoring visits in person to the Exeter office. Information for staff including videos to enable staff to see management faces were regularly shared.
- Staff were very well supported in the Exeter office and from the head office. Staff felt valued saying the support was 'out of this world'. One staff member said, "I really cannot praise Leaf enough and can honestly say I've never enjoyed a job as much as I have this one." Support was a two-way conversation with staff knowing about the CEO and management team as individuals. Staff completed one-page profiles about themselves, photo, 'This is Me', likes and dislikes and hobbies they could share. One staff member had a profile detailing their own needs and how others could help them. Each morning in the office the registered manager discussed the three priorities of the day and the positives from yesterday about what staff had helped people achieve. For example, that morning staff had been celebrating visiting and trying out various new mobility vehicles for one person. Staff were able to raise any issues. They had access to an external 'Safe Call' company if they wished to use this for further support.
- Staff completed formal surveys and were asked 'What else can we do to make you feel valued?' Recent

responses were, "Nothing, everything I need or want is given and helped with. Incredible team", "Nothing they always go above and beyond" and "I feel very valued and am supported".

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

- There was a clear, supportive organisational structure, including the CEO, specific leads, registered managers and support staff. Support staff were known as clinicians and valued for their skills. They understood their responsibilities relating to the duty of candour and being open and transparent. All staff and families said that Leaf staff and management were very hands on and involved with them and they often travelled long distances to visit people, staff and families. Clearly the service was built on passion for providing the best care possible and ensuring people felt cared for and safe, giving them a fulfilled quality of life.
- Records demonstrated that complaints and concerns were managed well. There had not been any formal complaints since registration, but smaller issues were monitored to look at patterns and note more formally where issues had been resolved before they became a problem.

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

- Quality and governance report documents demonstrated the service had a robust system to assess and monitor the service, learn lessons and implement improvements.
- Training audits were undertaken, staff development and appraisal, incidents and complaints were analysed. Staff had opportunities at every level to discuss ideas for the benefit of the people they supported. There was a Let's Talk series of videos made by the Head of Clinical Governance and Clinical Care Team Lead that staff could access to discuss clinical issues.
- There were also in-house training videos building on the culture aspect such as 'the five dysfunctions of a team.' Teamwork was seen as fundamental. The Quality Assurance manager said, "We ensure we do teamwork as best we can. It's fundamental." This work was underpinned by internationally known group dynamic theories.
- The service continued to inform us of any incidents we needed to be made aware of. They provided clear information of actions taken to learn from incidents and improve people's lives.

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

- People and their families were asked for their views about the service in satisfaction questionnaires. One relative said, "I really like that staff listen to any concerns I have, they follow the care plan. I think we are really lucky they are very sincere and professional. The carers seem happy and if they are happy, [person's name] is going to be happy." Another relative said, "The carers really do care, we know [person's name] is looked after well and in a lovely place which makes us feel good. The management is really good. You can tell they really like him. We have to move once a month as they don't have a permanent home at the moment. Staff don't have to help move all of his belongings, but they do."
- Families were very involved in the care and support from the beginning. One relative had written the care plan with staff support over two days. The registered manager had asked the local authority if they could include the family in a care package as they were very anxious. A family care plan was then devised to inform staff how to support them.

Continuous learning and improving care

- The service learned from incidents and events and they used this learning to drive improvement. This included sharing learning with staff and developing protocols and guidance to support them. Policies were detailed and tailored to the client group.

- Leaf promoted ethical responsibilities in relation to environmental strategies. The agency now had three electric cars.

Working in partnership with others

- Leaf had received feedback from external health professionals praising them. For example, a psychiatrist said how consistent routine and support had improved the person's quality of life and they could be discharged.
- In relation to the person with transient housing difficulties, the registered manager had pro-actively shared information and case summaries to ensure all aspects of the moves and properties were appropriate in a timely way. A health professional said, "Thank you for going the extra mile when the property did not live up to the advert." Another health professional feedback to the registered manager, "The person would have been in hospital if it were not for you and your support." The registered manager said, "We advocate for everyone to ensure they are housed in spaces that suit them." For example, for each move staff went to the new property to clean it and ensure it was as the person would like it, helped the family with paperwork and used Leaf vehicles for the move.
- Leaf worked closely with hospitals to ensure people were supported whilst in hospital and that discharges went smoothly. Leaf staff travelled to the hospitals and worked with hospital staff to minimise disruption and anxiety for people.