

## Active Prospects

# Millview (Active Prospects)

### Inspection report

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### Ratings

#### Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Outstanding ☆

# Summary of findings

## Overall summary

### About the service:

Millview is a residential care home that provides accommodation and care for up to five people with learning disabilities. The principles and values of Registering the Right Support and other best practice guidance ensure people with a learning disability and or autism who use a service can live as full a life as possible and achieve the best outcomes that include control, choice and independence. At this inspection the provider had ensured these principles and values were applied.

### People's experience of using this service:

People at Millview experienced excellent care and support which enabled them to live safe and fulfilled lives. They were treated with dignity and respect and supported by staff who had their best interests and wellbeing at heart.

Relatives spoke highly of the care and support provided and of the happiness of their loved ones at Millview. One relative said, "I think Millview and the staff there are just excellent... They are also very accommodating and flexible."

People were supported to achieve their own goals, develop themselves and lead an aspiring and active life. They were encouraged and helped to make choices and take control of their lives wherever possible. Staff understood each person's strengths and needs in a detailed way.

Risks to the health, safety and well-being of people were addressed in a personalised and enabling way that promoted their independence. Staff supported people with skill and expertise to ensure they could enjoy maximum freedom whilst remaining safe.

People's wellbeing was kept at the forefront of the service and action was taken to ensure people's health was maintained. When people were unwell, staff worked closely with healthcare services to ensure their needs were met. Staff showed commitment and determination to ensure people always had access to the right equipment and professional support to help promote their independence.

Staff enjoyed working at the service and felt well supported in their roles. They had access to a good range of training which equipped them to deliver their roles effectively. Staff were proud to work at Millview and this in turn led to the delivery of high quality support.

People at Millview benefitted from being part of a proactive and forward-thinking organisation where their wishes, needs and goals were kept at the centre. They were supported by a dedicated staff team who were ensured caring, flexible and responsive support was given at all times.

The leadership of Millview was strong and inspiring. There was a culture of continuous improvement and learning which ensured consistently good standards of care were maintained. The service was underpinned

by a strong set of organisational values that were put into practice by the registered manager and staff. The registered manager had the passion and enthusiasm for delivering high quality care and to drive forward towards excellence.

The provider had a clear strategic vision and aim to be an outstanding organisation and they achieved excellent outcomes for the people they supported. The provider had created an inclusive and open environment and developed some innovative practice to give the people they supported a strong voice and ensure they were partners in shaping service improvements.

Rating at last inspection:

The last inspection report was published in September 2016 and the service was rated as Good.

Why we inspected:

We inspected the service as part of our scheduled plan of visiting services to check the safety and quality of care people received. This was an unannounced comprehensive inspection.

Follow up:

We will continue to monitor the service to ensure that people receive safe, compassionate, high quality care. Further inspections will be planned in line with our scheduling guidance.

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

We always ask the following five questions of services.

### Is the service safe?

Good ●

The service was consistently safe. Details are in our Safe findings below.

### Is the service effective?

Good ●

The service was consistently effective. Details are in our Effective findings below.

### Is the service caring?

Good ●

The service was consistently caring. Details are in our Caring findings below.

### Is the service responsive?

Good ●

The service was consistently responsive. Details are in our Responsive findings below.

### Is the service well-led?

Outstanding ☆

The service was exceptionally well-led. Details are in our Well-Led findings below.

# Millview (Active Prospects)

## 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:

The inspection was carried out by two inspectors.

#### Service and service type:

Millview is a residential care home for five people. On the day of our inspection, five people were living in the home. The home supports people with learning and physical disabilities. The service had a manager registered with the Care Quality Commission. 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.

#### Notice of inspection:

The inspection took place on 22 February and was unannounced.

#### What we did:

Before the inspection, we reviewed the information we held about the service. This included the previous inspection report, notifications since the last inspection and feedback from the local authority. Notifications are changes, events and incidents that the service must inform us about.

During the inspection we completed a check of premises and spent time observing how staff cared for and supported people. We spoke with two people and one relative. We received feedback from two other relatives and one healthcare professional. We spoke with three of the support staff, and the registered manager. We reviewed two people's care records looking at risk assessments, and evidence of personalised care. We examined the medicines administration practice and records. We looked at two staff recruitment files and other records relating to how the service was run. Some additional evidence was sent to us after the inspection.

# Is the service safe?

## Our findings

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

At our last inspection in August 2016, we rated this key question as 'Good.' At this inspection we found that people continued to be kept safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People were protected from the risk of abuse by knowledgeable staff. There had not been any recent safeguarding concerns and there was a clear process for staff to follow should any allegations be made.
- One staff member told us, "We have regular training in safeguarding and I would report to the manager. There's a very good relationship, and I would be supported if that ever happened. It has not since I have started." Another staff member said, "We all understand that it is absolutely not acceptable to see anyone be a victim of abuse and not report it."
- There was information displayed in the home on the different ways people and staff would be able to report poor care or abuse.

Assessing risk, safety monitoring and management

- People were not restricted, as the risks they faced were managed proactively. Staff ensured people's safety when in the community or taking part in activities. One staff member told us, "If someone wants to start to do a new activity then the risk assessment will be completed by the manager and the person will be encouraged to put their ideas forward, so we assist them in managing risks. One person who had always wanted to drive was supported to experience this through go-karting. The registered manager said, "This was a safe way we could make this happen."
- People's known risks were managed and monitored safely. For example, professional guidance was in place to support a person at risk of choking when they were eating or drinking. A person who was at risk due to their unique physical disabilities was supported by staff correctly and they had been given advice from the specialist nurse.
- There was a one-page profile on each person and a list of the top ten things staff needed to be aware of, including any known risks. Each person also had a positive behaviour plan. This explained different behaviour patterns, what had been historically been a trigger and what the best approach was to support people safely.
- Fire risks had been assessed and there was an up to date evacuation plan. This had recently been put to the test when builders accidentally set off the fire alarm. The staff supported people and completed a correct, and safe evacuation of the building with people. There was also evidence that weekly fire door, lights and equipment were checked.

Staffing and recruitment

- People were supported by sufficient numbers of staff. Staffing was flexibly organised around people's needs and activities. Usually there were four staff on duty in the mornings and three in the afternoon. There were always two staff available at night; one waking and one asleep, but on-call. Agency staff were used where needed.

- One member of staff said, "There's always enough staff and we have someone 'on call'." The registered manager told us about the guidelines for managing staff absence or sickness and use of bank staff who are part of the team.
- The provider used recruitment checks to ensure any staff employed were safe to work with people who need care and support. These included details of the applicant's previous work history, two references and a check with the Disclosure & Barring Service (DBS). The DBS keeps a record of potential staff who would not be appropriate to work in health and social care.

#### Using medicines safely

- People's medicines were managed and administered safely. The medicines administration record (MAR) charts were appropriately completed. There were protocols in place for the management of 'as required' medicines (PRN).
- The administration of medicines was completed in a person centred way. Staff gave a person their medicines in the way they liked to take them and involved them in the activity.
- Staff competency in administering medicines was assessed and reviewed by the manager on at least an annual basis.
- People's medicines were stored safely and a temperature record for each location was being completed daily as expected.

#### Preventing and controlling infection

- People were protected against the risk of the spread of infections. The home environment was clean and well maintained. Staff washed their hands and wore protective equipment when it was needed.
- There was a good system to ensure safe practice and access to personal protective equipment was maintained. One staff member took a role as the lead for infection control. They told us, "I do regular checks and we keep any actions and logs in a folder in the office."

#### Learning lessons when things go wrong

- Staff responded appropriately to any accidents or incidents to ensure people were kept safe. There was a record of each incident and a log with any action and lessons recorded. The registered manager said, "If something is wrong we can learn from it."
- Action had been taken for a person who had hurt themselves and lashed out at staff when distressed. Advice was quickly sought from the psychiatric nurse about supporting the person as well as a review of their medicines. Where an error had been made by a staff member applying a topical cream with a person this had been discussed with all staff to gain a learning outcome.

# 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 our last inspection in July 2016, we rated this key question as 'Good'. At this inspection we found that 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's needs, and choices were assessed before they came to the home with regards to their personal care, social needs and any preferences. Assessments were detailed enough to ensure people's needs and their medical conditions were known and that the service could meet these fully.
- People's care was delivered well and effectively using best practice. The home has signed up to the national project about stopping the over use of medication of people with a learning disability. The registered manager had also attended training about supporting people with swallowing problems. Information was displayed in the kitchen about the best practice and new guidelines to follow. It was also available on the home's iPad as an application along with other useful resources that staff could look up whilst at work.

Staff support: induction, training, skills and experience

- People were supported by staff who had sufficient knowledge and skills to carry out their role effectively. Staff told us about their induction into the service. One said, "Yes it was a very good induction programme and I had a shadowing period and was told that if I did not feel ready, I could shadow for a longer period of time."
- Staff told us that they were consistently updated and refreshed with relevant knowledge through the e-learning and face to face training on offer. The training records showed a high compliance with the e-learning. This covered subjects such as equality and diversity, person centred care as well as infection control and fire safety which ensured the delivery of effective care.
- Staff were provided with regular supervision and annual appraisal. One staff member said, "I feel very supported by the management. Another said, I get feedback through the appraisal and supervision sessions."

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

- People were supported to eat and drink well. One person, who had been supported by a dietitian, needed to choose their own food. They were supported to go shopping and cook for themselves. They told us, "I have my own healthy food. My keyworker takes me out, so I can buy the food I like and need to eat."
- Where necessary, staff recorded and monitored people's nutrition and hydration to ensure they stayed healthy. Individual dietary requirements were known and displayed.
- People were helped to choose the meals and food they liked. Some could use an iPad application where a meal could be chosen and then the shopping list and the method of cooking were also displayed. One staff member told us, "All of the residents are involved in assisting with meal times when they are able to do so."



Staff working together and with other agencies to provide consistent, effective, timely care

- People were supported by staff who communicated well and worked in their best interests. Staff updated each other verbally and used tools such as a daily shift planner, daily notes and a communication book. The daily notes were clear and gave appropriate level of detail so that any handover between staff was seamless. One staff member talked about the team and said, "Whenever it gets busier than normal we all just help each other."
- People were referred to professionals in a timely manner. For example, we saw a recent referral to the speech and language therapist for one person and that the specialist dietary and swallowing advice was being actioned.

Supporting people to live healthier lives, access healthcare services and support

- People were supported to keep all health care appointments and to be actively involved. People's care plans contained a health action plan. This contained their medical history, immunisations, medicines and the names and details of specialists who were supporting their health. Any health appointments past, present and upcoming were recorded as well as other personalised information to support the person's health.
- One person had significant health and communication needs. Since living at Millview, the person was more mobile and enjoying new experiences. Staff discovered that music and sensory light helped the person to be calm and the provider had purchased a new profiling bed to ensure their comfort at night. A healthcare professional said, "It was a pleasure working with the staff at Millview. They were so supportive and helped [person's name] to settle in brilliantly."
- The service worked to achieve a set of outcomes for people, one of which was "I am healthy and have control over my wellbeing." This meant that every six months there was a review of actions and goals such as attending health checks, doing regular exercise and maintaining the right weight of each person.

Adapting service, design, decoration to meet people's needs

- The home that people lived in was designed to meet their needs and provided a homely environment. People's bedrooms had recently been decorated and new double beds had been provided. People were proud to show us their rooms and each one was personalised with individual items of significance, achievements and family mementos.
- The ground floor was completely accessible for people with physical disabilities and the shower and bathroom facilities had been adapted accordingly.
- There was a variety of communal areas that enabled people to take part in activities alone or with other, such as watching television, listening to music, playing board games or cooking. Improvements had been made to these areas, such as re-decoration and new chairs. The kitchen had been redesigned to encourage people to safely take part in cooking activities.
- At the time of inspection, some work was required to the property due to a subsidence problem. This had been investigated and work carried out to rectify the problem was being completed.

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

- The Mental Capacity Act 2005 (MCA) provides a legal framework for making 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 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 with appropriate legal authority. In care homes, 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, whether any restrictions on people's liberty had been authorised and whether any conditions on such authorisations

were being met.

- People's legal rights were protected because staff followed the principles of the MCA. Where appropriate, staff had completed decision specific mental capacity assessments along with best interest decision considerations. For example, where a person could not consent to having help with their personal care, manage their own medicines or access the community alone, there was a separate decision-making record on each area and we saw evidence that a best interests' meeting had been held with the relevant people in their life.
- All people needed continuous supervision and support outside of their home and the necessary DoLS applications had been made and were kept under review by the registered manager.
- Staff had received training about managing consent issues and the MCA and were kept up to date with information displayed on the notice board.

# 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 our last inspection in August 2016, we rated this key question as 'Good'. At this inspection we found that people were consistently supported and treated with dignity and respect; and involved as partners in their care.

Ensuring people are well treated and supported; equality and diversity

- People were happy and content living at Millview and were treated well by staff. We observed consistently positive interactions between people and staff throughout the inspection. One person told us, "I love living here, I cannot say enough good things about the staff." One member of staff said, "All of us are like one big happy family."
- People were treated with respect and as equals irrespective of disability. One person wanted to talk with us whilst we were in the office. The registered manager introduced us and supported the person to feel completely included in the inspection. The person had communication needs, using signs as well as some speech. All staff showed respect and patience listening carefully, and responding, to what they wanted to say.
- People were supported to maintain their friendships and relationships and to express their sexuality, where they had the capacity to understand and consent.
- People were supported in a kind way, understanding individual concerns. One person was waiting for their relative to arrive to take them out and after a time became anxious. The staff continued to reassure them that they would be able to go out soon and knew how much it meant to the person. The relative later told us, "[Person's name] is very happy here, it's a lovely home."

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

- People were actively supported to be involved in their care and to do as they wanted when at home. One person enjoyed watching the television, and staff constantly helped them to find the channels they wanted. Another person had decided to get up late that day. Other people took part in activities outside of the home. One staff member said, "We are not carers, we are key workers. We can help them manage the choices they make."
- People were supported to communicate their wishes and ideas. Staff used pictures, the iPad and "Beyond words" books to assist people who could not verbalise or read to state their choice about food, clothes and going out. One person had suggested eating out that evening and if the majority wanted this, they would go out as a group. After the inspection, staff also supported people to give their views and feedback about our visit to their home.
- People had a monthly meeting with their key worker where their goals were reviewed. This meant people, or their relative, had a say in their care and support and were involved in a consistent way. One person said, "We are all encouraged in different ways as we are all different."

Respecting and promoting people's privacy, dignity and independence

- People were encouraged to have ambitions. Goals achieved for one person were going to their place of worship, having the opportunity to go on a holiday and accessing public transport, with or without support. Another person told us, "For the first time I don't feel silly for having dreams."
- People benefitted from positive and trusting relationships with staff. Staff told us they found fulfilment in assisting people to live as full a life as possible. One staff member said, "It is all about empowering them to know that they can do anything, they may just require a little assistance." Another said, "We help people here to be the most independent they can be, taking calculated risks and to live a more fulfilled life."
- People were asked respectfully to help with jobs in the house. We heard one staff member ask a person, "Would you come and help me please" when tidying up. One person was being supported to do tasks at home that they had not had the opportunity to learn before. When there was a quiet time, a member of staff asked one person if they wanted to help them make some cakes for everyone, which we saw they enjoyed.
- People's privacy was respected, and people were free to spend time alone or with others as they wished. For example, one person spent time in their own room when we arrived, but later joined in and wanted to speak with us. A relative told us how, when they first visited, they could see that people's dignity was respected. They said, "It's always a very happy and calm place."

# Is the service responsive?

## Our findings

Responsive – this means we looked for evidence that the service met people's needs in a person-centred way.

At our last inspection in August 2016, we rated this key question as 'Good'. At this inspection, people's needs were consistently met through good organisation and delivery, to ensure flexibility, choice and continuity of care.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control

- People were each supported in very specific and individual ways to achieve real change and to develop themselves. One staff member said, "Each person has come so far since moving to this home." One person who had moved to the home was no longer behaving in ways that put themselves at risk. They said they had the, "Right support and access to people who understand me." They told us what it meant for them to be at Millview. They said, "I was in a bad place before I moved here... I had a fresh start... now I am really happy." This person had been supported to give a presentation to the local care association on their story and how they now kept themselves safe and healthy.
- People were consistently enabled to have a meaningful life at home and in the community. One person had experienced positive change through getting involved in a training course which they enjoyed. Staff told us, "[person] will choose to get up at 7 am as they are excited about the training course." The staff had listened, researched and responded to the person's needs and views to enable meaningful occupation of their time. The person told us, "I've made new friends."
- People at Millview each had an individualised plan of their care, drawn up with them and their families and based on an assessment of their needs. Care plans contained positive statements about each person, under the heading, "What people like and admire about me." The registered manager and staff had an excellent knowledge and understanding of each person.
- People had access to information in a format they could understand and were supported to have choice and control over their lives. Some people were helped to make choices with the use of pictures. The service worked in line the Accessible Information Standard (AIS). The AIS is a framework making it a legal requirement for all providers to ensure people with a disability or sensory loss can access and understand information they are given. One staff member also said, "We all know the people we support so well, and we know the individual ways of communicating. It is also listed in their care plans for new staff."
- People's interests and activities had been fully explored and this was captured in a, "My perfect week" record. One person enjoyed bowling, going for coffee, to the cinema and walking. Another person enjoyed swimming and going to the charity shops. Every activity was designed carefully by staff and to suit each person. People were supported to express their spirituality. One relative told us, "[person] is experiencing new things and places which is wonderful."
- The staff at Millview were resourceful in providing different experiences and outings for people. Last year they took the whole group across to France on the ferry and we saw pictures of people enjoying this event. Each month there was a 'co-production' theme in the home. This meant that the related activities and ideas were chosen by the staff and people together. In the summer, "Eating outside" and "Gardening" were chosen. People had enjoyed BBQ's, had planted vegetables and flower pots. In December, the theme was,

"Giving back to the community" when neighbours were invited in and food was collected for the local food bank. One person said, "We all have interests and ideas. They (staff) find ways for us to do things together as a family would."

#### Improving care quality in response to complaints or concerns

- People had access to an easy read and pictorial complaint policy, although so far no one had used it formally. There was a designated time set aside each month by the registered manager, where any family member could come and meet with them to discuss anything
- One relative had complained when a person missed a medical appointment. There was a response made explaining the late cancellation due to unavoidable weather conditions. The registered manager said that as a result they had improved communication with the person's relative.
- Feedback and complaints were viewed as opportunities to learn and improve. When a local day centre had fed back concerns about a person they thought was in pain, staff had met with the day centre to talk through how they were managing this. The learning was that increased communication needed to take place to enable all services to give the right care. The registered manager said, "We view any feedback and complaints as positive, to improve our learning."
- The service had received compliments and thank you messages from people's families. Some were about the way in which the staff had arranged special birthday parties and events One said, "Thank you so very much for giving us all ... a truly special day. It was such a happy day for everyone, a tribute to the efforts and good organisation of the team. Their [people at Millview) wellbeing is at the heart of all you do."

#### End of life care and support

- People's wishes for the end of life had been explored where possible. People's families had been involved and plans were recorded in people's care plans. One person showed their preference to stay at the home, not in hospital and who the important people they needed to have nearby.
- A person who had died had been cared for personally and sensitively. The staff had worked with the hospice to ensure the person was kept comfortable at the end. People were supported to attend the funeral and to remember their friend on the anniversary of their death. The family had written in with messages of thanks and spoke highly of the staff. One said, "I cannot praise highly enough the caring, loving attitude shown.... And the homely atmosphere that they have created for all the residents and their relatives. [Person's name] has been treated with great dignity, understanding and respect."

# 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 our last inspection in August 2016, we rated this key question as 'Good.' At this inspection, we found the service leadership was exceptional and distinctive. Leaders, and the culture they created, drove and improved high-quality, person-centred care.

Planning and promoting person-centred, high-quality care and support; and how the provider understands and acts on duty of candour responsibility

- People had excellent relationships with the registered manager and staff at Millview and feedback about the service was consistently strong and positive. People trusted the manager and were flourishing under the care of the staff team. One person whose life had been turned around told us, "I have the right support and access to people who understand me." A relative said, "We couldn't have asked for a better experience really, they have done and continue to do a brilliant job. I am hugely relieved that we found such a great home."
- The provider had a clear aim and vision to become an outstanding organisation, deliver innovative care and achieve excellent outcomes for the people they supported. This was made visible in their strategy and the "Impact Report 2018, which gave tangible examples of how people's lives were changed. The organisation were focused on their key purpose, "To enable people to lead aspiring lives." Staff at Millview talked about the outcomes the organisation had for people and how they wanted to do more to achieve these for each person. One outcome was, "To go the extra mile for me and others" and staff did this through the very individualised activities they sought out for people. One relative had nominated the whole team at Millview for the provider's star awards for, "Enabling people to have the most aspiring journeys in the past year."
- The provider's core values (aspiring, caring, including, enabling) were consistently demonstrated by staff in their interactions with people and each other. We saw how people were always included in conversations and that everything that happened at home was based around the people who lived there. Staff had been recruited to the service based on their personal qualities and attitude, coming from a variety of different backgrounds. One staff member said, "I knew I wanted to be a carer and I love the job. It's a great company to work for."
- The provider's focus on quality and impact and their methodology of care was working to raise and maintain standards in a consistent way. Despite a change in the registered manager at Millview in the last year, and the fact that the registered manager had oversight at two services, the provider's leadership systems and framework of support was such that the service remained consistently good and was improving in all key areas.
- The registered manager's passion and enthusiasm for providing high quality care was embedded in the culture of the service and staff were constantly driven towards improvement and excellence. The staff talked about their training and learning and there was a willingness to continually update themselves with best practice. The registered manager had recently attended a specialist conference about end of life care for people with learning difficulties and had booked all their staff onto health action plan training courses

organised by mental health services

- Staff told us how positive they felt to be working for a distinctive service and organisation. They were highly motivated and proud of their work. One staff member told us, "You know you are supported by the manager and the management higher up as well. All of the managers are very supportive, and it makes you feel like you can express your opinion and want to do things well." In a recent independently facilitated staff survey, and benchmarked with similar services, the results were said to be "Exceptionally good in a social care context."
- The registered manager was clear about their role with to ensure duty of candour and its role in the development of high-quality services. They had improved communication with relatives through their monthly drop in meetings. The service also produced a monthly newsletter which all relatives received. One relative told us, "I really appreciate the way they update us with news...and let us know any minor issues or concerns, no matter how small or insignificant, so we still feel very much involved in [person's] life."

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

- People benefitted from a truly person centred organisation which pro-actively sought their views and promoted, inclusion and openness in distinctive ways. One member of the house had been chosen to attend the provider's "Pro-active Committee", where people came together to influence, share ideas and plan special events that everyone would enjoy. The person who represented Millview at these meetings expressed to us how proud they were to have this role. Their relative had sent feedback which was about the changes they had seen since the person had been part of the group. They said this role had supported their relative, "To be independent and have a purpose and opportunity to grow as a person... The difference in him has been simply transformational."
- People were regarded as partners, not just in words but through specific actions. For example, people were actively involved in peer reviewing the quality and standard of care across different services. A pictorial and easy read checklist was used to check the quality of homes, for example, whether the environment was clean or needed any repairs, whether staff were caring, and that people were getting attention. Any views were taken seriously and were valued in the organisation so that changes were made. At Millview, a change that was made to encourage people living there to open the front door themselves (and check any identification).
- People at Millview were actively encouraged to make their views and feelings known at the service. The registered manager told us how they invited people living at the home to help them decide about new staff to employ. "Applicants are introduced to the people we support, we can observe interactions and ask people whether they would like the person to support them." There were monthly house meetings where everyone took part. The topics discussed were outings and special events. Every year, people were supported by an independent person to complete an easy read survey called, "All about my ideas."
- The provider had won the People's Award in June 2018, from the national Learning Disability and Autism Awards, for the way in which people they supported were enabled to take control of their lives and work together.
- Staff were involved through their regular meetings and written team briefings. The provider also undertook an annual staff engagement survey and the results of which were used in the planning for the following year. One staff member told us, "We can express our opinions, if we have new ideas or issues with something that is happening."

Continuous learning and improving care

- The registered manager of Millview had created a culture of improvement and set a high standard of supportive care. Quality assurance processes were robust and action plans to improve the service were



prioritised and completed. The registered manager said, "We can always get better and achieve new goals. We keep learning and trying new things." Improvements they wanted to make were to enable people to be more involved with their own health plan and their health appointments. They also wanted to make and use videos in their communication with people and to attract new staff. Following a comprehensive provider audit, in December 2018, the service had been praised by a senior manager for the improvements made since the registered manager was in post.

- The organisation demonstrated their desire and ability to develop further. They had worked with statutory and private agencies to secure new funding for services and homes that would support more people to live independently, meeting national standards. In the last year, they also extended their services to support people with anxiety and depression. A new group had been launched with specialist support in place for people to learn coping strategies and build their resilience. This work had been informed by people who used their services in a new "Active Wellbeing" group.
- Staff and their commitment to their work was appreciated and rewarded. One staff member told us, "We get feedback through team meetings and the management will often take this opportunity to say thanks to all the staff, and they highlight when someone has done some particularly good work." The provider had an employee of the month scheme where staff could be nominated to receive an award for hard work or something extra they had contributed.

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

- The provider and management of the home have ensured on-going compliance with care regulations over a sustained period. There was accountability within the service and good management oversight. Monthly checks demonstrated a good awareness by all staff of their responsibilities on safety, cleanliness and supportive care.
- Staff were encouraged to take responsibility for service governance. Some staff members took a lead role, for example, with infection control, or fire safety or health and safety. These staff members ensured audits were being completed and that all staff had full knowledge of what they must do. Information was well documented and kept up to date by each lead staff member. Some people were given roles in the home. For example, one person was the eco representative and helped to sort out and encourage recycling.
- Service performance and risk management was reviewed. There were annual audits taken on keeping people safe that took a holistic approach. For example, they looked at how people were spoken to and that language and activities were personal and not institutional. These showed that the team was briefed on any incidents that had happened and that any learning was shared.
- The registered manager was aware of their responsibilities about reporting significant events to the Care Quality Commission and other outside agencies and ensured these were done in a timely way.

Working in partnership with others

- People benefitted from the good relationships that were established in the local community. People were known and welcomed when they went to the local shops or visited the village pub. At Christmas a local baker had donated cakes to the service. Staff worked closely with the specialist community team for people with learning difficulties, adult social care and local day centres to ensure that people received the support they needed.
- The provider worked in partnership with other agencies and organisations to follow current best practice and reduce health inequalities for people. The service took an active part in the council led, "Valuing People" meetings, where service developments for people with learning disabilities were discussed and proposed. The registered manager kept themselves up to date and were informed by being an active member of the Surrey Care Association and the registered managers forum. The provider's strategy referenced their ongoing work with health and social care commissioners to improve services and to reach outstanding

standards of support and care.