

Sense

Otterhayes

Inspection report

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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Good ●

Summary of findings

Overall summary

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

Otterhayes provides accommodation and personal care for a maximum of five people living with learning disabilities and/or autism in a property known as Hayes House. At the time of the inspection there were five people living in Hayes House. This service also provides a domiciliary care agency service and provides support to a further 14 people living in seven supported living properties, with the aim that they can live as independently as possible. All 14 people living in the supported living properties were receiving elements of personal care.

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

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.

The service was able to demonstrate how they were meeting the underpinning principles of Right support, right care, right culture.

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

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, "The staff are lovely. I feel safe with them." Other people were not able to comment on their safety. However, their body language while interacting with staff was relaxed and positive, which indicated they felt safe.

A relative commented, "[Relative] is receiving more and improved support. She is enjoying a more fruitful life with more exposure to the outside world. This has its risks, particularly with somebody like [relative] who is very trusting, but I feel much more confident that these risks are being well managed to [relative's] benefit."

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. Infection control measures were in place.

Care files were 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.

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. Comments included, "I like living here, I am happy with the staff." And "I love living here as the staff are very helpful and caring, they make me feel special. They help me with my house jobs and help me if I ever have any problems." A relative commented, "[Relative] appears very happy and seems happy with the staff that look after her."

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 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 Otterhayes. For example, people were constantly encouraged to lead rich and meaningful lives.

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.

The management team 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 respected, supported and valued by senior staff which supported a positive and improvement-driven culture. A staff member commented, "Otterhayes has come on leaps and bounds. [Operations manager] has been amazing. The day the gates were opened, everything has changed for the better. I feel well supported. Lots more community involvement. The jubilee party was great, local people came, spoke to the guys, they had never known what Otterhayes was. People have progressed, for example, reduction in medication and discharge from Intensive Assessment and Treatment team. There is a calmer environment. I love coming to work."

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 31 August 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. We also undertook this inspection to assess that the service is applying the principles of Right support right care right culture.

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 safe findings below.

Good ●

Is the service caring?

The service was caring.

Details are in our safe findings below.

Good ●

Is the service responsive?

The service was responsive.

Details are in our safe findings below.

Good ●

Is the service well-led?

The service was well-led.

Details are in our safe findings below.

Good ●

Otterhayes

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 Care Act 2014.

As part of this inspection we looked at the infection control and prevention measures in place. This was conducted so we can understand the preparedness of the service in preventing or managing an infection outbreak, and to identify good practice we can share with other services.

Inspection team

The inspection was carried out by one inspector.

Service and service type

Otterhayes provides accommodation and personal care for a maximum of five people living with learning disabilities and/or autism in a property known as Hayes House. At the time of the inspection there were five people living in Hayes House. People in care homes receive accommodation and nursing or personal care as single package under one contractual agreement. CQC regulates both the premises and the care provided, and both were looked at during this inspection.

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

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 not a registered manager in post. The new manager had commenced their role during our inspection and would be registering with the Commission.

Notice of inspection

This inspection was announced.

We gave the service 48 hours' notice of the inspection. This was because the service is small, and people are often out, and we wanted to be sure there would be people at home to speak with us.

What we did before the inspection

We reviewed information we had received about the service since the last inspection. We sought feedback from the local authority and professionals who work with the service. We used the information the provider sent us in the provider information return (PIR). This is information providers are required to send us annually with key information about their service, what they do well, and improvements they plan to make. We used all this information to plan our inspection.

During the inspection

We spoke with six people who used the service about their experience of the care provided. We spoke with ten members of staff including the operations manager.

We used the Short Observational Framework for Inspection (SOFI). SOFI is a way of observing care to help us understand the experience of people who could not talk with us.

We reviewed a range of records. This included four people's care records and four medication records. We looked at three staff files in relation to recruitment and staff supervision. A variety of records relating to the management of the service, including policies and procedures were reviewed.

After the inspection

After our visit we sought feedback from relatives, staff and health and social care professionals to obtain their views of the service provided to people. We received feedback from six relatives and three health and social care professionals. We continued to seek clarification from the provider to validate evidence found. We provided initial feedback to the service on 26 July 2022.

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 for 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. One person commented, "The staff are lovely. I feel safe with them."
- Relatives commented, "[Relative] is receiving more and improved support. She is enjoying a more fruitful life with more exposure to the outside world. This has its risks, particularly with somebody like [relative] who is very trusting, but I feel much more confident that these risks are being well managed to [relative's] benefit." And "I am pleased to say that transition from Otterhayes Trust to Sense Otterhayes seems to have gone well. [Relative] seems to have a good relationship with their staff. I am very relieved how things have gone; I was fearing that [relative] would have trouble during the transition."
- Other people were not able to comment on their safety. However, their body language while interacting with staff was relaxed and positive, which indicated they felt safe.
- 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 bowling, photography, cooking and art and drama therapy, if they chose to.
- 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.
- 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. The Intensive Assessment and Treatment Team (IATT) supported the development of approaches for working with people experiencing high levels of distress. IATT is an external agency offering specialist support for people with a learning disability, their families and carers.
- Staff managed the safety of the living environment and equipment in it well through checks and action to minimise risk.

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. 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 operations manager confirmed they had experienced difficulties with staffing, largely due to recruitment difficulties. They were working to address this and provide a safe service.
- People's care needs were met. However, people's assessed one to one hours needed to be revisited in line with their care and support needs to increase their ability to access more individualised support, including participating in activities of their choosing. For example, a person's ability to attend a club one evening per week. The service was working closely with the local authority and were waiting for people to have their reviews around their funding in line with their identified care and support needs.
- Following our inspection, the operations manager informed us that the reviews rated as 'red' (priority) were now booked.
- The provider was actively recruiting for staff on an ongoing process via various advertising sources. The service had a dedicated recruitment team and new staff were now in the 'pipeline' to commence employment once all appropriate checks had been completed. The management team attended weekly meetings with the recruitment team. At these meetings, it gave them the opportunity to chase where new staff were and how recruitment was progressing.
- We asked how unforeseen shortfalls in staffing arrangements due to sickness were managed. The operations manager explained that regular staff undertook extra duties in order to meet people's needs. Where necessary, consistent agency staff were used, who were familiar to people and their individual needs.
- 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
- 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

- We were assured that the provider was using PPE effectively and safely.
- We were assured that the provider was preventing visitors from catching and spreading infections.
- We were assured that the provider was meeting shielding and social distancing rules.
- We were assured that the provider was admitting people safely to the service.
- We were assured that the provider was accessing testing for people using the service and staff.
- We were assured that the provider was promoting safety through the layout and hygiene practices of the premises.
- We were assured that the provider was making sure infection outbreaks can be effectively prevented or managed.
- We were assured that the provider's infection prevention and control policy was up to date.

Visiting in care homes

The provider's approach to visiting was in line with government guidance. Staff ensured visitors followed the government's protocols to minimise the risk of infection and or spread of COVID-19.

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 care and support plans that were personalised, holistic, strengths-based and reflected their needs and aspirations, included 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 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.
- 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.
- People benefitted from reasonable adjustments to their care to meet their needs, and their human rights were respected. This was because staff put their learning into practice.
- 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, "[Operations manager] has been fantastic. I have regular supervisions which are supportive."
- 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 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.

- Mealtimes were flexible to meet people's needs and to avoid them rushing meals.
- People with complex needs received support to eat and drink in a way that met their personal preferences as far as possible.

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

- People were supported to attend annual health checks, screening and primary care services.
- 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.

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

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

People can only be deprived of their liberty to receive care and treatment when this is in their best interests and legally authorised under the MCA.

In care homes, and some hospitals, this is usually through MCA application procedures called the Deprivation of Liberty Safeguards (DoLS). 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.
- Staff knew about people's capacity to make decisions through verbal or non-verbal means and this was well documented.
- 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.

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

- People personalised their rooms and were included in decisions relating to the interior decoration and design of their home
- A redecoration plan was in place. The redecoration of Hayes House had been delayed due to how this could be completed to ensure people's safety. A meeting was held on 18 July 2022 with Sense head of estates to address logistical matters and firm up plans to start work in Hayes House. Work was scheduled to start in September 2022.

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

- Staff saw people as their equal and created a warm and inclusive atmosphere.
- People received kind and compassionate care from staff who used positive, respectful language which people understood and responded well to. Comments included, "I like living here, I am happy with the staff." And "I love living here as the staff are very helpful and caring, they make me feel special. They help me with my house jobs and help me if I ever have any problems." A relative commented, "[Relative] appears very happy and seems happy with the staff that look after her."
- Staff were patient and used appropriate styles of interaction with people.
- Staff were calm, focused and attentive to people's emotions and support needs such as sensory sensitivities.
- Staff were mindful of individual's sensory perception and processing difficulties.
- People felt valued by staff who showed genuine interest in their well-being and quality of life.
- Staff members showed warmth and respect when interacting with people.

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

- People were given time to listen, process information and respond to staff and other professionals.
- Staff supported people to express their views using their preferred method of communication.
- Staff took the time to understand people's individual communication styles and develop a rapport with them.
- People were enabled to make choices for themselves and staff ensured they had the information they needed.
- Staff respected people's choices and wherever possible, accommodated their wishes, including those relevant to protected characteristics. For example, two people attended a 'supported loving' conference in London which was about relationships and belonging. On their return, they developed a newsletter of their experience. One comment in the newsletter stated, 'I felt really confident and it gave me an idea to help people at Otterhayes with lots of information.'
- People, and those important to them, took part in making decisions and planning of their care and risk assessments
- Staff supported people to maintain links with those that are important to them.

Respecting and promoting people's privacy, dignity and independence

- People had the opportunity to try new experiences, develop new skills and gain independence.
- Staff routinely sought paid and voluntary work, leisure activities and widening of social circles. A professional commented, "I have worked very closely with the manager from Sense throughout the months,

supporting clients to find paid employment. When employment was found, [manager] supported her clients and me throughout the employment procedure with completing paperwork for and arranged transport when required.

- Staff knew when people needed their space and privacy and respected this.

- For people living in supported living services, the provider followed best practice standards which ensured they received privacy, dignity, choice and independence in their tenancy.

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 Good. This meant people's needs were met through good organisation and delivery.

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

- Staff supported people through recognised models of care and treatment for people with a learning disability or autistic people.
- Support focused on people's quality of life outcomes and people's outcomes were regularly monitored and adapted as a person went through their life.
- Staff provided people with personalised, proactive and co-ordinated support in line with their communication plans, sensory assessment and support plans
- Staff used person-centred planning tools and approaches to discuss and plan with people how to reach their goals and aspirations.
- Staff discussed ways of ensuring people's goals were meaningful and spent time with people understanding how they could be achieved.
- Preferences (i.e. gender of staff) were identified and appropriate staff were available to support people.
- People were supported to understand their rights and explore meaningful relationships.
- People were supported with their sexual orientation, religious, ethnic and gender identity without feeling discriminated against.
- Staff offered choices tailored to individual people using a communication method appropriate to that person.
- Staff spoke knowledgeably about tailoring the level of support to individual's needs.
- The service met the needs of people using the service, including those with needs related to protected characteristics.

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.
- People had individual communication plans that detailed effective and preferred methods of communication, including the approach to use for different situations.
- Staff had good awareness, skills and understanding of individual communication needs, they knew how to facilitate communication and when people were trying to tell them something.

- Staff worked closely with health and social care professionals and ensured people were assessed to see if they would benefit from the use of non-verbal communication aids.
- There was individualised support such as tailored visual schedules to support people's understanding.
- Staff were trained and skilled in using personalised communication systems.

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

- People were encouraged and motivated by staff to reach their goals and aspirations.
- People were supported to participate in their chosen social and leisure interests on a regular basis.
- Staff provided person-centred support with self-care and everyday living skills to people.
- Staff ensured adjustments were made so that people could participate in activities they wanted to.
- People were supported by staff to try new things and to develop their skills.
- Staff helped people to have freedom of choice and control over what they did.
- Staff enabled people to broaden their horizons and develop new interests and friends. For example, a Jubilee party took place, where people living near Otterhayes were invited. The day was very successful, and people were able to build relationships with other people living in the local community.

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. Relatives were also made aware of the complaints system. The complaints procedure set out the process which would be followed by the provider and included contact details of the provider and the Care Quality Commission. This ensured people were given enough information if they felt they needed to raise a concern or complaint.
- The service had not received any formal complaints. However, the management team 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

- People were supported at the end of their life. The management team said, in the event of this type of support being needed, they worked closely with the community nursing team; GPs and family to ensure people's needs and wishes were met in a timely way.

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 Good. This meant the service was consistently managed and well-led. Leaders and the culture they created promoted high-quality, person-centred care.

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

- The management team 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.
- Management were visible in the service, approachable and took a genuine interest in what people, staff, family, advocates and other professionals had to say.
- The management team were alert to the culture within the service and spent time with staff, people and family discussing behaviours and values.
- Managers worked directly with people and led by example.
- Staff felt respected, supported and valued by senior staff which supported a positive and improvement-driven culture. A staff member commented, "Otterhayes has come on leaps and bounds. [Operations manager] has been amazing. The day the gates were opened, everything has changed for the better. I feel well supported. Lots more community involvement. The jubilee party was great, local people came, spoke to the guys, they had never known what Otterhayes was. People have progressed, for example, reduction in medication and discharge from Intensive Assessment and Treatment team. There is a calmer environment. I love coming to work."
- Managers promoted equality and diversity in all aspects of the running of the service.
- Staff felt able to raise concerns with managers without fear of what might happen as a result.
- Managers set a culture that valued reflection, learning and improvement and they were receptive to challenge and welcomed fresh perspectives.
- Management and staff put people's needs and wishes at the heart of everything they did.
- 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 Otterhayes. For example, people were constantly encouraged to lead rich and meaningful lives.

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

- The service apologised to people, and those important to them, when things went wrong.
- Staff gave honest information and suitable support, and applied duty of candour where appropriate.

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

regulatory requirements

- The management team had the skills, knowledge and experience to perform their role and a clear understanding of people's needs and oversight of the services they managed.
- Staff knew and understood the provider's vision and values and how to apply them in the work of their team.
- Systems were in place to monitor the quality and safety of the service.
- Governance processes were effective and helped to hold staff to account, keep people safe, protect people's rights and provide good quality care and support.
- Staff were committed to reviewing people's care and support on an ongoing basis as people's needs and wishes changed over time.
- The provider invested in staff by providing them with quality training to meet the needs of all individuals using the service.
- The management team understood and demonstrated compliance with regulatory and legislative requirements.
- Staff were able to explain their role in respect of individual people without having to refer to documentation.
- Staff delivered good quality support consistently.

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

- People, and those important to them, worked with managers and staff to develop and improve the service.
- Staff confirmed they were kept up to date with things affecting the overall service via team meetings and conversations on an on-going basis. Additional meetings took place on a regular basis as part of the service's handover system to ensure consistency of care and support.
- People's views and suggestions were taken into account to improve the service. Resident meetings took place on a regular basis. The meetings discussed specific questions about the standard of the service and the support it gave people.
- The management team and their staff team were also in regular contact with families, via phone calls, technologies and visits. The service recognised the importance of ever improving the service to meet people's individual needs. This included the gathering of people's views to improve the quality and safety of the service and the care being provided.
- Otterhayes had a keyworker system in place, which enabled people to discuss their care and support needs and experience of the care and support received on an ongoing basis with a particular member of staff.
- The service was in the process of compiling surveys to be sent out to people using the service, relatives, staff and health and social care professionals as part of their ongoing quality monitoring and the development of Otterhayes.

Continuous learning and improving care

- The provider kept up to date with national policy to inform improvements to the service.
- The provider invested sufficiently in the service, embracing change and delivering improvements.
- The provider had a clear vision for the direction of the service which demonstrated ambition and a desire for people to achieve the best outcomes possible.

Working in partnership with others

- Staff engaged in local and national quality improvement activities.
- The service had worked proactively with the local authority Quality Assurance and Improvement Team (QAIT) to ensure robust systems were in place to ensure people received appropriate person-centred care and support. A professional commented, "Really positive how the service worked with QAIT to make improvements and changes, which are now implemented."

- The provider engaged in local forums to work with other organisations to improve care and support for people using the service and the wider system.
- The provider was involved in provider engagement groups organised by the Local Authority which aimed to help improve care services in the local area.
- The service worked well in partnership with advocacy organisations and other health and social care organisations, which helped to give people using the service a voice and improve their wellbeing.