

Stepping-Stones-Services Ltd

Stepping Stones Services

Inspection report

Broadfield House 91 Manchester Road Rochdale Lancashire OL11 4JG

Tel: 01706759993

Date of inspection visit: 03 May 2018

Date of publication: 11 July 2018

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?	Outstanding 🌣
Is the service well-led?	Good

Summary of findings

Overall summary

Stepping Stones is a domiciliary care service that also provides supported living accommodation. The office is situated in Rochdale. The service is registered to provide personal care and support to adults. At the time of our inspection care was being provided to 28 people. 10 people lived in supported living and 18 people were receiving support in their own homes.

The service was last inspected in March 2016. The service did not have a registered manager in place at that time. The service have since recruited a registered manager.

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

The registered manager and staff understood their role and responsibilities to keep people safe from harm. Risks were assessed and plans put in place to keep people safe. Checks were carried out prior to staff being employed to assess their suitability to support vulnerable people.

At our last inspection we rated the service good. At this inspection we found the evidence continued to support the rating of good and there was no evidence or information from our inspection and ongoing monitoring that demonstrated serious risks or concerns. This inspection report is written in a shorter format because our overall rating of the service has not changed since our last inspection. We found that leadership at the service had improved and was now good. We found that the responsiveness of the service had improved and was now outstanding.

We observed excellent relationships between people and observed the senior management team and staff interacting with people in a caring, good humoured and friendly manner. Management and staff demonstrated exceptional insight and understanding of people's personal preferences and needs. People appeared happy and relaxed and we overheard much laughter and observed meaningful interactions during our visit.

People's needs were assessed before using the service and on an ongoing basis to reflect changes in their needs. Clear and well thought out arrangements were in place for people who were moving into the supported living service which helped to significantly reduce possible anxiety about this change.

There were enough staff so people could take part in the activities they wished and be supported in meeting their individual needs. People had access to activities that were important and relevant to them, both inside and outside their home. They were protected from social isolation because of the exceptional support and exhaustive range of opportunities offered by staff.

There were systems and processes in place to protect people from harm. People had their medicines administered safely. Staff had a good understanding about the signs of abuse and were aware of what to do if they suspected abuse was taking place.

The service had developed positive working relationships with health and social care professionals which led to joint working to expand people's communication skills.

A robust system for staff recruitment, induction and training was in place. This enabled the staff to support people effectively and safely.

Effective quality assurance audits were in place to monitor the service. The service regularly sought feedback from the people who used the service and their relatives. Staff had regular supervisions and were invited to team meetings.

There was a strong organisational commitment and effective action towards ensuring that there was equality and inclusion across the workforce. There was high levels of satisfaction across all staff and staff told us they were listened to by the managers.

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 remained Good.	
Is the service effective?	Good •
The service remained Good.	
Is the service caring?	Good •
The service remained Good.	
Is the service responsive?	Outstanding 🏠
The service had improved to Outstanding.	
People's care was based around their individual goals and their specific personal needs and aspirations. People with complex needs and behaviours that may challenge, were being empowered and enabled to feel a part of their community, and to achieve their goals and more.	
Feedback from relatives was extremely positive about the quality of life that their family members were experiencing.	
Support was completely tailored to each individual, and staff understood the best way to support each person with their complex needs.	
End of life care was delivered with exceptional sensitivity and consideration to the person's needs.	
Is the service well-led?	Good •
The service had improved to Good.	
There was a registered manager in place.	
There were systems in place to monitor the quality of care and service provision.	
Policies, procedures and other relevant documents were reviewed regularly to help ensure staff had up to date	

information.

Relatives and staff we spoke with told us they felt supported and

could approach managers when they wished.



Stepping Stones Services

Detailed findings

Background to this inspection

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

This inspection took place on 3 May 2018 and was announced. The provider was given 48 hours' notice because we wanted to make sure the registered manager and staff would be available to speak with us. The inspection was carried out by one adult social care inspector.

Before the inspection we looked at previous inspection reports and notifications received from the provider. A notification is information about important events which the provider is required to tell us about by law. We reviewed the Provider Information Record (PIR) before the inspection. This is a form that asks the provider to give some key information about the service, this tells us what the service does well and the improvements they plan to make. This ensured we were addressing any areas of concern. We also spoke to the local authority and the local Healthwatch, they had no negative comments about the service.

We spoke with seven people who used the service, two relatives, six care staff, the registered manager and the managing director. We also contacted ten health and social care professionals for their view of the service. We looked at three people's care records, three staff files and ten medicine administration records. We reviewed a range of records relating to the management of the service. We looked at a variety of policies and procedures including safeguarding, complaints, mental capacity and deprivation of liberty, recruitment, accidents and incidents and equality and diversity.



Is the service safe?

Our findings

The people we spoke with told us they felt safe. One person said, "Yes, I feel safe." Another person told us, "I do feel safe knowing that people are looking out for me and knowing I have people to turn to." We saw in people's care records and staff told us, that some people using the service had faced significant challenges and events in their lives. Staff were very sensitive to this and stressed the importance of ensuring people felt safe with the care provided.

People were kept safe from the risk of abuse because staff knew about the different types of abuse and, what action to take if abuse was suspected alleged or witnessed. Staff were able to describe the action they would take if they thought people were at risk of abuse, or being abused. They were also able to give us examples of the sort of things that may give rise to concerns of abuse. There was a safeguarding procedure for staff to follow with contact information for the local authority safeguarding team. Staff we spoke with were able to describe 'whistleblowing' and knew how to alert senior staff about any poor care practice.

There were risk assessments in place for people, which guided staff on how to mitigate risks to people. This included risks to people's health such as the risks relating to behaviour and risks to relating to physical disability and mobility. We saw that detailed risk assessments were in place for people's individual health needs, such as diabetes or other specific health conditions. The registered manager and the managing director told us how they mitigated risks associated with people's health needs. The managing director informed us they would review risks assessments and care plans in respect of these health needs. A professional told us, "In terms of safety and risk, they are knowledgeable individuals who are responsive to advice."

People's own environments had also been risk assessed with guidance in place so that staff could deliver support in people's own homes in the safest way.

People told us staff arrived on time and no one we spoke with had experienced a missed visit. The provider had systems in place to monitor care calls.

Staff understood infection control procedures and told us how they protect people from the risk of infection.

The provider had systems in place to ensure staff were suitable to work with vulnerable people. Checks carried out included employment references and disclosure and barring checks (DBS). DBS checks enable employers to make safer recruitment decisions and prevent unsuitable people from working with vulnerable people.

Some people required assistance to take prescribed medicines. Where this was the case guidance for staff on what to do to keep people safe was in place and easy to use. Medication administration records were maintained to record that people received their medicines as prescribed. Staff administering medicines had been trained to do so. The provider had a clear system in place to respond to any errors with the

administration of medicines and the risks associated with the management of medicines.



Is the service effective?

Our findings

We saw people's needs were met. People received care and support from familiar, skilled, consistent staff, who arrived on time. One person told us, "I like my staff, I know them well." People joining the service had their needs assessed thoroughly. One professional told us, The service went "above and beyond" to make the transition phase as best as it could possibly be."

People's care records documented how their needs were met. This included when and how care was provided. Individual plans were in place and specialist input from other professionals had been obtained when required. Staff received regular monitoring by senior staff to ensure they were competent. Any issues identified were addressed in a positive manner with staff being given additional support and training to promote improvement. A professional complimented the service, they said, "Stepping Stones is the main provider we refer to for an assessment. In particular given the complex nature in terms of risk with some of the individuals, they have responded significantly well as a whole team, resulting in the individual not being placed in hospital. Which in turn is very supportive and effective for the transformation of the care agenda."

We viewed the training records for staff which confirmed staff received training on a range of subjects including core areas such as keeping people safe from harm, first aid, medicine administration, infection control and equality and diversity. Staff said they had received the training required to carry out their roles effectively. Staff were supported by the registered manager to work towards health and social care diploma qualifications. These are work based and assess a staff member's competence to carry out care and support tasks, along with the knowledge required to underpin their performance. A professional told us, "The staff have been trained to a high standard they have a genuine interest and approach to development of the service and in particular the individuals they support."

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. The application procedures for this in care homes and hospitals are called the Deprivation of Liberty Safeguards (DoLS).

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 were being met. We found that Stepping Stones were meeting these obligations.

People's care needs were assessed prior to starting with the service so that the staff could be sure they were able to deliver the care required. They also approached health care professionals for further information at this stage if needed, and developed a plan of care from the information gathered. The initial assessment

included information about people's mobility and care needs, as well as equipment they may require. The PIR sent to us from the provider outlined the importance for supporting people with their diverse needs, and ensuring the service maintained equality for people, for example in respect of their religious needs. Where relevant, this was included within initial assessments.

New staff completed an induction programme to ensure they were competent in their skills and knowledge before supporting people. One member of staff told us, "The support has been excellent." New staff also shadowed experienced staff before working unsupervised to ensure they were confident in their roles and responsibilities.

People's care records identified where they required support with eating and drinking. Care plans included specific dietary requirements and how these were met. Where there were risks associated with eating and drinking we saw that guidance from speech and language therapists (SALT) had been sought and was being followed.

People and relatives told us staff supported them to access health and social care professionals when needed. One relative told us, "The team have made referrals to various clinics and have been very supportive at appointments if I can't get there." A professional commented, "I have always found Stepping Stones to be professional and very supportive of me with regards to attendance at meetings, provision of requested information and the excellent level of care and support they provide to an extremely complex client. I hold the support team and management in very high regard and would not hesitate to recommend them to other professionals who may require their specialist support."

The service met the requirements of the Accessible Information Standard. The Accessible Information Standard (AIS) is a law which aims to make sure people with a disability or sensory loss are given information they can understand, and the communication support they need. The service had considered ways to make sure people had access to the information they needed in a way they could understand it, to comply with AIS. People's assessments made reference to people's communication needs, this information had been included in people's support plans where a need had been identified, and a communication passport put into place. Communication styles, such as gestures, behaviour and facial expressions were recorded which indicated people's mood or well-being, for example if they were in pain, hungry or anxious. This enabled staff to take the appropriate action such as providing pain relief. A person using the service had completed an easy read format of standards the Care Quality Commission (CQC) look for when inspecting services and explained how Stepping Stones are working to achieve this. This meant that people who may not have been able to access this information had the opportunity to learn how the service are working to achieve their goals.



Is the service caring?

Our findings

People we spoke with told us staff were kind, caring, professional and knew them well. Staff spoke about people with genuine empathy and compassion and demonstrated a commitment to ensure they received good care and, were helped to overcome any difficulties they might have.

The registered manager and staff worked to ensure people were involved in planning their care and support. The service provided to people was based on their individual needs. Staff told us they took people's wishes and needs into account and tried to be as flexible as possible in accommodating any changes to visit times.

The person and relatives we spoke with reflected that they were involved in the care, for example, one relative explained that they met with staff regularly to go through how their family member was. Another told us, "[Staff] always keep me updated" Staff used communication books in order so family or visitors to people could leave messages for them if needed, and so care staff could leave messages for people. We saw from the care plans that family members had been involved and care was discussed with relevant people.

People were treated with dignity and respect. One relative told us, "They (care staff) are really very lovely. Not only with [person] but with the whole family". Staff understood the importance of treating people with dignity and respect. One member of staff told us, "I always treat people with respect; it's what I would expect for my loved ones if they needed help." Staff spoke with and about people in a respectful manner. During the inspection we observed kind interactions, where staff spoke with people, taking time to listen and reassure. Staff showed empathy and understanding of people's concerns.

People were supported to be independent. One person told us, "I have my own front door key and go out to the supermarket on my own. Staff support me with my weekly budget and to fill planners so I can do activities. I have set days for cleaning and the staff help me do some cooking, they are brilliant, I can't fault them. They are so patient and kind."

Staff we spoke with described how the caring culture of the service was supported by the provider and the registered manager. One staff member said, "The caring culture really does come from everyone, the managers are all really caring and this is what they expect of everyone. It goes without saying really."

Throughout our inspection we were struck by the caring and compassionate approach of staff. Staff morale was positive and they were enthusiastic about the service they provided. Staff we spoke with told us they would be happy for someone they loved to be cared for by Stepping Stones. A professional told us, "When I went to visit my client in his new placement I found his two support workers to be caring patient and kind. They treated my client as an individual human being and not as a person who 'has autism'".

Stepping Stones recruited staff based on their values rather than their experience. The practical elements of the support worker role were covered during the induction period and staff were assessed as to their suitability during a probationary period to ensure that they were able to meet the high expectations of the service. This meant that the staff were driven to provide a service by their caring natures which was evident

to us during the inspection.

12 Stepping Stones Services Inspection report 11 July 2018

Is the service responsive?

Our findings

We found examples of outstanding practice in person centred care. The service was flexible and responsive to people's individual needs and preferences, and found innovative and creative ways to enable people to live as full a life as possible. Stepping Stones had recently implemented a new style of care plan. This created a better picture of what person-centred care is for the individual and explore new ways of capturing every detail, no matter how small, that mean so much to people. We saw that care plans were reviewed and updated regularly. One person had completed their own care plan, detailing their background, skills and interests, their plan said, "I have the skill of drawing from another picture without tracing." The person also explained their likes, dislikes, communication and critical needs in their own words. The person stated, "I can walk, talk, communicate, make my own decisions and think for myself. I can swim, play board games, watch movies and throw a bowling ball. I enjoy cooking and am able to make good meals which I also bulk cook to freeze." The service provided the opportunity for people to write their own care plans which showed that they had an outstanding commitment to person centred practice. We looked at one care plan that had been written in a person's first language and then translated into English so speakers of both languages could understand the text.

People who wished to move into the service had their needs assessed to ensure the service was able to meet their needs and expectations. The registered manager and care staff were knowledgeable about people's needs. Each person had a care plan that was tailored to meet their individual needs. Highly person centred care plans contained information on a range of aspects of people's support needs including mobility, communication, nutrition and hydration and health.

We looked whether the service was working to National Institute for Health and Care Excellence (NICE) guidance entitled "People's experience in adult social care services: improving the experience of care and support for people using adult social care services." The guideline covers social care received at home, residential care and community care and aims to support people to make decisions about their care and to encourage providers to improve the quality of their services. NICE recommendations include the recognition each service user is an individual and that each person's self-defined strengths, preferences, aspirations and needs are the basis on which to provide care and support to help them live an independent life. We found that the service excelled in implementing these values by including details about people's life history, interests and passions and goals for the future in their care plans.

The provider offered bespoke care and support to people with diverse needs and individual requirements. We saw examples of ongoing and consistently outstanding care in relation to responding to people's needs. People praised the manner in which staff involved them in care planning. They felt fully consulted, listened to, and reassured that their contribution to decision making was welcomed and valued. The service also worked with relatives to gather a full view of the support required. One relative said, "I feel such a sense of relief and security knowing that there is a service out there that are willing to give [relative] a chance and have taken the time to schedule a meeting with me to discuss their support needs and devise an action plan. I cannot thank them enough."

Following the care plans enabled staff to adopt a person-centred approach to their work, and to support people to live full, vibrant lives if they wanted to. Staff also had to ensure that due to some people's conditions, their care plans were followed with great accuracy. Staff had an excellent understanding of all the needs of the people they were supporting, and clearly had a drive and passion to help people achieve as much as they could. One staff member said, "We plan activities with full participation of the people we support, they are at the centre of everything we do." We saw written feedback from one professional which said, "Before this person was supported by Stepping Stones they had very little activity in their life. It is wonderful to see they are engaging with so many different activities despite the barriers they face. Stepping Stones are not afraid of a challenge and have gone above and beyond in their efforts to ensure people lead a full life and explore new ventures."

People received care that promoted their health and wellbeing, and told us that staff had an excellent understanding of their social and cultural diversity, values and beliefs that influenced their decisions on how they received their care. At the last inspection, we saw that one person required care to be delivered in a culturally appropriate way, by care staff of a specific gender, ethnicity and faith. The service had specifically recruited appropriate staff of the same faith in order to facilitate this person's care package. This relationship had been sustained and the person continued to receive care in a way that was culturally appropriate and delivered ongoing positive outcomes to them and their whole family.

A central focus of the service was to support people to fulfil valued roles as members of their local community, and to enable them to freely access local services and facilities. The provider had forged strong community links to support their work in developing people's presence and independence. We saw staff supported people to identify and access a broad range of work opportunities and social activities. Stepping Stones office was accessible to many people on a daily basis to do activities in one of their rooms. A sensory room was available for people to relax and focus upon their sensory needs. On the day of the inspection we saw that people were engaged in arts and crafts activities and there was much laughter and singing to be heard throughout the building.

Stepping Stones was responsive to people and their changing needs. Throughout the inspection we observed a very positive and inclusive culture at service. Promoting independence, involving people and using creative approaches was embedded and normal practice for staff. We saw that there were clear personal care guidelines in place for staff to follow which ensured that care delivered was consistent and respected people's preferences. People's support plans included extensive information about people's personal history, their individual interests and their ability to make decisions about their day to day lives. One plan detailed the importance of family contact and how this could be managed. Support plans provided guidance as to individual goals for people to work towards to increase their independence and therefore reduce their reliance on staff for support. A professional told us, "Person centred care and independence skills development is top of the services agenda." The registered manager told us about one person who initially had required the support of two staff to take part in activities away from the home. The person had made great progress and had responded well to the support from Stepping Stones and their support needs had reduced to one member of staff. This meant that the person was able to access activities more freely and lead a more ordinary life.

Staff considered how barriers due to disability impacted on people's ability to express their aspirations and wishes and take part and enjoy activities open to everyone. One person showed us photographs of a holiday that staff had supported him to experience. With the assistance of a translator the person told me that he had seen many interesting things, he had a ridden on a camel and had been shopping. The person had a translator with him at all times and the rest of his staff team were made up of staff who all used sign language to communicate with him. A staff member told us, "It's so great that he can enjoy these

experiences as much as the next person, his sensory needs are not a barrier with the right support."

The service supported people to take part in local community activities by celebrating festivals such as Halloween and Christmas. People were encouraged to take part in the festivities by helping to set the table and playing festive games. A staff member told us, "Christmas and birthdays are a real celebration, we like to make a fuss of everyone, and it's like one big family." People had a keyworker assigned to them who chose personalised gifts for them at Christmas and birthdays. The keyworker would also support people to choose cards and gifts for their relatives and friends to support people to maintain relationships with those close to them.

The service supported the people who live there to take part in an extensive range of activities. People were encouraged and enabled to engage in activities meaningful to them and they were passionate about. For example, one person that had previously not accessed any social activities had been introduced to using the bus, visited a zoo and had been on trips to the beach after staff worked with them to establish the activities they might like. This person had originally required two people to support them to access the community but now only required one person to take them out offering them a more personal approach to care.

People told us that they also went to the cinema, swimming, cooked and baked, made jewellery, did flower arranging and went bowling. Some people told us that they went to college to study a range of subjects. For example one person was learning English and the staff at Stepping Stones supported their learning by providing a market stall of plastic fruits and vegetables to help them learn the English words for basic food items. Another person was due to start a maths course at a local college with support from staff. One person with a sensory impairment was supported by staff to access a weekly group specific to his needs.

People using the service had the opportunity to go on individual holidays, last year one person enjoyed their first holiday with support from the organisation and had stayed in a country lodge in Cumbria. The person told us that they had enjoyed walks around lakes and visited a castle. Staff explained that the holiday had gone very well despite their being some significant challenges. The holiday had been subject to extensive planning and robust risk assessments had been carried out to determine staffing ratio and activities. The person told us, with some excitement that they had been able to visit a Beatrix Potter attraction which they had loved and they wanted to go back to visit again.

There was a complaints policy and procedure in place. The service acknowledged that some people could not complain in the usual way due to their limited communication. The service assessed the capacity of each individual and put into place a personalised plan detailing how people could complain, for example they assessed if a person could communicate using happy and sad faces, or if they could recognise a tick or a cross. Daily recording observations also reflected if things had not gone well for a person which had been captured observing people's body language or expressions. The service had an easy read complaints, compliments and concerns policy for people to access which helped to protect people from discrimination. One person said, "I would be happy to come in and complain but I don't have to because it's all so good."

The service provided exceptional end of life care. The registered manager told us that the service had initiated a meeting with professionals to discuss how best to support one person and the management of their symptoms. The person had expressed a wish to have as much control as possible over what was happening to them and the service demonstrated outstanding practice by supporting them with their emotional needs as well as arranging support from an independent advocate. We saw that end of life care plans included a list that had been handwritten by the person explaining what they did and did not want to happen as their illness progressed. The service had encouraged the person to write a list of questions to ask the doctor about the advantages and disadvantages of the treatments available. This showed that that the

service had explored some very difficult topics with the person and encouraged them to express their feelings and wishes in a constructive way. The service planned for emergencies and funeral arrangements in an extremely sensitive and personal way. The person told us, "Staff are kind and caring, and have been there for me over the past few years in ways I cannot explain." The service also recognised the challenges for staff that delivered end of life care, and provided additional training and extra supervision where required.



Is the service well-led?

Our findings

We found Stepping Stones was very well-led. There was a registered manager in post that joined the service in 2017.

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

Both the registered manager and the managing director were held in high esteem by people using the service and staff. The staff felt part of a supportive team and told us the registered manager was approachable and listened to them. Staff told us the service was well-led, open and honest. One staff member told us, "Managers have a good grip of everything that happens; they are very supportive and have clear expectations of us as staff."

Staff told us about an 'employee of the month' award which was given to staff members who had shown outstanding commitment to their role, which helped to build up staff morale. The service management also showed their appreciation to staff by holding a 'staff awards' ceremony at the Christmas party which rewarded those staff with a certificate and a prize. People were encouraged to nominate the staff they thought were most deserving to increase engagement, participation and inclusion.

Without exception there was a person centred approach to everything the service offered and how the service was run. The culture and direction of the service put people and their choices at the forefront of the service. The staffing team valued people and supported them to have the best life they could.

Throughout our inspection we found the registered manager demonstrated a commitment to providing effective leadership and management. The management structure was clear and effective. Staff we spoke with understood their roles and responsibilities. Staff spoke positively about the leadership and management of the service. They said the registered manager was approachable and could be contacted for advice at any time. Staff were able to describe to us the vision, values and culture of the service. Through talking with people using the service and staff and reviewing written records we saw the values of the service were being put into practice.

The registered manager knew when notification forms had to be submitted to CQC. These notifications inform CQC of events happening in the service. They had a clear vision for the future of the service. We were told they wanted to grow and provide care to more people. However, they recognised the specific skills within the organisation and also said they would only provide a service where they were certain they could meet people's needs.

The managers demonstrated an ability to deliver high quality care and regular audits took place to assess the quality of the care delivered. Records confirmed that audits had been conducted in areas such as health

and safety, including; accident reporting, finances, premises safety, food safety, and risk assessments. Health and wellbeing audits were undertaken which measured how people were supported, both physically and emotionally. Where action was required to be taken, the evidence underpinning this was recorded and plans put in place to achieve any improvements required.

There was a 24 hours support service to ensure that people had a point of contact in case of an emergency. People knew who the registered manager was and felt the service was well-led. The provider sought people's views on the quality of service provision during their individual review and invited people, staff and health and social care professionals to complete a satisfaction survey at regular intervals throughout the year to improve quality standards and address any concerns. A professional told us, "The managers on the team are proactive leaders and engage well with professionals." Another professional said, "I would like to provide Stepping Stones with a glowing reference which is well deserved."

We saw that the service had received many compliments from people using the service and their relatives. One card read, "Thank you very much for all that you do, may you all be rewarded for the good deeds that you do every day." A person using the service had written, "Thank you for being there for me, talking to me and making me feel a lot better. You're the best!"

There was a strong organisational commitment to improvement and an action plan captured plans to develop several respite services for local people with learning disabilities. The first of which, is currently being renovated. Further plans included creating a crisis centre which would feature facilities to promote participation and inclusion, gardening, arts and crafts and space for relaxation.

During the inspection we found the service was managed by professionals with an obvious dedication to the people they support and the staff that work with them.