

Salutem LD BidCo IV Limited

Ambito Community Services Cambridgeshire

Inspection report

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Ratings

Overall rating for this service

Outstanding 

Is the service safe?

Good 

Is the service effective?

Good 

Is the service caring?

Outstanding 

Is the service responsive?

Outstanding 

Is the service well-led?

Outstanding 

Summary of findings

Overall summary

About the service: Ambito Community Services (Cambridgeshire) is a domiciliary care agency that provides personal care to younger adults in a supported living setting. The service's office is in Royston. At the time of the inspection the service was providing personal care to four adults who have complex needs related to their learning and physical disabilities. Each person has their own flat and receives 24-hour, one-to-one support. Each flat has a second bedroom for staff use.

Not everyone who uses the service receives personal care. CQC only inspects where people receive personal care. This is help with tasks related to personal hygiene and eating. Where they do we also consider any wider social care provided.

People's experience of using this service:

People with extremely complex needs were supported to lead the fullest and most meaningful life they wanted to lead. Although unable to communicate with us using words, we could see that people were happy, had excellent, warm, caring relationships with staff and were enjoying life. A relative said, "We're very lucky to have got the service we have. I wish there were more services like this. They've given [our family member] a community – [name's] got friends now. It matters a lot, not being isolated."

Staff were exceptionally, kind, compassionate and caring. They provided fully personalised support to each individual that focussed solely on that person, to make sure each person lived the life they wanted to live. All staff completely understood how to support people's privacy, dignity and independence.

People showed they felt safe with staff who were highly motivated, knowledgeable and skilled to provide each person with the support they needed. Staff were fully aware of policies and procedures to keep people as safe as possible and rigorously followed risk assessment guidelines to ensure no-one was put at risk. Staff supported people to have maximum choice and control of their lives and staff supported them in the least restrictive way possible; the policies and systems in the service supported this practice.

The service was exceedingly well-led by a registered manager who inspired the staff team to put the people they were supporting at the heart of everything they did. The provider's values were put into practice by the staff and governance systems ensured the service provided was of the highest possible quality. People, their relatives and staff were always involved in improving all aspects of running the service and their voices were heard.

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

Rating at last inspection: The provider of this service changed in April 2018, although the service and staff remained the same. At the last inspection of the previous provider we rated this service Good (report published on 25 August 2017).

Why we inspected: This was a planned inspection based on the provider's registration.

Follow up: We will continue to monitor intelligence we receive about the service until we return to visit as per our re-inspection programme. If we receive any concerning information we might 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?

Good ●

The service was safe

Details are in our Safe findings below.

Is the service effective?

Good ●

The service was effective

Details are in our Effective findings below.

Is the service caring?

Outstanding ☆

The service was exceptionally caring

Details are in our Caring findings below.

Is the service responsive?

Outstanding ☆

The service was exceptionally 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.

Ambito Community Services Cambridgeshire

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 planned this inspection to check whether the provider was meeting the legal requirements and regulations associated with the Act, to look at the overall quality of the service, and to provide a rating for the service under the Care Act 2014.

Inspection team:

One inspector carried out the inspection.

Service and service type:

Ambito Community Services (Cambridgeshire) provides care and support to people living in one supported living setting. People's care and housing are provided under separate contractual agreements. CQC does not regulate the premises used for supported living; this inspection looked at people's care and support.

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:

We gave the service five days' notice of the inspection visit to the office. This was because the registered manager is often out supporting staff and we needed to be sure there was someone in the office when we arrived.

What we did:

Before the inspection visit we looked at information we held about the service and used this information as part of our inspection planning. The information included notifications. Notifications are information on important events that happen in the service that the provider must let us know about. In March 2019 the

provider had sent us a completed provider information return (PIR). The PIR is a form that asks the provider to give some key information about the service, what the service does well and improvements they plan to make.

The inspection site visit activity started on 30 April 2019 and ended on 10 June 2019. We visited the office location on 30 April 2019 where we spoke with one team leader and looked at some records, including care records. We visited and spoke with three people at their homes on 7 May 2019. At this time, we spoke with the three staff who were supporting them and saw how staff interacted with each person. Afterwards, we met the registered manager. Following this we contacted two people's relatives and healthcare professionals that the registered manager told us had regular contact with the service. The registered manager sent us further information that we asked for. The inspection was completed on 10 June 2019.

Is the service safe?

Our findings

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

People were safe and protected from avoidable harm. Legal requirements were met.

Systems and processes to safeguard people from the risk of abuse

- People felt safe with the staff. One person told us they felt safe and that staff had never shouted at them or been unkind. Although two people did not communicate with us using words, we saw from their body language and facial expressions that they felt safe and comfortable with the staff supporting them. Staff knew each person well and knew what signs would indicate that the person was not happy. A relative said, "We know our [family member] is safe...[they] would communicate it to us if [they] felt unsafe."
- The provider had systems in place to protect people from abuse and avoidable harm. These included ensuring staff had undertaken training and were confident about reporting any concerns. Senior staff had undertaken a higher level of safeguarding training. One person's relative said, "Yes, [our family member] is safe. Nothing has ever happened that makes us worry about [their] safety."

Assessing risk, safety monitoring and management

- Senior staff had assessed all potential risks to people and had put clear guidance in place so that staff knew how to manage the risks. The assessments were fully personalised and ensured that staff supported each person to take risks in a safe way. For example, one person found some aspects of leaving their home very difficult, which had meant they could have put themselves, staff and the public at risk. Detailed risk assessments ensured that strategies were in place to minimise the risk and build the person's confidence, so they now enjoyed outings and everyone was safe.
- Staff undertook regular checks of all equipment in each person's home to ensure that it was safe to use. Staff had fire safety awareness training and knew how to keep the person they were supporting and themselves safe. Some people joined in the staff training so that they would know what to do if the alarms went off.

Staffing and recruitment

- There were enough staff employed by the service to make sure that people always received their one-to-one support.
- The provider's recruitment policy ensured as far as possible that new staff were suitable to work in the home. One member of staff told us the registered manager made sure that all the required checks, such as references and a criminal records check through the Disclosure and Barring Service (DBS), were in place. They said, "[Name of registered manager] didn't let me work until I had them all. I had a long wait for the DBS."

Using medicines safely

- Staff managed each person's medicines safely and ensured they were given them as the prescriber intended. Each person's medicines were stored securely in the person's own home and staff ensured medicines were ordered in time and disposal was carried out correctly when needed.

Preventing and controlling infection

- Staff supported each person to keep their home as clean as possible. Staff had undertaken training and were fully aware of their responsibilities to protect people from the spread of infection. People were encouraged to do as much as they could for themselves, such as putting their washing in the washing machine.

Learning lessons when things go wrong

- Staff recorded any accidents and incidents and reported them to the registered manager and the provider. Analysis and discussion with staff and people's relatives aimed to ensure that, if possible, the accident/incident would not happen again. The registered manager told us they took every incident to use as a learning opportunity for the whole staff team.

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

People's outcomes were consistently good, and feedback confirmed this.

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

- The registered manager and senior staff had fully assessed each person's needs before they offered the person a service.
- The registered manager ensured that staff supported people in line with the most up to date good practice and that any equipment the person needed was available. One person had an over-head hoist tracking system in place so that staff working on their own were able to assist them to move safely around their home.

Staff skills, knowledge and experience

- Staff were satisfied that they received very good training in all the topics they needed to make sure they could support each person effectively.
- Staff felt very well supported by the registered manager, team leaders and each other. Staff worked alone a lot so it was important to them to have support systems in place if they needed support. A relative told us that the registered manager and team leader "communicate in an excellent way, giving confidence to new members of staff."

Supporting people to eat and drink enough with choice in a balanced diet

- Each person did their own shopping and prepared and cooked their own meals, with varying degrees of support from the staff working with them.
- People chose their own food, with encouragement from staff to eat as healthily as possible. Staff knew people's likes and dislikes, which were recorded in their support plan. One relative told us they were very pleased that staff took so much care over their family member's diet, encouraging the person to cut down on fattening foods.

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

- Staff worked closely with other services, such as the local authority, GPs and community nurses to ensure that they provided people with effective support that met their needs.

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

- Staff involved other healthcare professionals to support people to maintain their health. These included the GP, community nursing team, dietician, a chiropodist, dentist and optician as well as specialists relevant to the person's condition.
- A relative told us their family member was well-looked after because there was excellent communication [amongst the staff team] about their health and well-being. For example, monitoring of bowel movements and encouraging the person to eat a healthy diet so they did not gain too much weight. Another relative told

us, "[Name] is always healthy – they must be looking after [them] well."

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

- Before each person moved into their flat staff had met with the person, their relatives and other professionals involved in their care to discuss the new environment. They had ensured that the flat was equipped to meet the person's needs and decorated and furnished in the way they wanted.

- 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 with appropriate legal authority. We checked whether the service was working within the principles of the MCA.

- Staff knew how the MCA applied to their work. One member of staff said, "We work from a blanket platform of capacity", which meant they assumed everyone had capacity for all decisions, unless an assessment showed otherwise. They told us about one person who needed an operation involving anaesthetic. Although the person fully understood what the operation was for, they did not have capacity to understand what might happen if anything went wrong. A best interests decision was made, involving health professionals and the person's relatives.

- We saw that staff chatted with people all the time and everything that was done was discussed with the person first. For example, staff ensured that each person was happy for us to enter their flat before we were allowed in.

- Staff made every possible effort to understand the choices each person made about their life. A relative told us that their family member was happy with the staff from Ambito Community Services (Cambridgeshire), happier than they'd been in previous placements because the staff "think outside the box to understand [them] and what [they] want."

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

People were supported and treated with dignity and respect; and involved as partners in their care.

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

- There was a very strong, person-centred culture throughout the service. Each member of staff put the person they were supporting at the heart of everything they did. One relative told us how impressed they were by the way staff were totally engaged in supporting their family member. They said, "When we pick [family member] up and when we leave [them], there is a quiet and peaceful mood...and a member of staff who is focussing on [name] not on us." An external professional wrote, "It almost feels like staff here have the ability to leave their own lives at the door and completely focus on the individual they are supporting."
- Staff spoke about people with genuine admiration and compassion. They were extremely proud of what and how much each person had achieved since they had moved into their flat. One person had been unable to go out because of situations they might encounter, which would distress them. Staff had slowly and patiently worked with them, putting strategies in place to support the person if things did not go as planned, and now they were able to enjoy outings into the community. An external professional wrote, "The staff are really enthusiastic, pro-active and motivated to support the individual they are with, to achieve the best day and life they can."
- Relatives praised the staff for the way they supported their family members and for the way staff showed how much they cared about the person they were supporting. One relative told us, "Our [family member] receives excellent care from the staff at Ambito." They described staff as "very kind, very efficient and very attentive to [our family member's] needs." An external professional told us, "I feel in awe and inspired that [staff] can support so compassionately and effectively."
- Relatives appreciated that the registered manager worked hard to provide each person with a consistent staff team. In this way staff could build an open and trusting relationship with the person and their family. Although none of the people we visited were able to put into words how they felt, we could see they were comfortable and happy with the staff who were supporting them.
- Staff treated people equally and without discrimination. In the PIR the provider told us that staff had received training in equality and diversity and that this topic was discussed during staff meetings and supervision.
- Staff considered people's protected characteristics under the Equality Act 2010. These included religion, race and sexual orientation and they supported people to have their diverse needs met.

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

- Staff were passionate about fully involving people in decisions about their care and support, as far as people were able and wanted to be involved.
- Staff knew people extremely well and knew people's likes, dislikes and how they preferred to be supported. A relative told us their family member had a range of needs that made their care very complex. They were sure that staff had the relevant skills and the right attitude to support their family member in the best

possible way. They named several staff who "go the extra mile" to ensure their family member's needs were fully understood and met.

- Staff worked with people and their families to develop and improve the communication between them and the person. This in turn enhanced the support the person received. A relative said that one member of staff had known their family member for a very long time and "communicates with [name] in a very profound way."
- Staff used a range of communication aids appropriate to the individual they were supporting. For example, they used a digital voice-controlled device that responded to one person's need to hear a certain noise.

Respecting and promoting people's privacy, dignity and independence

- Staff excelled at respecting people's privacy and dignity. They showed the utmost empathy with people who needed assistance with their personal care, which was offered very discreetly and always provided in private. They supported people to keep their flats and themselves clean and tidy. When we visited one person in their flat the member of staff quietly reminded them to shut the bathroom door.
- One member of staff explained that when they were out in the community, staff had a heightened awareness of everything going on around them and how that might affect the person. They had strategies in place to take the person out of situations that might distress them. For example, if a bus was getting crowded, which a person might not enjoy, staff would discuss with the person about getting off the bus early. This ensured that the person's dignity was not compromised.
- Staff encouraged people to do as much as they could for themselves. We saw a member of staff reminding one person they needed to switch the washing machine on. After some light-hearted banter, the person happily carried out the task. We learnt that this person had been both unable and unwilling to do anything, but after a lot of hard work on their part, supported by staff, they now did some of their own household chores.
- Staff supported people to maintain and develop friendships and relationships. When they knew that two people got on well together, they encouraged them to visit each other. Staff offered people the opportunity to go to the provider's other service, where they met with people, some of whom had been their friends at school. A relative told us how thrilled they were that their family member now had friends to meet up with and go out with, which they had never had before. They knew this was down to the culture and values of the service, which were promoted and practiced by the staff team.
- Staff were skilled at recognising when people wanted company and when they preferred to be on their own. A relative said, "[Our family member] is very happy that [they've] got people around but has the privacy of [their] flat too."

Is the service responsive?

Our findings

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

People's needs were met through good organisation and delivery.

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

- The service provided to people by Ambito Community Services (Cambridgeshire) was completely personalised and fully responsive to each person's individual needs. Each person had a totally person-centred support plan. This was written in a way the individual could understand and detailed their preferences about the way they wanted staff to give them care and support. Some support plans included photographs, some had pictures and some were written in easy-read text, depending on the person's wishes.
- One person's 'personal behaviour plan', for example, included 'When I am angry, upset or frightened I can...' and listed what the person might do, such as shout or throw things. The plan then listed what the triggers might be. These included coughing and sneezing. When we visited the person, the staff very politely asked us to leave the room if we needed to cough or sneeze and checked with the person that this would be what they wanted. This showed how respectful staff were to the person's wishes.
- Staff knew each person extremely well, which meant they could respond appropriately to the person's needs. The plan included very detailed information about 'Things I like, prefer or am good at'. For one person there was a very long list, which started with I'm good at singing; I love to read a book – if you say one word at a time I will repeat it back to you; I love trains; and I am good at using my electronic equipment. This gave staff the opportunity to fully personalise conversation, activities and support.
- The person and their keyworker reviewed their support plan at least monthly. Staff did this in whatever way the individual preferred. Relatives told us they were invited to reviews, their views were included and they were encouraged to comment on the plan. They felt fully involved in their family member's support.
- Exceptional results had been achieved by and for each person, demonstrating how responsive the service was to each person's needs. One person, who had struggled to go out into the community had set a goal of going to a local town on the train. After months of work, the person achieved this with a group of friends. The registered manager said, "This is a huge achievement for [name] and opens up so many possibilities for [them] to access the world around [them]."
- People chose to do an incredibly wide range of activities, which staff supported them to achieve. Relatives were amazed that their family members had developed so much since being at the service that they were able to participate in so many varied activities.
- Staff went 'the extra mile' to support people to achieve their goals. One person had decided they wanted to go on holiday to a seaside town, get there by train, stay in a hotel, play bingo and eat fish and chips on the beach. Staff had to change their rotas and work long hours for this to happen, as well as doing a huge amount of preparation. This included detailed risk assessments relating to every possible activity and situation. They put a 'holiday pack' together for the person so that they could read it and remind themselves of what was going to happen. Staff had a copy each so that everyone knew what was happening. Staff told us, "[Name] was so happy with [their] holiday and told everyone about it. You could clearly see how [they] felt and how it affected [their] mood. [Name] is collecting memories and for them, there isn't anything more

important."

- A relative told us how incredibly well staff had supported their family member when the person had been admitted to hospital. They had provided round-the-clock care. The relative said, "All the members of the team worked with [name] in hospital with the utmost dedication and loving care." They said that staff had also supported them. For example, one member of staff had stayed with them when their family member was having their operation; another member of staff had brought all the clothes and equipment their family member needed "and kept us company by [name's] bedside."

Meeting people's communication needs

From August 2016 onwards, all organisations that provide adult social care are legally required to follow the Accessible Information Standard (AIS). The standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of people who use services. The standard applies to people with a disability, impairment or sensory loss and in some circumstances to their carers.

- Staff were skilled at communicating with each person in the way the person chose and understood best. For some people this included the use of electronic technology. Staff had accessed a number of applications and devices to support people to communicate.
- One relative was full of praise for the "kind and compassionate staff" who spent time and effort to learn how to communicate with their family member whose complex needs included deaf blindness. They said staff "have all taken care to develop a personal rapport with [name] and to find ways of enjoying life with [them]. [Name] is a very sociable person and [their] sense of fun is matched by the staff who understand [them]."
- A relative told us that this was the first service their family member had used where they felt staff really listened to them and truly heard what they were saying. This meant that the person, who had previously chosen not to communicate because they felt no-one was hearing them, was communicating well with staff.
- Staff had developed a very detailed 'communication passport' with each person so that anyone reading it would know how to work with them. A member of staff said, "This is very specific, very detailed so that people have consistency." People also had communication books so that staff and relatives could communicate about what the person had achieved, with staff or with their families.

Improving care quality in response to complaints or concerns

- The provider had a complaints policy and process in place, in easy-read text for people who needed it. Staff encouraged people to talk about who they would tell if something was wrong. The registered manager told us they had complete confidence that people's relatives would talk to them if they had any concerns and relatives confirmed this. No formal complaints had been made.
- A relative told us they had had concerns when their family member was discharged suddenly from hospital. They were worried the staff team was not ready. They said the registered manager and team leader "reacted promptly to our concerns." They went on to say how very pleased they were with the way the staff responded: "The after-care that [name] received was excellent. For six months staff took extra care that [name] rested and [they] were nurtured back to health."

End of life care and support

- The provider had a policy in place, which included working with people's relatives and external healthcare professionals should someone need end of life care.
- The registered manager said that end of life was not formally discussed with people, although it would be if people and/or their relatives wanted to do this. The provider's quality team was looking at how/if these discussions could be introduced. The registered manager explained, "This service is about people learning how to live." However, they made it clear that people would be supported well to ensure they had as

comfortable and pain-free death as possible, if and when the time came.

- The staff team offered other support relating to end-of-life, such as supporting people who had lost a friend.

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.

The service was consistently managed and well-led. Leaders and the culture they created promoted 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's relatives were extremely happy with the way the staff team were supporting their family members. One relative was full of praise for the whole staff team. They said, "This service would not be as excellent as it is without the calm overview of [team leader] and [registered manager], whose dedication and care of the people is shown in both their behaviour and the careful systems they have created to support clients. They are always cheerful, always open to communication and have built, and are endlessly building, a team with high morale and very high standards."
- The people being supported were truly at the heart of this service, which endeavoured to enable people to lead the best life they possibly could. The registered manager was highly motivated, always seeking to do better for each person and they instilled that motivation in the staff team. A staff member told us, "It's good [working here], it's rewarding. I like working here - we're a good team and a close-knit service... We put in extra effort to make people happy." Another member of staff said, "We're always looking to improve things for the guys – to see if we could make them happier."
- Staff were fully aware of the culture, vision and values of the service, which promoted the highest possible quality service to be provided to people. They knew what was expected of them and worked hard to support each person's individual needs, hopes and dreams. One member of staff said, "It's very satisfying that the whole day is focussed on one person."
- Staff told us how much they valued the support they received from the provider. The provider had systems in place to recognise and celebrate achievement. They produced a newsletter each month in which particular achievements by people supported, staff (as individuals or teams) and managers were featured. An 'outstanding managers' special edition had recently been published and included the registered manager of the Cambridgeshire service. When interviewed, they said they would tell other managers, "Customer focus and belief in your team. Passion. Drive. High expectations. Leadership. Motivation. That's how you get your service to be outstanding for your customers. Be the change you wish to see."
- The provider had a staff recognition award scheme in place, which staff very much appreciated. Staff from all the provider's services were nominated in a range of categories. The nominees and the person who had nominated them were invited to London to be treated to an evening dinner, award ceremony and the night in a hotel.
- Staff felt very well supported by the registered manager, team leaders and other staff. They received regular supervision, annual appraisals and team meetings. They knew they could call on anyone at anytime if they needed support.
- The registered manager promoted transparency and honesty. They had a policy to openly discuss issues with relevant parties if anything went wrong. Relatives confirmed that staff communicated with them really

well and about everything.

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

- The registered manager provided exceptionally strong leadership and managed the service extremely well. Staff told us how good they thought the registered manager was at their job. One member of staff said, "[Name's] a very good manager, full of ideas, has tremendous drive and communicates exceedingly well. [They] tell us, 'okay, we're good, but here's where we want to be'." Another member of staff told us, "[Name of registered manager] is very good, I'm very impressed with her, I really respect her and I love having her as my line manager. [The registered manager and team leaders] are always trying to support us as well as the [people we support]."
- The registered manager knew they could rely on the support they got from the team leaders and the rest of the staff team. Their passion about the people they were supporting and the service provided to them by the staff shone through in everything they said and did. They told us how proud they were of the staff team and how they had developed, both individually and as a team. The registered manager said that all the systems in place to coach, mentor, praise, communicate with and reward the staff were all designed "to support the team to be the best we can be for the people we support. Happy staff often results in happy customers after all."
- The service had a very strong emphasis on recognising, assessing and managing any risks, for the staff, the people supported and any members of the public they came in contact with. The registered manager explained that all new staff started work in the provider's other service (a care home) so they were not thrown straight into working alone with one person and could become part of the team. The registered manager supervised them and worked out which person they would be best suited to work with.
- The provider had a robust quality assurance system in place, which included an annual internal inspection. Ambito Community Services (Cambridgeshire) had scored well. Any actions identified had been added to the service's improvement plan and the registered manager ensured the actions were addressed. Internal audits were completed by staff and team leaders and monitored by the registered manager and the provider's quality and governance director.
- CQC records confirmed that the service fulfilled their legal and regulatory responsibilities: they notified us of certain events, which they were required to do by law.

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

- The registered manager used creative and innovative ways to engage people, staff and relatives to feel involved in the running of the service. Everyone was encouraged to give feedback on all aspects of running the service. People had monthly meetings with their keyworkers and participated in staff interviews. Every six months the manager held a forum that people could attend without their support workers so they could open up to the manager if they wanted to, about anything. Staff had team meetings and team-building days during which they played games and worked as a team to win prizes.
- All staff encouraged everyone to talk to them, whenever they wanted to. Relatives were happy to approach any of the staff, including the registered manager or team leader if they wanted to discuss any aspects of their family member's care. This had a very positive impact on the people the staff were supporting.
- The registered manager told us, "The feedback we get from the [relatives] is exceptional. Every relative gives us compliments about the service we provide and how assured they are with the work we do." The registered manager went on to explain that one person, whose relative had said was now calmer, more assured and had become an adult, was able to spend more quality time with their family, unsupported by staff.
- Staff told us they worked hard to make sure people weren't discriminated against and that people's equality and diversity needs were met.

- Staff had supported people to build up links in the local community. People used local shops, pubs and other amenities, as well as taking frequent walks around the local park areas. All four people supported had joined in a local one-kilometre walk, run, push or cycle.
- In 2018 the service had undergone a change of provider. Relatives in particular had been highly anxious about this change, fearing worst-case scenarios for their family members. However, people, their relatives and staff were engaged in the process, which helped them feel more informed and less anxious. For example, information was provided in easy-read format and the director of the new provider had invited everyone to meetings to answer their questions and reassure them. The change took place with very little impact on anyone.

Continuous learning and improving care

- People were supported in line with current, research-based practice, which the registered manager ensured was appropriate for each individual. The registered manager used a wide range of ways to develop their own knowledge and skills and to use these to develop the staff team.
- Each year the registered manager organised for people and their relatives (if they wanted to) as well as staff to attend an exhibition in Birmingham. The latest innovations in absolutely everything to support independent living, such as assistive technology, mobility aids, accessible design and inclusive sports and travel were showcased. This helped to ensure that everyone was up to date with what was around to improve people's lives.

Working in partnership with others

- Staff and the management team worked in partnership with other professionals and agencies, such as the GP, other health care professionals and local authorities to ensure that people received joined-up care.