

RMP Care Limited

R M P Care - 21 Longton Road

Inspection report

21 Longton Road
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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?

Outstanding ☆

Is the service well-led?

Good ●

Summary of findings

Overall summary

About the service

RMP Care – 21 Longton Road is a care home providing personal care to five people at the time of the inspection. The service can support up to five people. The care home accommodates five people in one building. People live across two floors and have their own bedrooms. Communal areas include a lounge, a kitchen and dining room and a garden at the back of the building.

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.

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

Right Support

People were supported to have exceptional choice and control of their lives by enough suitably recruited and robustly trained staff, that supported them in the least restrictive way possible and in their best interests. People were involved in all decisions about their care and were supported and encouraged to try new things and undertake hobbies. Staff focussed on people's strengths and encouraged them to work towards their goals. The staff team responded positively to the potential challenges posed by COVID-19 by consulting people about alternative activities that could be undertaken to maintain good mental and physical health. The service had built strong relationships with other agencies meaning access to health and social care support was provided in a timely manner. Hospital passports were in place that contained vital health information should they require a hospital stay.

Right Care

Staff knew people exceptionally well and demonstrated a person-centred, kind and compassionate approach when interacting with people. Staff consistently respected and promoted people's dignity by recognising their abilities and ambitions enabling them to live fulfilling, meaningful lives respecting their diverse needs. Staff demonstrated a high level of knowledge around people's individual communication preferences which ensured they received care and support specific to them. This enabled them to express themselves and could be involved in their care and support as much as possible. Feedback we received from relatives and professionals about the care and support provided was overwhelmingly positive.

Right culture

The service demonstrated a positive person-centred culture whereby people were put at the centre of the service and was focussed on achieving meaningful outcomes. Relatives and professionals told us staff were extremely caring, promoted people's independence and fully involved them in decisions about their care. People were encouraged to live as independently as possible, with staff offering support and guidance where needed. People were actively involved in the service with views and opinions being regularly sought

and listened to. People were kept safe from the risk of harm by staff that understood their responsibilities in regard to safeguarding procedures. The registered manager and staff were knowledgeable about their roles and received training to ensure they had up to date skills to support people in a safe and person-centred way.

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

Why we inspected

We undertook this inspection to assess that the service is applying the principles of Right support right care right culture. We undertook this inspection as part of a random selection of services rated Good and Outstanding.

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?

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?

Good ●

The service was 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?

Good ●

The service was safe

Details are in our safe findings below.

R M P Care - 21 Longton Road

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

RMP Care – 21 Longton Road is a care home. 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.

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

This inspection was unannounced.

What we did before inspection

We reviewed information we had received about 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.

This information helps support our inspections. We used all of this information to plan our inspection.

During the inspection

We spoke briefly with two people who used the service about their experience of the care provided. Some people who used the service were unable to talk with us due to limited verbal communication. We spent time observing interactions with the staff supporting them.

We spoke with two members of care staff, the registered manager and a senior care staff member. We also spoke to two visiting relatives.

We reviewed a range of records. This included three people's care records and two medication records. We looked at one staff file in relation to recruitment and staff supervision. A variety of records relating to the management of the service were viewed, including quality assurance audits.

After the inspection

We continued to seek clarification from the provider to validate evidence found. We looked at training data and quality assurance records. We spoke with another two relatives and three professionals who regularly visit or are involved with the service to gain their feedback. We also spoke with another two care staff members.

Is the service safe?

Our findings

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

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. This meant people were safe and protected from avoidable harm.

Systems and processes to safeguard people from the risk of abuse

- People and their relatives told us that staff supported them to stay safe. One person told us, "Yes, the staff keep me safe here." A relative told us, "I trust the staff here 100% to keep [relatives name] safe, they always have."
- People were protected from the risk of abuse by staff who had been trained to understand and recognise the signs of potential abuse. Staff were able to tell us what protocols were followed in the event of a concern. One staff member told us, "It's my job to look after people, if I saw anything I was worried about I would immediately make sure the person was ok, report it to the manager and document everything, and I know it would be acted on straight away."

Assessing risk, safety monitoring and management

- People had detailed care plans and accompanying risk assessments in place that reflected current support needs. These were reviewed regularly or when changes occurred.
- Staff were able to tell us about people's known risks and told us how they supported people to keep them safe. A staff member told us how they support people who may display anxious behaviours. They told us, "We generally know the things that can sometimes trigger someone, and we use their positive behaviour support plan to help them to try to stay calm. Sometimes this might just be to spend some time alone."

Staffing and recruitment

- Relatives and professionals told us there were enough suitably trained staff to keep people safe. One professional told us, "RMP staff are very proactive in feeding back any problems and I feel they are always doing their best to improve the quality of care they provide for people."
- Staff files contained necessary pre-employment checks such as references from previous employers and Disclosure and Barring Service checks (DBS). These checks provide information including details about convictions and cautions held on the Police National Computer. The information helps employers make safer recruitment decisions. This was to ensure staff had their suitability to work with vulnerable adults checked.

Using medicines safely

- People's medicines were stored safely and administered following the principles of the STOMP campaign (stopping over-medication of people with a learning disability, autism or both). Medication was stored in locked cupboards in each individuals' bedrooms.
- Where people were prescribed 'as required' medication protocols were in place for staff to follow to ensure these were given when needed.
- Staff received training in the safe administration of medicines, and this was refreshed yearly.

- Competency checks were regularly carried out by senior staff to ensure staff continued to be able to administer people's medications safely.

Preventing and controlling infection

- 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 using PPE effectively and safely.
- 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

- Government guidance was followed to ensure visits to the service were managed safely. Visitors were screened for symptoms of COVID-19 on their arrival and relevant personal protective equipment (PPE) was available.

Learning lessons when things go wrong

- Any incidents or accidents were recorded, investigated and actioned by the registered manager. For example, where there had been a medicine recording error this had been discussed with the staff member responsible and medication competencies refreshed.

Is the service effective?

Our findings

Effective – this means we looked for evidence that people's care, treatment and support achieved good outcomes and promoted a good quality of life, based on best available evidence.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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's needs were assessed, and care plans were in place containing information about the level of support required, communication preferences and positive behaviour support guidance. One staff member told us, "We work together with the people we support, their relatives and professionals so their plans have the right information so that we can support people in the way they prefer."

Staff support: induction, training, skills and experience

- Staff received training and shadowing opportunities as part of their induction and on-going training. One staff member said, "We get a lot of training when we start here, but this is repeated yearly so that we can keep up with any changes."
- Staff supervisions and observations of practice were undertaken regularly, and staff told us they felt supported. One staff member told us "I feel very supported in my job. I get supervisions and get to talk about any issues or any training I might want. The manager and the owners are very supportive and flexible with us all I think."

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

- People's dietary needs had been assessed and guidelines were in place for staff to follow.
- Where people had risks associated with eating and drinking, advice had been sought from relevant health professionals and staff were able to tell us about the support needed. One staff member told us, "We have people that have to follow a certain diet for health reasons, and we support them to make healthier choices as much as we can. Sometimes people need our help to eat so we support or prompt where it's needed."

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

- People were supported to make decisions about the décor in their home and had chosen the colour schemes for communal areas and their own bedrooms.
- Some people chose to show us their bedrooms. One person was in the process of having new furniture and carpets and had recently had a new bathroom installed.

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

- People benefitted from regular health and social care input. Weekly online meetings with the learning disability lead GP were in place. This has resulted in health checks and referrals being arranged in a timely manner to ensure people's health and wellbeing was maintained.
- We gained feedback from professionals who work with the service and one professional told us, "RMP

Care are fantastic, they are very proactive, supportive and do their best to improve the quality of care and well-being for the people they support."

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).

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.

- People's capacity was assessed following the principles of the MCA, and DoLS were in place where required. Meetings were arranged with staff, relevant health and social care professionals and relatives where decisions needed to be made on people's behalf.
- A social care professional gave us feedback about the support provided to people. They said, "Interaction with service users from what I have observed has always been excellent from all staff that have been present."
- Staff received MCA training and were able to tell us how this was put into practice when supporting people. One staff member told us, "It's about supporting people to make decisions if they can't do this themselves. To make decisions easier for someone we might give options based on what that person usually chooses such as food or clothes."

Is the service caring?

Our findings

Caring – this means we looked for evidence that the service involved people and treated them with compassion, kindness, dignity and respect.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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 communicated with people using their preferred style and were calm and patient when waiting for responses. Interactions between people and staff were observed to be friendly and had a 'family' feel. One person said, "I like them [members of staff] we laugh, and they help me."
- Relatives told us that the staff were kind, caring and patient. They said, "What can I say, honestly the care and support here is fabulous. It's hard to put into words how wonderful this place is, staff are so willing and pleasant. They really listen to you and understand the relationship between us and [relatives name]. It's like having another family."
- A social care professional told us, "I must admit I was overwhelmed with the atmosphere [at 21 Longton Road] as it was such a natural environment and it was lovely to see how happy service users were."

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

- Relatives told us they were involved in care planning and any reviews and their family member was involved as much as they were able. One relative said, "We know [relatives name] is always included in any decisions, and they are very good at explaining things."
- A social care professional told us how staff members supported people with decisions during a recent visit to the service. They said, "Staff were using different communication methods such as pictures and Makaton to make sure each person was involved. Staff were approachable and answered questions, gave support and praise for each service users achievements." Makaton is a unique language that uses symbols, signs and speech to enable people to communicate.

Respecting and promoting people's privacy, dignity and independence

- Through observations during the inspection it was clear that staff knew people very well and respected their privacy and dignity at all times.
- Individual routines were respected, and people could spend their time as they wished, with staff respectfully prompting where needed if activities were planned in.
- People were supported to maintain independence, and we saw staff assisting people to do household chores and making meals.

Is the service responsive?

Our findings

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

At the last inspection this key question was rated as Outstanding. At this inspection this key question has remained the same. This meant services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

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

- The COVID-19 pandemic put a halt to the usual activities undertaken by people and the staff team understood the potential impact a change in routine could have on people. Consultations took place with people about the 'lockdown' and what this would mean, and plans put in place to limit the impact of a change of routine on people and to support people's mental health and well-being.
- One person found the 'lockdown' quite challenging due to not being able to enjoy their regular shopping trips to buy snacks. Staff worked around this by discussing alternative activities with the person and set up a 'tuck shop' at the nearby RMP Care head office where the person was able to choose snacks through the window to imitate a shopping experience. This enabled the person to maintain a routine which had a positive effect on their mental and physical well-being. One staff member told us, "None of us were sure how people would cope with the lockdown, but we worked with the people we support to find ways around it. The 'tuck shop' idea worked really well and actually encouraged [person's name] to make healthier choices, and some people bought passes for Trentham gardens so they could exercise safely outdoors, and these are still used now for shopping trips and meals."
- People decided they wanted to improve the garden area whilst unable to access their usual activities due to the COVID-19 lockdown. Discussions with people took place and they decided they wanted to use old tyres as planters to grow their own plants and vegetables. When people got disappointed that some vegetables didn't grow as expected staff supported them to turn this into a positive by using them to make chutneys, pickle and jam using skills they had learnt via weekly online 'cook along' sessions. As people had enjoyed this so much, they decided to make homemade hampers to give to their families for Christmas, with some being raffled off to donate money to a charity that was important to people.
- To enable people to keep in touch with their families and friends during COVID-19 they were consulted about how they would like to do this. People decided they wanted to write letters, use electronic tablets and Facebook Portals were purchased and a private social media group was set up to enable people to share their pictures. A relative told us how much they appreciated adaptations made during the pandemic. They said, "Through COVID-19, the staff worked so hard and [person's name] adapted remarkably. The staff always made sure we could make contact when we weren't allowed to visit due to the restrictions." Another relative told us, "They arranged lots of activities, everything was discussed with [person's name] meaning they coped amazingly well during COVID-19. They really did go above and beyond what we expected and reassured us through a very worrying time."
- People, relatives, staff and professionals told us how people were supported to maintain relationships and enjoy activities. One relative told us, "They [staff] arrange lots of activities and outings. [person's name] gets to do what they want, and nothing is too much trouble." And, "The staff are always trying to think of

new things to do. They'll ask [person's name] if there's anything they would like to do and also they decide as a group sometimes. They arranged a birthday meal recently and nothing seems to be a barrier, it just gets done."

- Work was continually underway to support people to fulfil any aspirations. One person had expressed a wish to live independently as they had done this historically. Staff and the registered manager had involved professionals in discussions around this and had worked with the person to implement a support plan that met their individual needs. This maximised their freedom whilst acknowledging the need to be supported.
- Through working with this person to build their social and emotional skills this built up their confidence to enable them to re-connect with people who are important to them and they had lost contact with. With the right support the person had made and maintained regular contact with them and enjoyed several day trips and holidays with them which was remarkable. One staff member told us, "I don't think [person's name] ever thought they'd have a relationship with [people that were important to them] again as it had been so long, but they have worked so hard with us to build their confidence and work on their anxieties to enable them to do this, and we can all tell that it's made such a difference to them."
- The registered manager and staff demonstrated an ethos of always putting people at the heart of the service, and ensuring people were able to enjoy activities that were important and meaningful to them. The registered manager told us, "We strive for ordinary lives for extraordinary people."
- On the day of the inspection people were accessing various activities that they had chosen to do. This included attending crafting activities, going out for a walk with a relative and attending a local farm project where people enjoyed caring for animals and learn how to grow and look after plants. We spoke to professional from the farm project who told us, "I've always found the staff to be supportive and really listen to what people want. I always feel it's a collaboration between the person and the staff member to ensure the activity is the best fit for the person. Support is offered but only when needed and they allow the person to make mistakes and learn from these."
- People were supported to follow their religious or cultural beliefs. One staff member said, "We supported someone to access online religious services over Christmas, and we try and have discussions about other cultures and religions throughout the year like Diwali and the Chinese New Year. We've also talked about relationships and used pictorial or easy to read information to help people understand."
- This flexible and person-centred approach helped to ensure people's opportunities to do what mattered to them was maximised. People thrived as a result and this meant people experienced positive mental health and well-being outcomes.
- A professional who works closely with the service told us, "The staff do work incredibly hard to ensure the people at Longton Road get a good quality of life. They clearly all work well together and go out of their way to support everyone from what I've observed."

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

- People's care plans were based on information gathered from the person, their families, professionals and others who knew them well. Emphasis was based around what people were able to do and their aspirations for the future. Care plans were reviewed and updated monthly in consultation with people and their families where able and communicated to the staff team. One relative told us, "They really do focus on what [person's name] can do instead of what limitations they have."
- One person enjoyed spending time on their own in the local area to help with their anxiety, however due to safety concerns staff worked with the person to find an alternative way to do this. The person was supported to purchase some garden furniture and this had enabled them to enjoy time on their own more easily and safely, without the need for staff support. This promoted their independence and supported their well-being. One staff member said, "We worked with them to see if we could find a different way for them to get some time alone. Now they can be on their own whenever they want and it really has made a difference

to them."

- Staff were passionate about achieving positive outcomes for the people they supported. Staff knew people and their support needs very well. One health professional told us, "I have worked with clients at 21 Longton Road and staff are always very diligent in following advice and support plans provided. RMP are a high-quality person-centred provider that it is a pleasure to work collaboratively with, they are always responsive and very professional."
- Relatives told us the provider was responsive to people's needs and requests. One relative told us, "They really do act on any little thing, like the TV and the kitchen worktop. These were only passing comments made but before you knew it there was a new worktop and a bigger telly for everyone to enjoy."
- The registered manager told us, "We want to make people's lives as meaningful as we can, so we support them to do whatever makes them happy. This might be to spend time with their families, try new hobbies or learn a new skill."

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.

- Easy to read information was used to assist people to understand information based on their individual preferences and guidance from professionals where needed. The registered manager told us, "When we plan to have what could be quite difficult to understand conversations, we have sourced pictorial or easy read information and we have used this successfully to have conversations about relationships, religion and to explain information regarding COVID-19. This enabled us to work with people around the COVID-19 vaccine and get everyone vaccinated."
- Staff members were observed to have a good understanding of people's individual communication preferences and this was reflected in care plans. One staff member said, "We are always reviewing what works for people and what doesn't. Sometimes people respond to different staff members and we use this to ensure people can get the support they need."

Improving care quality in response to complaints or concerns

- People were encouraged to raise any worries or concerns with staff. One person said, "I would say if I wasn't happy." Regular meetings were also held with people to discuss any problems or concerns. Staff told us that as they knew people so well they could usually tell if someone wasn't happy. One staff member told us, "We know people so well that we can usually tell if they're getting upset or anxious and can try to re-direct them with things we know they enjoy to take their mind off it."
- We saw where incidents had occurred these had been fully documented, professional input had been sought where needed and any outcomes had been communicated with family members.
- Relatives told us they would feel comfortable raising any concerns about the service or giving feedback. One relative said, "We did have to raise an issue and the manager came to visit us to discuss it and sorted it out. I always feel I could share my opinions and they would be listened to." And another relative said, "We are always asked our opinions, and included in any decisions."
- Regular questionnaires were sent out to family members with recent ones having been analysed and all responses were positive. The registered manager told us if any negative responses were received then these would be followed up and an action plan put in place to address them.

End of life care and support

- There was no one currently receiving end of life support at the time of our inspection. However,

conversations with people and their families had taken place to discuss end of life wishes.

- Easy read documentation around what happens when people die had been used to make the information easier to understand and people's individual preferences had been recorded. This included their religion if applicable, music or words the person wanted included in their funeral and where they wanted to be buried.

Is the service well-led?

Our findings

Well-Led – this means we looked for evidence that service leadership, management and governance assured high-quality, person-centred care; supported learning and innovation; and promoted an open, fair culture.

At the last inspection this key question was rated as Good. At this inspection this key question has remained the same. 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

- All people, relatives, staff and professionals we spoke to gave us positive feedback about the service and the registered manager. One relative said, "The staff and manager do go above and beyond to give everyone a good life." Another relative said, "We always feel that we are consulted and that [relative's name] is included in everything and the staff genuinely want what's best for them."
- The registered manager and provider had created a culture where people had choice in their daily life, and staff promoted people's independence by supporting them to make decisions made about their care and how they spent their time. One professional told us, "Interactions and engagement [with people] are always positive and supportive, staff are very receptive."
- The registered manager and the provider were committed to supporting staff to enjoy and thrive in their roles, and considered best practice standards when caring for people. For example, all staff are involved in the Dignity Champion campaign. This is to ensure all staff are aware of and promote dignity for people at all times. The deputy manager had recently been nominated for a Dignity in Care award. Staff told us they felt supported and appreciated by the management team. One staff member said, "They are a very supportive company. They are family run and are always available for us. We are made to feel important and we get "thank you" a lot."
- The service was led by an experienced registered manager who had been in post for a number of years and knew people extremely well. It was clear from speaking to the registered manager that the wellbeing of people and staff was at the centre of everything they did.
- COVID-19 presented many challenges and had put pressure on people and staff. To help support everyone through this the registered manager and provider had worked hard to support staff as much as possible to ensure they could give people the same level of care and support as usual. For example, extra staff were on shift due to people being at home more to enable activities to be undertaken as people were unable to go out. Staff gave us examples of how the management team had supported them with flexible working and bonuses to show their appreciation for all their hard work. One staff member said, "We recently got a bonus for all our hard work through COVID-19 and management have been great at being understanding if we have personal things going on."

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

- People and staff were actively encouraged to be involved in the running of the service by the registered

manager. Open and honest communication was encouraged, and people had regular meetings to discuss their goals and achievements.

- We saw where goals were set, people received support to help them achieve these. For example, one person wanted to be involved with staff interviews. This was arranged and the person was able to give their feedback about the potential new staff member. One staff member said, "We do have meetings to discuss people's goals, but sometimes it will just be something someone says during a conversation that can turn into an idea for them to do."
- All staff we spoke to told us they felt supported and enjoyed working at the service. One staff member said, "It might sound a bit cheesy, but I just like the way the service is set up, we are like a family. We all get involved in decisions and are able to give our opinions."
- The registered manager told us that feedback questionnaires for people and staff around gender and the use of pronouns were being updated. Work had also been done around raising awareness of hidden disabilities to ensure that reasonable adjustments could be made when supporting people in the community.

Working in partnership with others

- Staff and the registered manager had good relationships with various social care and health professionals and worked in partnership to achieve good outcomes for people. This included weekly online GP calls, working with the community nursing teams to get COVID-19 specific hospital passports and online assessments with social workers. This meant people had access to relevant professionals when needed and received timely resolutions to any issues.
- A social care professional told us, "I have seen staff support the service users to meet their needs, work closely and professionally with family and other professionals. I have always had a good relationship with management and both past and present staff."

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

- The registered manager understood their regulatory responsibilities and kept themselves up to date with current legislation. All staff spoken with were clear about their roles and were dedicated to getting the best outcomes for the people they supported.
- Various quality assurance systems were in place to monitor and improve the service. The registered manager undertook quality audits at regular intervals. These included medication, infection control and care plans. These were analysed to look for any trends and to identify any ways to mitigate further incidents.

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; Continuous learning and improving care;

- The registered manager operated in an open and transparent way. Where things had gone wrong we saw relatives and relevant professionals had been informed. One relative told us, "The communication from them all [staff and registered manager] is second to none, we always feel informed and included."
- The registered manager was a member of various groups to ensure they kept themselves up to date with current legislation and to continually learn and ensure the best outcomes for people.