

E2Inspire C.I.C. Has 2 be Happy Care

Inspection report

Gatehouse White Cross Industrial Estate, South Road Lancaster Lancashire LA1 4XQ Date of inspection visit: 18 March 2019 22 March 2019 25 March 2019

Date of publication: 29 April 2019

Tel: 01524382764

Ratings

Overall rating for this service

Outstanding $rac{1}{2}$

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: Has 2 Be Happy Care is a domiciliary care agency which provides personal care to people living in their own homes and supported living services. At the time of our visit 33 people were being supported.

People's experience of using this service:

The registered provider continued to be committed to developing a holistic service which was personcentred and extremely responsive to people's needs. Outcomes for people were consistently positive. The service was described as "inspiring," and, "the best thing since sliced bread."

Relatives praised the ways in which people's quality of life had improved since their family members had used the service. We were repeatedly told staff made a difference within people's lives. One relative told us the service had been life changing for their family member.

There was a strong person-centred culture which ran throughout the service. Staff were motivated to make a difference and cared for people in ways that exceeded expectations.

The service was committed to ensuring people's voices were promoted and listened to. They worked innovatively to ensure people could be heard and understood. People were routinely involved in their own care planning and the development of their service.

People were supported and encouraged to be involved in the design and management of the service. For example, we spoke with a group of people who were involved in recruiting staff for the service. They told us their views were always taken seriously.

Everyone we spoke with said they were extremely happy with the service and would recommend the service to other people.

We were repeatedly told by people and relatives the service was extremely well-led. We found evidence during the inspection process which confirmed this was the case. Leadership within the service was strong and focussed upon striving for and maintaining a person-centred service.

Managers and staff had a clear vision of what was required of a quality service and excelled in providing this throughout the service. Feedback was continuously gained from all parties to develop and improve the service.

The service has been developed and designed in line with the principles and values that underpin Registering the Right Support and other best practice guidance. This ensures that people who use the service can live as full a life as possible and achieve the best possible outcomes. The principles reflect the need for people with learning disabilities and/or autism to live meaningful lives that include control, choice, and independence. People using the service receive planned and co-ordinated person-centred support that is appropriate and inclusive for them.

People were supported 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.

People said they were assured staff were experienced and appropriately trained. Staff worked in partnership with families to develop and provide training to staff.

The registered provider had invested in technology and was in the process of implementing it throughout the service to increase efficiency and further improve outcomes for people.

Staff were described as reliable, kind and caring. We were provided with many examples of when staff had gone the extra mile.

Processes continued to be embedded within the service to promote safety. People and relatives confirmed safety was always considered.

The management team worked proactively to ensure individual concerns were identified and acted upon before they became a complaint. People told us they had never had any reason to complain but were confident any complaints would be dealt with effectively and professionally should they ever need to.

Rating at last inspection: Good (08 September 2016)

Why we inspected: This was a planned and scheduled inspection.

Follow up: The next scheduled inspection will be in keeping with the overall rating. We will continue to monitor information we receive from and about the service. We may inspect sooner if we receive concerning information about the service.

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

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	
Details are in our Safe findings below.	
Is the service effective?	Good ●
The service remained good.	
Details are in our Effective findings below.	
Is the service caring?	Outstanding 🛱
The service had improved to outstanding	
Details are in our Caring findings below.	
Is the service responsive?	Outstanding 🛱
The service remained outstanding	
Details are in our Responsive findings below.	
Is the service well-led?	Outstanding 🛱
The service had improved to outstanding	
Details are in our Well-led findings below.	



Has 2 be Happy Care

Background to this inspection

The inspection:

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

Inspection team:

This inspection visit was carried out by one adult social care inspector. The adult social care inspector was supported by an Expert by Experience who made telephone calls to people and relatives to gain feedback about people's experiences. An Expert by Experience is a person who has personal experience of using or caring for someone who uses this type of care service. The Expert by Experience had knowledge of caring for a person with a learning disability.

Service and service type:

This service is a domiciliary care agency. It provides personal care to adults living in their own homes.

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 48 hours' notice of the inspection visit to be sure the registered provider, staff and people they supported would be available to speak with us.

Inspection site visit activity started on 18 March 2019 and ended on 25 March 2019. We visited the office location on 18 and 22 March 2019 to see the manager and office staff; to review care records and policies and procedures; and to speak with four people who used the service. Additionally, we visited two people, with their permission at their homes. We made telephone calls to people and relatives on 18 and 25 March 2019.

What we did:

Before the inspection took place, we reviewed information we held about the service. This included previous inspection reports and notifications submitted by the provider relating to incidents, accidents, health and safety and safeguarding concerns which affect the health and wellbeing of people who used the service. We also spoke with the Lancashire County Council contracts and commissioning teams and Healthwatch. Healthwatch is a national independent champion for people who use healthcare services. This allowed us to gain information relating to the quality and safety of service being provided. We used this information to develop our inspection plan.

During the inspection spoke with six people and six relatives by telephone. We spoke with three members of care staff and the registered manager and nominated individual.

We visited the office and looked at a variety of records. This included care records relating to three people who used the service. We also looked at information related to the management of the service. This included quality audits, records of accidents, incidents and complaints and recruitment files of three staff. We did this to ensure the registered manager had oversight of the service and to ensure the service was appropriately managed.

Following the inspection visit we spoke with three health and social care professionals to find out their views on Has 2 Be Happy Care.

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.

Assessing risk, safety monitoring and management

• People were protected by good risk management.

• Relatives told us their family members could take positive risks to maximise their control over their lives. We were provided with many examples where care had been developed to promote independence and empower people.

• People were empowered to keep themselves safe. We saw evidence of partnership working with Lancashire Fire and Rescue Service and people who used the service.

Staffing and recruitment

• The provider continued to have suitable systems to ensure staff were suitably deployed to meet the needs of people.

• People and relatives told us they were happy with staffing levels and told us they were supported by a consistent staff team. One relative said, "There seems to be a small cohort of three or four that come, to allow for holidays and sickness etc."

• The provider had arrangements to cover unplanned staff absence. People told us on the whole staff were reliable and said they had never experienced any missed visits. We were told the management team would provide care and support in the event of being unable to cover unplanned absence.

• People and relatives told us the reliability of staff contributed to the wellbeing of people who used the service. A person told us, "I am happy now, staff come." One relative said, "My [family member] always receives care from staff they know and like, they are never expected to cope with a stand-in. There is always absolute punctuality within the service."

• The service had recently invested in technology to allow managers to select staff with the correct skills to complete calls. The system also allowed the provider to plan travel routes to ensure staff had suitable travel time between visits.

• Relatives told us staff were flexible and accommodating and were not rushed with their visits. One relative said, "They are so calm, not rushed and relaxed. If something goes wrong or [relative] needs extra time it's not a problem. They will just stay on."

• Staff confirmed this was the case. They told us the management team were accommodating and said in the event of emergencies there was flexibility for them to extend people's visits to ensure people were safe.

Systems and processes to safeguard people from the risk of abuse

• Systems and processes continued to protect people from the risk of harm and abuse.

• People and relatives told us safety of people was always considered. Feedback included, "Oh I definitely feel safe. There is always someone if I need them." And, "I totally trust them with my [relative]. I have peace of mind."

• Staff confirmed they had received safeguarding training and had access to a safeguarding policy. They understood how to act on any allegations of abuse and said they were confident members of the management team would respond appropriately to any concerns raised.

Using medicines safely

• Medicines were managed safely and in line with good practice guidance.

• People told us they were happy with the support they received with their medicines. Feedback included, "Staff do my tablets every day." And, "I trust them more with my [relatives] medicines than I do myself because they never forget to give them."

• Staff who administered medication said they had received appropriate training.

Preventing and controlling infection

- Processes were embedded to protect people from risk of harm from infection.
- Staff told us they had received infection control training. They confirmed there was sufficient personal protective equipment, such as disposable gloves and aprons to maintain good standards of infection control. People and relatives confirmed staff used these when they visited and provided personal care.
- One relative told us staff were exceptional at considering infection prevention and control techniques and this had contributed to increasing their relatives' health and well-being.

Learning lessons when things go wrong

- The provider understood the importance reflecting on incidents within the service to look at where things had gone wrong so action could be taken to prevent them happening again.
- Although they were few, accidents and incidents were recorded and reviewed by the registered manager so any trends or patterns could be highlighted and action taken to reduce risks to people and staff.

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 people's feedback confirmed this.

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

- The service understood the importance of working with other agencies to ensure timely effective care. People were supported to live healthier lives.
- The service took a holistic approach to meeting people's health and well-being requirements. Holistic care promotes people's physical and mental health. For example, the service recognised good health could be developed through exercise, healthy eating, socialising and developing individuals' self-esteem and worth.
- Two relatives we spoke with praised the way in which people's lives had changed since being supported by the service. One relative told us their family member had not been admitted to hospital for over 12 months. They said this was exemplary and they couldn't remember when this last occurred. They also confirmed there had been a reduction in input from district nurses as their family members skin integrity had improved.
- •Another relative told us there had been a marked improvement in their family members health which had enabled medical professionals to review and reduce medicines which were used to manage behaviours which challenged.
- We spoke with one carer who told us a person they supported had had limited contact with health and social care professionals. They told us staff supported the person to make contact so they could access all the required services to maintain their health and well-being. We saw evidence this had positively impacted upon the person's health.

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

- People were appropriately supported to maintain a balanced diet in line with good practice guidance.
- Staff assessed people's dietary needs to ensure enough information was gained so an individual care plan could be designed. This included people's food preferences, if the person had any allergies, cultural or spiritual needs or health requirements.
- When people required support with meals, people told us they were happy with the support they received. One person said, "Staff are good cooks. We make our own dinners but they help with tea. We do it together."

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

- The management team understood the importance of taking people's needs and preferences into account and delivering care in line with standards and guidance.
- The management team assessed people's needs before providing a service. They did this to ensure the service could meet the person's individual needs. This included liaising with families and health and social care professionals whenever appropriate.
- •Care plans reflected peoples wishes and preferences. Staff regularly reviewed care plans and updated

when people's needs changed.

Staff support: induction, training, skills and experience

• The registered manager understood the importance of having a suitably qualified and knowledgeable workforce.

• Partnership working with families was encouraged. We spoke with one relative who confirmed they provided individualised training to staff working with their family member. They said in addition to providing training they mentored staff to promote positive outcomes for their family member.

• People and relatives told us they considered the staff team to be appropriately trained and skilled to meet their needs. One relative said, "Without a shadow of a doubt they are very well trained." Another relative said, "Staff are most definitely well trained. I have seen such a difference in my [relative] (since being supported by Has 2 Be Happy Care.)"

• We spoke with a staff member who had recently been employed within the service. They told us they completed an induction period when they first started in their role. This included shadowing more experienced members of staff.

• Staff told us support in their role continued through their employment. Staff confirmed they received regular supervision which included feedback about their performance and enabled them to discuss any concerns, training and development.

• Staff praised the supportive relationship provided by the management team and told us they could be contacted at any time for advice and guidance.

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 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.

- The registered manager understood the principles of the MCA and their responsibilities.
- People told us staff routinely sought consent before they provided any care and treatment.
- When people lacked capacity, the service worked within the principles of the MCA.

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

• The service understood the importance of developing an inclusive service to meet people's needs. One person was living in an unsafe environment without appropriate food storage facilities. The service linked in with another charity to find equipment for the person.

• The registered provider understood the importance of technology to keep people safe. Technology was used innovatively to promote safety and independence. One person was living with dementia but liked to go out for walks. Staff used a voice activated sensor to suggest the person did not go out until staff arrived on duty. In addition, the person wore a GPS watch so staff could trace the person in the event of an emergency.

• The service adapted and responded to people's needs. For example, accessible information was available to people who required this.

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 truly respected and valued as individuals; and empowered as partners in their care in an exceptional service

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

• There was a strong person-centred culture throughout the service and staff were committed to making a difference in people's lives.

- One relative told us support from the service had been, "life-changing" for their relative. Another relative said, "The service does what it says, staff have to be happy. They have made such a difference to me and my [relative]."
- People consistently spoke extremely highly of the relationships they had developed with staff. Feedback included, "They are amazing." And, "They are the best things since sliced bread."
- Written feedback received by the service also commended the skills of staff and the positive outcomes experienced by people. One relative had documented, "You have the best carers out there. I feel they are part of the family and often go above and beyond expectations."

• We saw evidence of staff going the extra mile to help people. One person was living with dementia and had no additional family support and their home was in a poor state. They confirmed staff encouraged and supported them to decorate their home to make it more pleasing for them to live in. A staff member said, "We have made the house much brighter."

• Care provided to people often exceeded expectations. For example, one staff member cooked a Christmas dinner for a person they looked after and visited them on Christmas day with the meal. The person confirmed staff stayed and provided them with company so they weren't celebrating alone.

• There was a strong emphasis on supporting people with empathy and compassion. One relative commended staff for having a deep interest in their family member. They said this had helped improve their family members self-esteem, confidence and progress. • Staff had a good understanding of protecting and respecting people's human rights. They talked with us about the importance of respecting people's differences and being aware of their diverse needs. We were made aware of one person who had been supported by the service to embrace their gender. Staff had supported the person to develop confidence and build networks to help them feel comfortable and accepted.

• Relatives told us their own health had also improved since their family members had received a service from Has 2 Be Happy Care. One person said, "They have saved me. I was in crisis. We would have both ended up in hospital if it wasn't for them." Another relative said, "I can sleep well now, knowing my [relative] is being looked after."

• Technology had been used to promote and develop effective care teams around individuals. The service had invested in an application which reviewed staff values and behaviours. The registered manager said this was used to ensure staff were well-matched to people and had the correct predicted values to ensure people were well-supported.

Respecting and promoting people's privacy, dignity and independence

- Privacy, dignity and independence was always considered and promoted.
- One relative said, "The service is highly mindful of privacy. They never thoughtlessly traffic personnel around [relatives] property."
- Care plans detailed people's skills and strengths and areas in which assistance was required We were repeatedly told that staff motivated people to develop and excel within their lives.

• The service had a good understanding of the importance of dignity, independence and human rights. This was embedded within the service. One relative told us due to effective working from staff their family members restrictions had reduced and said this had promoted the person's independence and right to a family life. Another relative commended the way in which dignity was promoted with their family member. They said they had seen a big difference in the way the service considered dignity and provided care in comparison to other agencies they had used."

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

• People were involved in making decisions about their care. We saw people had been consulted with about how and when they wanted support.

• Relatives praised the way in which staff persevered to encourage people to make their own decisions. One relative said, "My [relative] is given all the time they need to complete tasks, without a staff audience making them feel hurried."

• Staff understood the importance of working innovatively and adapting communication styles to ensure all people who used the service were listened to and offered the opportunity to express their views. We were provided with examples of staff using photographs, soft toys and mirrors to encourage and promote communication.

• People and relatives confirmed the management team sought feedback from them about the service on a frequent basis. Two people told us they had expressed concerns about a member of staff. Action was taken to ensure the staff member did not work with the people again.

• During the inspection we met with five people who were spending a day in the office recruiting new staff. The registered manager had spent time with the group, exploring their thoughts and feelings about what made a good care worker. People had been supported to develop interview questions which were important to them and their lives so they could address these with potential new staff. People were excited about the prospect of being involved in choosing staff and were aware of their rights to say no to potential staff they did not like.

• When people were unable to express their own views and make decisions, the registered manager was aware of the importance of ensuring suitable people were called upon to help them make decisions. This included family members of people with legal responsibility for making choices within a person's life.

• The registered manager was aware of advocacy services and the role they can play in helping people to make decisions. An advocate is an independent person who can assist people to make decisions about their health and well-being.

Is the service responsive?

Our findings

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

Services were tailored to meet the needs of individuals and delivered to ensure flexibility, choice and continuity of care.

Planning personalised care to meet people's needs, preferences, interests and give them choice and control • People and relatives told us there was a continued emphasis on the provision of high-quality, flexible person-centred care. Feedback included, "No other service I am aware of strives for personalisation and flexibility as this one does." Another relative described the service as "inspiring."

- Care continued to be extremely personalised and centred on the individual. People had control over their lives and how their support was delivered. One relative said, "My [relative]'s life is not controlled by rota, the service makes sure of this with us. My [relative] is allowed to lead his daily routine himself with this service, right down to the finer details which matter so much to him with autism."
- Relatives told us there was a great emphasis on supporting people to achieve their potential. This resulted in people experiencing positive outcomes which had contributed to self-development and growth. One relative told us the service stretched boundaries and motivated people to try new experiences.
- Consideration was taken to ensure staff and people were matched according to their interests. We received positive comments from family members about how well-suited staff were to their family members. One person had a love of horses, they were supported by a staff member who had a horse and they spent time together sharing their hobby.
- We found the service excelled in supporting people. We were provided with an example of when the service had gone above and beyond to support a person to maintain their support package.
- Professionals we spoke with praised the skills of staff, their motivation and ability to provide high quality care.
- Staff understood and were motivated to provide person-centred care. One staff member said, "The way I see it, is they are the customers and our employers. We are supporting them to live the life they want to lead."
- Arrangements for provision of activities for people were made in line with good practice guidance, "Think local, act personal" which has an ethos of building personalised community based supports.
- People told us they continued to live fulfilled lives. One person enthusiastically told us their life was hectic doing lots of activities. They told us they had a job as a milk-man, went skiing and was part of the special Olympics, they had a gym membership and went to Zumba. They told us before Has 2 Be Happy Care supported them they had bad experiences of staff not being available to support them and having to cancel activities. They said this was not the case with this service. They said, "Has 2 Be Happy has made me happy again." Another person also praised the service. They said, "They make me happy. I get to do things I want."
- The registered person had completed a piece of work to empower family members and people to use the service flexibly to meet individual needs.
- We saw the service was working innovatively within the financial constraints of personal budgets. The service was in the infancy of developing opportunities for people to be involved in social enterprise schemes such as pop up shops and fundraising campaigns to help other community charities. The registered

provider explained this enabled people to have meaningful occupation whilst at the same time maximising their personal budgets.

End of life care and support

• The registered manager understood the importance of developing person-centred support for people who are at the end of their life.

• People had been supported to look at how they wanted to spend their time when they had been placed on end of life care. The registered manager said, "Everyone's to do list is different."

• The registered manager understood the importance of providing continuity to people at the end of their life. They told us rotas could be changed to ensure people had staff supporting them, who knew them well and who the person wanted to be with.

• The registered manager said they were aware of their limitations in providing end of life care and this had been communicated to people. Additionally, they had links with the hospice for advice and guidance.

Improving care quality in response to complaints or concerns

- The provider continued to have suitable systems for responding to complaints.
- People and relatives were aware of the complaints procedure. They said they had never made any complaints, as they had never had any reason to do so.
- Everyone said they were confident any complaints raised would be dealt with professionally.

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 highquality, person-centred care.

Planning and promoting person-centred, high-quality care and support with openness; and how the provider understands and acts on their duty of candour responsibility; Working in partnership with others.

- There was a well understood, articulated person-centred culture that resulted in people's experience of receiving care consistently exceeding their expectations.
- People and relatives were repeatedly complimentary about the way in which the service was managed. We were repeatedly told the service was a well-led, person-centred service. Feedback included, "It's outstanding without a shadow of a doubt. You can't fault them. They are professional, reliable, respectful and flexible." And, "They are amazing." Also, "I have interviewed and used many services I would say this service break away from same old."
- The registered manager and management team demonstrated a continued commitment to providing person-centred, high-quality care. People's wishes were continually respected and care was re-arranged around people's preferences and requirements.
- Staff spoke proudly of the way the organisation operated and how people received positive outcomes when being supported by the service. They described a culture where everyone belonged and was valued.
- We saw the person-centred ethos of care extended to staff. Staff told us they were cared for and nurtured by the managers in the office. One staff member said, "I love it. This is one of the best jobs I have had. Everyone is very helpful and very supportive." Another staff member said, "I am so proud. They saw potential in me and have supported me to make a difference."
- We spoke with two members of staff with previous experiences of working in care. They spoke enthusiastically about the service and the positive morale within the service. They said they had witnessed changes in staff and people's lives since the service had been supported by Has 2 Be Happy Care. One staff member said, "There's a massive difference in people. Morale is higher, we all pull together and care is now person-centred."
- The management team was committed to developing a high-quality service. They did this through networking with other agencies to ensure care and support was shared and delivered in line with good practice. The management team had developed links with two universities, and had been provided with advice and guidance to influence and strengthen leadership within the service.
- •The provider had developed and implemented a strong business model which had taken into consideration financial restraints which had the potential to impact negatively upon people's lives. Additionally, the business model had enabled the service to invest further in technology to maximise care and support provided to people.
- The registered provider had clear vision and values for the service which were cascaded and embraced throughout the staff team. Values based recruitment assisted the service in only recruiting staff with the same shared values.

• When mistakes had been made within the service, the duty of candour had been applied. We spoke with one family member, they told us an incident had happened which was so minor they weren't aware it had occurred. They said the registered manager visited them immediately and apologised to them and a carer who was also involved. They arrived with flowers for both the relative and carer and apologised for allowing the service to fall below their expectations. The family member said, "They set very high standards."

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

• The provider actively ensured people and relatives were engaged and consulted with always. Consultation took place directly face to face and through satisfaction surveys. We reviewed completed surveys and saw feedback was consistently positive. 84% of respondents said the service was extremely well-led.

• People were included and encouraged to be involved in how the service was run. For example, they were involved in the recruitment of staff and consulted with about the standard of staff. They confirmed their thoughts and opinions were genuinely considered and concerns were acted upon.

• Staff told us principles of inclusion extended to the workforce, where equality was promoted.

• The service was an important part of the community. People who are typically marginalised in society were actively encouraged to be volunteers within their own communities. Everyone we spoke with told us they were encouraged to have active roles in the community. We saw examples of people working for charities and in other voluntary roles.

• The provider told us the service was currently in the process of working with a charity in the area to support them in their new venture. We received confirmation from the charity that this was the case.

Managers and staff are clear about their roles, and understand quality performance, risks and regulatory requirements

• We found the service had clear lines of responsibility and accountability. The registered manager, management team and staff were experienced, knowledgeable and familiar with the needs of people they supported. Managers worked regular shifts providing direct care and support to get to know people better and understand their routines and characters.

- Staff were clear about everyone's role within the service and praised the way all staff worked effectively together.
- People praised the seamless service they received and the responsiveness and flexibility of the service.
- To ensure compliance with regulations, the service had sought professional assistance in developing their policies and procedures. The service's policies and procedures now referred to corresponding regulations and good practice guidance.

• Since the last inspection the management team had worked with a consultant and had developed a business development plan which focussed on planned growth that focussed on maintaining quality and stability within a financially competitive market.

• The registered manager had their ratings on show and had submitted statutory notifications as required to the Care Quality Commission. This showed us they understood these regulatory responsibilities.

Continuous learning and improving care

- There was a strong emphasis on continuous improvement. The views and experiences of people who used the service and relatives were at the core of service development.
- Professional advice and guidance was sought whenever necessary to improve the standard of care. The service had consulted with professionals to review and invest in technology to improve standards of care. The service was currently in the process of embedding electronic care records and an on-line training system for staff.
- The management team completed a range of quality audits to ensure they provided an efficient service.

These included medication, care records and spot checks. When concerns were identified, staff were consulted with and action taken. This meant improvements could be made to continue to evolve and provide a good service for people.