

New Prospects Association Limited

New Prospects Association Limited - 53 Kilburn Gardens

Inspection report

53 Kilburn Gardens
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Ratings

Overall rating for this service

Good ●

Is the service safe?

Good ●

Is the service effective?

Good ●

Is the service caring?

Good ●

Is the service responsive?

Good ●

Is the service well-led?

Outstanding ☆

Summary of findings

Overall summary

The inspection took place on 24 March 2016 and was announced. We gave the provider 48 hours' notice because staff and people were often out in the local community and we wanted to make sure someone would be in.

We last inspected the service in May 2014 where we found that they were meeting all the regulations we inspected.

New Prospects Association Limited - 53 Kilburn Gardens provides accommodation, care and support for up to three people who have learning disabilities. There were three people using the service at the time of our inspection.

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

People, relatives and staff were extremely complimentary about the provider and management of the service. One staff member said, "It's a very good company, our CEO is brilliant – really driven about their [people] needs." The manager led by example and was "hands on" with all aspects of the service. There was a strong emphasis on continually striving to improve. The manager, staff and people carried out a number of checks to monitor the quality and safety of the service.

Staff were highly motivated and demonstrated a clear commitment to providing dignified and compassionate care and support. They told us that they enjoyed working at the service and morale was excellent.

The service used inclusive ways to enable people to be empowered and voice their opinions in all aspects of the service. Various feedback systems were in place to obtain their views. People and relatives described the responsiveness of staff as "better than brilliant" and stated that staff went, "above and beyond." Staff found imaginative ways to meet people's needs and enable them to live as full a life as possible. A creative activities programme was in place to help meet people's social needs. There was a complaints procedure in place and people knew how to complain.

People told us that they felt safe. There were safeguarding policies and procedures in place. Staff were knowledgeable about what action they would take if abuse was suspected. There were no ongoing safeguarding concerns.

There was a safe system in place for the management of medicines.

The building was safe and generally well maintained. The bathroom was due to be refurbished. People's bedrooms were personalised to suit their preferences. Various checks and tests were carried out to make sure the premises were safe.

People, relatives and staff told us there were enough staff to meet people's needs. On the day of the inspection, we saw that people's needs were met by the number of staff. There was a training programme in place. Staff were trained in safe working practices and to meet the specific needs of people who lived at the service.

People were supported to receive a suitable nutritious diet. People, relatives and health care professionals spoke positively about the caring nature of staff. We observed that people were cared for and supported by staff with kindness and patience.

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.

People told us that they felt safe. There were no ongoing safeguarding concerns. Medicines were managed safely.

The building was generally well maintained and checks and tests were carried out to ensure its safety.

Safe recruitment procedures were followed. People, relatives and staff informed us that there were sufficient staff deployed to meet people's needs.

Is the service effective?

Good 

The service was effective.

Staff told us and records confirmed that training, supervision and appraisal arrangements were in place.

Staff were following the principles of the Mental Capacity Act 2005.

People's nutritional needs were met and they were supported to access healthcare services.

Is the service caring?

Good 

The service was caring.

People and relatives told us that staff were caring. We observed that care and support was provided with patience and kindness.

People were treated with privacy and dignity.

Records evidenced that people and relatives were involved in people's care and treatment.

Is the service responsive?

Good 

The service was responsive.

People and relatives described the responsiveness of staff as "better than brilliant."

Staff found imaginative ways to meet people's needs and enable them to live as full a life as possible. A creative activities programme was in place to help meet people's social needs.

There was a complaints procedure in place and people knew how to complain. Effective feedback systems were in place to obtain people's views.

Is the service well-led?

The service was very well led.

The service used inclusive ways to enable people to be empowered and voice their opinions in all aspects of the service.

There was a strong emphasis on continually striving to improve. The manager, staff and people carried out a number of checks to monitor the quality and safety of the service.

Staff were very motivated and spoke enthusiastically about working at the service.

Outstanding 

New Prospects Association Limited - 53 Kilburn Gardens

Detailed findings

Background to this inspection

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

The inspection was carried out by one inspector. We visited the service on 24 March 2016. The inspection was announced. We gave the provider 48 hours' notice because people and staff were often out in the local community and we wanted to make sure that someone would be in.

We spoke with two of the three people who used the service. We spoke with three relatives following our visit to obtain their views of the service.

We spoke with the nominated individual who was also the head of services, the special projects manager, the registered manager, four support workers and the provider's administrator. We examined two care plans and records relating to staff. In addition, we checked records relating to the management of the service such as audits and surveys.

We consulted a nurse practitioner, community learning disability nurse and a social worker. We also conferred with a local authority safeguarding officer, a commissioning manager and a local authority contracts officer. We used their comments to support this inspection.

We checked information which we had received about the service prior to our inspection. This included notifications which the provider had sent us.

We did not request a provider information return (PIR) prior to the inspection. This 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.

Is the service safe?

Our findings

People told us that they felt safe. One person said, "I feel safe, I speak up for myself, I'm not frightened." A relative told us, "We would be able to tell if he wasn't happy." We read the minutes of a "Householder" meeting which was held 28 February 2016. This stated, "[name of person] knows to point out if anyone shouted at her, she would tell someone in charge." This was confirmed by the person themselves.

There were safeguarding policies and procedures in place. Staff had undertaken safeguarding training and were knowledgeable about what action they would take if abuse was suspected. No concerns were raised. Staff undertook an annual safeguarding competency check. The manager said, "The safeguarding competency checks are just an extra thing – to remind staff and go over the signs of abuse and what they would do."

We looked at the way medicines were managed. People told us that staff supported them with their medicines. There was a safe system in place for the ordering, receipt, storage, administration, recording and disposal of medicines. We checked people's medicines administration records and found that these were completed accurately. Unwanted medicines were returned to the pharmacy.

We spent time looking around the premises. We saw that the building was generally well maintained. This was confirmed by people with whom we spoke. One person said, "Everything works except for me!" We noticed however, that some of the tiles were damaged in the bathroom. The manager told us that this had already been identified and the bathroom was going to be refurbished within the next few weeks. Checks and tests were carried out on all aspects of the environment and equipment. No concerns were noted.

Fire safety checks were carried out and people were reminded of the fire drill. One person said "If there was a fire I would shout out to people 'fire get out.' I just go outside and over the road and we would go to the other bungalow."

We checked staffing levels at the service. Relatives told us that there were sufficient staff deployed to meet people's needs. One relative said, "There are more than enough staff." We observed people were able to access the local community and there were sufficient staff on duty to support people to meet their social needs. The manager told us, "The rotas are person centred and organised around the needs of people and what is recorded on people's planners. If [name of person] is going swimming and [name of person] is going to choir, then we will need more staff."

Staff told us and records confirmed that appropriate recruitment checks were carried out prior to starting work at the service to help ensure that staff were suitable to work with vulnerable people. These included Disclosure and Barring service checks (DBS) and obtaining references. A DBS check is a report which details any offences which may prevent the person from working with vulnerable people. They help providers make safer recruitment decisions. The head of services told us that one of the most important recruitment checks they carried out was a check of the applicants' values. She explained that they used a values based computer assessment and said that a minimum score had to be achieved. She said, "If they don't meet this

score, then we won't recruit them, because they don't have the values that we want here."

Risk assessments were in place which had been identified through the assessment and care planning process. Risk assessments were proportionate and included information for staff on how to reduce identified risks, whilst avoiding undue restriction such as showering independently.

Is the service effective?

Our findings

People and relatives were complimentary about the skills of staff. One person said, "The staff know what they are doing."

All staff informed us that they felt equipped to carry out their roles and said that there was sufficient training available. One staff member said, "The training is very good here. I'm always looking to do extra training. I always think that if you can improve yourself through training, then you can improve other people's lives." Other comments included, "[Name of manager] is always putting us in for more training" and "We are always learning, you can never not learn." The manager provided us with information which showed that staff had completed training in safe working practices. This included safeguarding adults, health and safety, first aid and moving and handling. Staff had also completed training on the specific needs of people who used the service such as epilepsy and autism training.

Staff told us and records confirmed, that they undertook induction training when they first started working at the service. This was based on the Care Certificate. The Care Certificate is an identified set of standards that care workers adhere to in their daily working life. It was developed to address inconsistencies in training and competencies in the workforce so that people and families experiencing care services can have confidence that all staff have the same introductory skills, knowledge and behaviours. This meant that staff felt prepared when they started working independently at the home and supported the effective delivery of care. One new staff member said, "The staff all rallied around when I first started. They put me through the training. I've just done my NVQ. They are all so supportive" and "All the staff are so clever and so on the ball, I've learned such a lot. Everyone brings something to the team; they are just so fabulous to work with."

Staff told us that they felt well supported. We noted that staff supervision sessions were held and an appraisal was undertaken. Supervision and appraisals are used to review staff performance and identify any training or support requirements.

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. We read that one person had a DoLS authorisation in place.

We found that staff were following the principles of the MCA. Mental capacity assessments and best interests decisions had been carried out for important decisions such as going on holiday and the use of lap belts for wheelchairs.

We checked whether people's nutritional needs were met. One person told us that staff supported her to make healthy eating choices. She did tell us however, "I do prefer fish and chips!" One relative told us that staff monitored her family member's weight to ensure that their weight remained within healthy limits.

Support plans contained information about people's dietary needs and preferences.

People told us that staff supported them to access healthcare services. Records showed details of appointments with and visits by health and social care professionals. We saw evidence that staff had worked with various agencies and made sure people accessed other services in cases of emergency, or when people's needs had changed, for example GP's, district nurse teams, consultants, social workers, podiatrists and dentists.

Is the service caring?

Our findings

People and relatives were complimentary about the caring nature of staff. One person told us, "When you are upset they are there for you." She also told us, "It's nice and friendly here. The staff are warm hearted." A relative said, "They are all angels."

Staff spoke with pride about the importance of ensuring people's needs were met. One staff member said, "If there was a scale of one to 10, I would say they get 11-12 for the care they get. The staff care about the clients. It's always about the clients."

We saw positive interactions between people and staff. One person appeared upset. We saw a member of staff come over to the person and put their arm around their shoulders and said, "Where's that smile?" The staff member sat down and chatted to the person.

The manager and one person enjoyed recounting a story about when they had been out in the local community and a member of the public had thought that the person was the manager's mother. The manager said, "I thought that was quite a nice mistake to make because they must have thought that we got on well."

Staff were knowledgeable about people's needs and could describe these to us. A staff member told us how one person enjoyed a hug and liked to sit and have a "cuppa" with staff. One person was a huge Beatles fan and we saw that their room was filled with Beatles memorabilia. A member of staff put on a Beatles DVD and the person and staff member sang along to, "Yellow Submarine." A staff member explained the importance of double checking with one person about what they wanted. The staff member said, "Sometimes [name of person] will just repeat the last thing you ask so you have to repeat what you said in a different way to make sure [you know what they want]."

A keyworker system was in place. One person said, "I have two keyworkers my friend [name of staff member] and my friend [name of staff member]." This system helped ensure that people had specific staff who they could go to for advice, reassurance and support to maintain their wellbeing.

Support plans contained information about people's life history, preferences, talents and gifts. We read information about one person's gifts and talents which stated, "I can change the atmosphere in the room to one of happiness." This information helped staff provide more person centred care.

People's privacy and dignity were promoted by staff. One person told us, "Nobody sees me as a person with a disability. I am [name of person]." We saw staff knocked on people's doors before they entered. One person said, "I lock the door. They [staff] knock on the door before they come in" and "I have females to look after me. Sometimes the males make me lunch." Staff explained that one person wore different coloured neckerchiefs instead of aprons to protect their clothing whilst they were eating. They said that these were more dignified (and fashionable!) than wearing an apron.

The manager was a dignity champion. She told us, "We devised a training package to go through with all staff and we talk about dignity at staff meetings and during supervision. It's all about raising awareness. We all talk about dignity and I ask staff for examples of how they promote it."

People and relatives told us that they were involved and consulted in all aspects of their care. Monthly care and planning reviews were carried out with people and their relatives. One person was unable to communicate verbally. Staff explained that they observed the individual's body language "We can tell by their body language, they have a certain look, the way they turn their head. We can tell if they're enjoying or not enjoying something." This was confirmed by a relative with whom we spoke. She told us, "The staff all understand him. You have to read his body language."

Is the service responsive?

Our findings

People and relatives told us that staff had outstanding skills and were extremely complimentary about the responsiveness of staff. One person said, "I wouldn't want to go anywhere else" and "The boss and staff know when I'm not well and see to me straight away."

Comments from relatives included, "The staff are very helpful to me. When I moved into the bungalow the staff helped me move," "They are fantastic, they will bring [name of person] over because I can't get over there anymore," "It's better than brilliant. They understand her, she will tell me that she never regrets being there – she loves it," "His health seems to have improved latterly. His medication is regularly reviewed and they watch his diet. He is happy – full of beans," "If [name of person] goes into hospital they keep me updated. They give us an update on everything – nothing is ever too much trouble," "The staff are absolutely smashing" and "They see to everything straight away, the dentist, doctor – everything."

One relative told us, "She used to use the wheelchair a lot, but now she walks everywhere. I've seen a lot of improvements since she went there." We read the service's newsletter, the Kilburn & Gardner Gazette about this person's recent achievements. The newsletter stated, "[Name of person] was very proud that she had walked over four miles that day, well done."

We read a compliment from a relative which was displayed in the entrance of the service. This stated, "The staff team at Kilburn Gardens do a great job. They are all dedicated supporters of the three residents... Nothing is too much trouble to them and I admire their commitment through all sorts of testing situations. Each member of staff truly deserves an award for working with the rest of the staff to provide an outstanding service and a comfortable home for the people they support. I am pleased to have this opportunity to let them know how much they are appreciated. [Name of relative] could not be in a better place." We contacted this relative following our inspection. She confirmed what she had written and told us that she was very happy with the service.

We spoke with a social worker who had recently been involved with the service for a short period of time. She said, "I spent quite a bit of time one day and saw that staff had a good relationship with service users that they supported and were knowledgeable about their needs." The community learning disabilities nurse said, "[Name of person] has blossomed and is much more settled. [Name of person] has thrived and put on weight and are hydrated. There has definitely been an improvement and that's been reflected in the number of seizures they have had."

Relatives were very complimentary about the activities which people participated in. Their comments included, "You never you find them in. They are always away doing arts, cooking, flower arranging. It keeps their independence and interest" and "He is never in except for a Sunday. It's such a relief knowing he's there."

People attended the provider's head office to join in a number of activities. We spoke with the provider's administrator who told us, "We do different activities, like cookery, sign and sing, drama and there's sports,

arts and crafts and film making...They do absolutely loads. We also have a social club and we have that once a week and do things like X factor nights – it's really active." People confirmed that they went to the social club and also joined in the activities which were held at head office, including the provider's choir. The head of services said, "I go [to the choir] and I get such a lot out of it and so do the people. It's open to anyone and we have some people come from the local residential home."

People were actively involved in the local community and the service were focusing on building further links. The provider employed a special projects manager who actively promoted people's inclusion within the local community.

Staff were working with people to develop their 'Circles of friends.' The aim of circles is to support individuals to become reconnected in the community and to make friendships and relationships. One person with whom we spoke was getting ready to go out for a meal. He was part of a friendship group. Staff explained that people in the friendship group met up regularly and took it in turns to agree on a venue. The person nodded when we asked whether he enjoyed going to these meetings. This meant there was an emphasis on promoting friendships to ensure people's wellbeing.

People attended activities within the local community such as flower arranging, swimming, the jazz club, cinema, and dance events. We read the service's newsletter the Kilburn & Gardner Gazette. This included photos and a summary of what people had been doing. One person had visited a local museum; they described the museum as "A load of bones and stuff!"

One person informed us that staff supported them with education and employment opportunities. We spoke with the head of services who explained that they actively encouraged people to find employment. She said that this promoted people's wellbeing and sense of worth. We spoke with one person who worked at the provider's head office. She was supported by a member of staff from Kilburn Gardens. The head of services told us, "One of the staff from the finance team is leaving and we are having a do. [Name of person] is invited because she is part of the team, she works here."

Specific tools and documentation based on best practice guidelines were used to monitor people's achievements. The head of services said, "We want to monitor what people are achieving but also see how well we are doing at promoting people's achievements." The provider used the tool, "My good life" as a means of measuring people's achievements. My good life was based on six outcomes; having friends and relationships; making choices – being in control; sharing my gifts and talents; sharing ordinary places; being respected for who I am; being healthy and staying safe. In order to meet the outcomes listed in 'My good life' people were supported to complete the 'Big Plan.' In the big plan, people got together with their family, friends and staff to plan for a good life. People who used the provider's other services also joined in to undertake their big plans at the same time. The project manager told us that the big plan was a great way to "make connections and share ideas." He also told us, "[Name of person] did the big plan, his dad got involved too. It's to help improve people's lives and make things better. It's all about sharing information and problem solving, if someone wants to do something, working out how to make that possible."

People's care and support was planned proactively in partnership with them. Support plans were in place which aimed to meet people's health, emotional, social and physical needs. One person said, "I've got my own personalised plan." One page profiles were in place which gave staff an overview of people's needs. We read one person's one page profile. Under the title, "Definite no no's" was recorded, "I don't like people telling me what to do." Life history information was also available. One person said, "Have you read my story? I wrote that. Staff showed me where the alphabet and numbers were and I typed it up." Support plans also included people's dreams, wishes and aspirations. One support plan documented that a person

wanted to learn flower arranging. The person said, "I've done it" and proudly showed us her Easter flower arrangement. Another goal was to fly on an aeroplane. "I've done that too" she said.

Reviews were carried out to monitor people's care and support to ensure that timely action was taken if people's needs changed. Monthly review and planning meetings were carried out. One person said, "I always do my monthlies [reviews]." Relatives were also invited if their family members wanted them to attend. We spoke with one relative who said, "The staff are fabulous, they go through what they've [person] been doing and all the documentation. If they've seen the doctor, they will say, 'We wanted to check this tablet or we wanted to check this out with the doctor,' they never miss anything. I can't get there now, so they come and pick me up to bring me to any meetings." The head of services told us, "The monthly review and planning meetings are so important, we discuss what has happened, but we also concentrate on what they are planning to do the next month like flower arranging and how we can make this happen."

The manager told us that every achievement was celebrated, large or small. We read the minutes of a recent staff meeting. These stated, "[Name of person] is now ordering his own lunch at the counter." The manager said, "This is a very big thing for [name of person]."

There was a complaints procedure in place. No one with whom we spoke had any complaints or concerns. One person told us that staff had supported her to make a complaint because of the care she had received at another service. We spoke with the liaison nurse for learning disabilities from the other provider's service. She said, "[Name of person] did a presentation at the governance meeting to speak about her experience and how we can improve. She was fully supported by staff [from Kilburn Gardens]." This was confirmed by the person who said, "I spoke in front of doctors and nurses. A lot of good things have come out of it."

Complaints cards were in use. The head of service said, "People just need to put their name on the card and post it. This comes directly to me and getting this card means that there is something that the person wants to talk about. I will then phone or visit them and find out what is the matter."

Is the service well-led?

Our findings

People, relatives and staff were extremely positive about the registered manager. One person said, "The boss is a good boss. She never tells us off" and "I never want the boss to leave." A relative said, "You can't fault the manager." Another said, "The manager is great, I often speak with her on the phone." Comments from staff included, "You couldn't ask for a nicer, sweeter boss," "[Name of manager] is absolutely brilliant," "[Name of manager] is marvellous – no faults. She makes sure everything is done to the highest standards" and "She is so supportive and approachable."

Staff and relatives also spoke positively about the provider and senior management staff. Comments from staff included, "They're a great company to work for," "It's not like other companies. In here you get the recognition. When I came I had no confidence, but now I have and that's thanks to the boss, staff and head office. I couldn't have come into a better company for my first job in care – I've struck gold," "It's a very good company, our CEO is brilliant – really driven about their [people] needs" and "The higher up ones are very supportive, they are always there to help." A relative said, "The Company is very good. I have been involved in various steering groups."

All staff informed us that they felt valued. There was a reward scheme in place for people and staff. People and staff could be nominated for various awards such as "outstanding achievement award" and "outstanding support worker award." People and staff had won various awards over the previous years including the family award and helping other people award. Anyone could nominate staff for an award for example people and relatives.

Staff were motivated and demonstrated a clear commitment to providing dignified and compassionate care. They told us that they enjoyed working at the service and morale was good. Comments included, "I love working here," "All the staff get on excellently," "I am so lucky to be working here, it makes my life worthwhile" and "It's not just a job – it's a massive family."

We spoke with a local authority's commissioning manager who told us the provider had scored 100% in their recent quality monitoring visit. We also spoke with a contracts and monitoring officer who told us that she had no concerns about the service.

People, relatives and staff told us that the provider's vision and values centred upon people to make sure that they were at the heart of the service. The vision and values were shared with staff, people and their representatives. We read the provider's website which stated that the aim of the service was "All about you and making sure you have the life you want. We care about making sure you have a good life." People and relatives told us that this aim was met. One person said, "I never want to leave. I am happy here."

The provider had undertaken a self-assessment with people, relatives and staff. The "Driving up Quality Code" had been used to undertake this assessment. The Driving up Quality Code is a voluntary code of conduct which was written in response to the abuse at Winterbourne View. Its primary aims include improving quality in learning disability services and promoting a culture of honesty and transparency.

Organisations that sign up to the Driving up Quality Code are expected to assess themselves annually and publish what they find, with an action plan for improvement. The head of services told us and records confirmed, that as a result of this self-assessment they had introduced "Quality checkers." Quality checkers, or the 'A team' as they were now called were a group of people who used services themselves and relatives. She said that this team would go around each of the provider's services to obtain people's views and told us, "The most important thing is finding out what people themselves think of the services – are they happy? What could be improved?" One of the people at Kilburn Gardens was a member of the A team. The head of services informed us that the A team were also going to be involved with staff induction and training. She said, "They are the ones that know what they want and can tell new staff, 'This is what we want and how it should be done.'"

The service used inclusive ways to enable people to be empowered and voice their opinions in all aspects of the service. On the day of the inspection, we were supported by one of the people who used the service. We were offered a drink as soon as we arrived and the person showed us around and answered our questions about what it was like living at Kilburn Gardens. The manager told us, "If anyone comes in we encourage people to be involved, it's their house."

People and relatives were involved in the recruitment of staff. One person told us, "I interviewed [names of staff]. I ask different questions like what would you do if I was upset." A relative said, "It's important because I need to know who is looking after my son." A staff member told us, "[Name of person and name of relative] interviewed me. It's the only interview which I've actually enjoyed – you see you get hand-picked staff here." Another staff member said, "The clients checked you out, how brilliant. It's a great way at making sure the clients get who they want."

A monthly newsletter was produced called the Kilburn and Gardner Gazette. People, relatives and staff were involved with writing and producing the newsletter. The manager told us, "We forget about all the good things we've done, so this is a good way of remembering everything." We read the minutes of the most recent "Householder" meeting which was held in February 2016. These stated, "[Name of person] is happy with the newsletter, she likes taking part. Her favourite part is the joker." One person said, "I do the birthday signs." We read some of her astrological predictions. Under Sagittarius the person had written, "To find true love you have to be brave, otherwise you might as well live in a cave!"

There was a strong emphasis on continually striving to improve. The manager, staff and people carried out a number of checks to monitor the quality and safety of the service. These included care plan, medicines and health and safety audits. People assisted with the health and safety audits. One person said, "I check to see if there are any wires sticking out or there is anything on the floor in case I trip over and check to make sure the plugs are working alright and do the temperatures of the water and see the doors and windows are alright." The manager told us, "[Name of person] is excellent, she is so observant."

Monthly unannounced visits were carried out by the provider's monitoring officer. These looked at all aspects of the service. We read that the bathroom was due for refurbishment. The monitoring officer also spoke with people and checked that they were happy. An annual audit was also carried out by the monitoring officer. We looked at the results from the last audit which was carried out in September 2015. No concerns were noted.

Monthly "Best practice" meetings were held. The manager told us, "These are held to see how we can improve the service. We look at any incidents and see what actions have been taken and any lessons learned." The manager told us and records confirmed that one person had fallen on several occasions. This had been discussed at the meeting and the manager explained that they instigated a falls record and

documented any injuries on a body map and organised a review with the person's GP.

The service worked in partnership with external organisations and promoted people's integration within the local community. The special projects manager told us, "People belong in the local community and we have to ensure that they are supported to be active citizens within the community." The manager told us and the person confirmed that coffee mornings were organised. One of the people emailed her friends and invited neighbours to attend these coffee mornings.

The provider was involved in 'The Whitley Bay Big Local Partnership which is a Lottery funded, community led initiative for all who live or work in the Big Local area to get together to improve their community. The special projects manager had written a report on the role of New Prospects. This stated, "Our involvement in the Big Local provides us mainly with a huge network of people and organisations in Whitley Bay. It provides a great platform for us to show what we have always known that the people we support are valuable contributing citizens. ...I think our involvement with Big Local has made our stated aim of becoming more of a community organisation a quick reality...We are seen as a hugely positive addition to the area, not just because of our building, but because of the people in it."

People had completed training in certain areas. One person told us that she had completed first aid and "looking after yourself" training. The head of services told us that this training included safeguarding awareness and "bosom buddies" which taught people how to check their breasts. The provider worked with external providers to deliver this training.

The provider sought to share their good practice by working with other providers. The special project manager told us that they shared their assessment tool "My Good Life" with other providers and nationally via a research website. This was confirmed by our own checks.